

# ST DAVIDS CHURCH IN WALES PRIMARY SCHOOL



## HEALTHCARE NEEDS POLICY DOCUMENT

YR EGLWYS  
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THE CHURCH  
IN WALES

<b>Date of issue:</b>	<i>November 2017</i>	<b>Review date:</b>	<i>November 2018</i>
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<b>Name of person responsible for policy:</b>	<i>Mrs Ceri Hoffrock (Headteacher)</i>		
<b>Date ratified by Governors:</b>	<i>30<sup>th</sup> November 2017</i>	<b>Governor Link:</b>	<i>Wendy Gordon</i>

## 1. Key Principles

1.1 St David's is an inclusive community that welcomes and supports pupils with medical conditions and provides them the same opportunities as others at school (both school based and out-of-school) as other pupils.

1.2 No child will be denied admission or prevented from taking up a place in this school because reasonable arrangements for their medical condition have not been made. If there are any concerns in the implementation of the policy relating to safeguarding, the school will follow safeguarding procedures.

1.3 St David's staff and Governors aim for all pupils to achieve their full potential as

- *ambitious, capable learners, ready to learn throughout their lives*
- *enterprising, creative contributors, ready to play a full part in life and work*
- *ethical, informed citizens of Wales and the world*
- *healthy, confident individuals, ready to lead fulfilling lives as valued members of society*

1.4 We recognise that healthcare issues affect each learner individually and without support to minimise disruption or barriers to their education, may have an impact on their quality of life and future chances. Therefore, staff and governors are committed to arrangements that ensure all learners can access and enjoy the same opportunities, (including trips and physical education),

1.5 We aim to properly support learners with healthcare needs so that they have full access to education, ensuring that they have the skills and knowledge to manage everyday life as independently as they can and are ready to lead fulfilling lives as valued members of society.

1.6 The governing body will ensure that arrangements are in place to support learners with healthcare needs.

1.7 Staff will consult the relevant professionals, learners and parents to ensure the needs of the learner with healthcare needs are properly understood and effectively supported.

1.8 Arrangements will also consider any wider safeguarding duties while seeking to ensure:

- Staff understand and work within the principles of inclusivity
- Lessons and activities are designed in a way which allows those with healthcare needs to participate fully.
- Training, so that staff understand their role in supporting learners with healthcare needs
- Staff feel confident they know what to do in a healthcare emergency
- Staff are aware of the needs of their learners through the appropriate and lawful sharing of the individual learner's healthcare needs.
- Whenever appropriate, learners are encouraged and supported to take responsibility for the management of their own healthcare needs.

## 2. School's Legal Requirements

2.1 Section 175 of the **Education Act 2002** places a duty on governing bodies to make arrangements to ensure their functions are exercised with a view to safeguarding and promoting the welfare of children in school or another place of learning. This includes supporting children with healthcare needs.

2.2 Section 21(5) of the Education Act 2002 places a duty on governing bodies to promote the well-being of learners at the school so far as related to the matters mentioned in section 25(2) of the **Children Act 2004**, which includes physical and mental health and emotional well-being, education, training and recreation, and social well-being.

2.3 Section 100 of the **Children and Families Act 2014** places a statutory duty on governing bodies to make arrangements to support pupils at their school with medical conditions.

2.4 A pupil's medical condition may be categorised as a disability. Under the **Equality Act 2010** it is unlawful, in the context of education, for an education provider to discriminate directly or indirectly against a pupil on the basis of their disability. Schools have a duty to make reasonable adjustments in respect of learners with healthcare needs if they are disabled.

In devising the policy reference has been made to:

- **Supporting Learners with Healthcare Needs.** Guidance. Welsh Government 215/2017
- **Guidance on the use of emergency salbutamol inhalers in schools in Wales.** Guidance. Welsh Government circular no: 015/2014
- Other existing school policies

### Definitions

#### **a). School based Individual Healthcare Plan (IHP):**

This plan is instigated by the school when it is identified that a pupil has a healthcare need (with or without a diagnosis). This is a plan for the care of the individual pupil whilst in school and may include input from a health professional and a medical healthcare plan.

#### **b). Medical Healthcare Plan:**

This is a healthcare plan provided by a health professional.

## 3. Roles and Responsibilities

### 3.1 School

St David's aims to develop and implement all arrangements in line with legal requirements. We will give consideration to how medical needs can be met, including providing learners access to information and material aimed at promoting spiritual and moral well-being and physical and mental health (**Article 17 of the UNCRC**).

### **3.2 Governing body**

The Governing Body aims to oversee the development and implementation of arrangements, which include:

- complying with applicable statutory duties above and promoting the well-being of learners.
- considering how learners can be supported to develop the skills, knowledge and emotional resilience required to uphold their rights, and the rights of others
- ensuring the roles and responsibilities of all those involved in the arrangements to support the healthcare needs of learners are clear and understood by all those involved, including any appropriate delegation of responsibilities or tasks
- working collaboratively with parents and other professionals to develop healthcare arrangements to meet the best interests of the learner
- developing and implementing effective arrangements to support learners with healthcare needs. This includes the policy on healthcare needs and where appropriate, IHPs for particular learners
- ensuring arrangements are in place for the development, monitoring and review of the healthcare needs arrangements
- ensuring the arrangements are in line with other relevant policies and procedures, such as health and safety, first aid, risk assessments, the Data Protection Act 1998, safeguarding measures and emergency procedures
- ensuring robust systems are in place for dealing with healthcare emergencies and critical incidents, for both on- and off-site activities, including access to emergency medication such as inhalers or adrenaline pens
- ensuring staff with responsibility for supporting learners with healthcare needs are appropriately trained
- ensuring appropriate insurance cover is in place, any conditions are complied with and staff are clear on what this means for them when supporting learners
- having an infection prevention policy.

### **3.3 Headteacher;**

The headteacher aims to ensure arrangements to meet the healthcare needs of their learners are sufficiently developed and effectively implemented. This includes:

- working with the governing body to ensure compliance with applicable statutory duties when supporting learners with healthcare needs
- ensuring the arrangements in place to meet a learner's healthcare needs are fully understood by all parties involved and acted upon, and such actions maintained. The headteacher directly supervises these arrangements as part of the regular reporting and supervision arrangements.
- ensuring the support put in place focuses on and meets the individual learner's needs
- extending awareness of healthcare needs across the school in line with the learner's right to privacy. This may include support, Vale Catering and agency staff, governors, parents and other learners
- appointing a named member of staff who is responsible for learners with healthcare needs, liaising with parents, learners, the home tuition service, the local authority, the key worker and others involved in the learner's care

- ensuring a sufficient number of trained staff are available to implement the arrangements set out in all IHPs, including contingency plans for emergency situations and staff absence
- having the overall responsibility for the development of IHPs
- ensuring that learners have an appropriate and dignified environment to carry out their healthcare needs, e.g. private toilet areas for catheterisation
- checking with the local authority whether particular activities for supporting learners with healthcare needs are appropriately covered by insurance and making staff aware of any limits to the activities that are covered
- ensuring all learners with healthcare needs are appropriately linked with the school's health advice service – inclusion & health and safety
- ensuring when a learner engages in activities at locations other than the school site, that appropriate healthcare support has been agreed and put in place (ie events at other schools)
- providing annual reports to the governing body on the effectiveness of the arrangements in place to meet the healthcare needs of learners
- ensuring all learners with healthcare needs are not excluded from activities they would normally be entitled to take part in without a clear evidence-based reason
- notifying the local authority when a learner is likely to be away from the education setting for a significant period, e.g. three weeks (whether in one go or over the course of the academic year) due to their healthcare needs.
- being mindful of the Social Services and Well-being (Wales) Act 2014.

**3.4 Teachers, support staff and all other adults working in the school environment (including those employed by agencies or partnerships/service level agreements such as Vale Catering; cleaning & caretaking):**

*Any staff member may be asked to provide support to pupils with healthcare needs, including assisting or supervising the administration of medicines. This role is entirely voluntary. Staff members must receive sufficient and suitable training and achieve the necessary level of competence before they take on the responsibility. No staff member can be required to administer or supervise medication unless it forms part of their contract, terms and conditions or a mutually agreed job description.*

Staff designated to directly support learners with healthcare needs will:

- regularly familiarise themselves with the any healthcare plans for the learner
- administer healthcare support in line with the agreed healthcare plan or training provided
- liaise with the parents of learners with healthcare needs and any healthcare support workers as needed
- alert the headteacher to any concerns regarding a learner or any training/resourcing requirements
- ensure accurate records are kept in line with agreed procedures
- attend any training provided

In addition to the training provided to all staff in relation to basic first aid and the training provided to those staff designated to support learners' healthcare, St David's will ensure staff:

- fully understand the school's healthcare needs policies and arrangements
- be aware of which learners have more serious or chronic healthcare needs, and, where appropriate, are familiar with these learners' IHPs. This includes knowing how to communicate with parents and what the triggers for contacting them are, such as when the learner is unwell, refuses to take medication or refuses certain activities because of their healthcare needs
- be aware of the signs, symptoms and triggers of common life-threatening medical conditions and know what to do in an emergency. This includes knowing who the first aiders are (ie Mrs Lisa James) and seeking their assistance if a medical emergency takes place
- fully understand the education setting's emergency procedures and be prepared to act in an emergency
- ask and listen to the views of learners and their parents, which should be taken into consideration when putting support in place
- ensure learners (or their friends) know who to tell if they feel ill, need support or changes to support
- listen to concerns of learners if they feel ill at any point and consider the need for medical assistance (especially in the case of reported breathing difficulties)
- make sure learners with healthcare needs are not excluded from activities they wish to take part in without a clear evidence-based reason, including any external trips/visits. This includes ensuring learners have access to their medication and that an appropriately trained member of staff is present to assist where required
- are aware of bullying issues and emotional well-being regarding learners with healthcare needs, and are prepared to intervene in line with the school's policy
- are aware that healthcare needs can impact on a learner's ability to learn and provide extra help when needed
- support learners who have been absent and assist them with catching up on missed work – this may involve working with parents and specialist services
- keep parents informed of how the healthcare need is affecting the learner in the education setting. This may include reporting any deterioration, concerns or changes to learner or staff routines.
- All staff and governors will be aware of the unacceptable practice guidance as outlined in the National Guidance (highlighted in section 7), and must avoid these practices.

Based on these principles, the persons with the overall responsibility for managing healthcare needs are:

Lead member of staff for managing healthcare needs	Mrs Ceri Hoffrock Headteacher
Protocol in the absence of this person	Mrs Catherine Davies (ALN Coordinator)

### 3.5 Parents / carers

The school aims to ensure parents are actively involved in the planning of support and management of healthcare needs. Meeting the individual's needs will be at the centre of decision making and processes.

Parents of learners with healthcare needs should:

- use pre-admission meetings and relevant sections of the enquiry form /admission booklet to initially make the school aware of their child's healthcare needs, prior to the expected start date.
- wherever possible, and if necessary, pre-admission meetings could involve any external professionals that already support the child, or permission for those professionals to be contacted for relevant information, advice and training could be provided.
- provide sufficient and up-to-date information about healthcare needs, including any guidance regarding the administration of medicines and/or treatment from healthcare professionals (using school templates if requested)
- update emergency contact information, and always ensure a nominated adult is contactable at all times and all necessary forms are completed and signed
- provide relevant in-date medicines, correctly labelled, with written dosage and administration instructions
- participate in the creation, development and review of an individual healthcare plan (IHP) if required
- ensure that the school immediately receives written updates regarding healthcare issues/changes, even changes such as type of medication, dosage or method of administration via the open door policy to amend records, email or letter.
- take part in discussions, including around information sharing/confidentiality
- inform the school if their child has/had an infectious disease or condition while in attendance.

### 3.6 Learners

The UNCRC states learners should have access to appropriate information essential for their health and development and have opportunities to participate in decisions affecting their health.

The school aims to ensure learners are actively involved in the planning of support and management of their own healthcare needs. Where appropriate, learners should be encouraged and enabled to manage their own healthcare needs.

Learners should:

- inform parent/carer or staff member/s if feeling unwell;
- inform relevant staff member/s of any medication or healthcare needs, or changes;
- participate in drafting and agreeing individual healthcare plan (IHP), where appropriate;
- take care when carrying medicines to and from school, and not sharing with others;
- take part in discussions around sharing/confidentiality of personal information (commensurate with their age or understanding).

### **3.7 Local authority, NHS Wales school health nursing service, health and other professionals, third sector organisations and other specialist services**

In the preparation of, delivery and review of healthcare provision St David's will proactively seek advice as required from various agencies. Where the advice sought is outside of the local authority directorate of Learning and Skills or Corporate Health and Safety, parents will be informed in advance. Parents will be informed how this may affect the learners' healthcare provision.

- Local authorities (LAs) should ensure education provision is available to learners, making reasonable adjustments to ensure disabled children and young people are not at a substantial disadvantage compared with their peers.
- In practical terms this means adjustments must be planned and implemented in advance to prevent any disadvantage ie when leaving primary school and beginning secondary school. Delays around the responsibility for provision should not impact on the delivery of service or the well-being of the learner
- LAs must make arrangements to promote cooperation between various bodies or persons, with a view to improving, among other things, the well-being of children in relation to their physical and mental health, their education, training and recreation.
- When making arrangements, local authorities should ensure appropriate agreements are in place for data sharing. This could be through working within the Wales Accord on Sharing Personal Information (WASPI) Information Sharing Protocols or Data Disclosure Agreements. Local authorities and health boards have WASPI coordinators who can support service providers to develop appropriate agreements
- LAs must make reasonable provision of counselling services for young people aged 11–18 and learners in Year 6 of primary school<sup>5</sup>. Within schools, this provision should complement the different approaches already in place to support the health, emotional and social needs of learners.
- LAs should work with education settings to ensure learners with healthcare needs receive a suitable education. Where a learner of compulsory school age would not receive a suitable education for any period because of their health, the local authority has a duty to make arrangements to provide suitable education<sup>6</sup>. If a learner is over that compulsory school age but under 18, the local authority may make such arrangements
- LAs should provide support, advice and guidance, including how to meet the training needs of education setting staff, so that governing bodies can ensure the support specified within the individual healthcare plan (IHP) can be delivered effectively.
- This school, by adopting this county model policy/national guidance is therefore covered by the local authority's insurance arrangements in respect of managing pupils' healthcare needs.

Healthcare and practical support may include (ie specialist health professionals such as GPs, paediatricians, speech and language therapists, occupational therapists, physiotherapists, dieticians and diabetes specialist nurses):

- offering advice on the development of IHPs
- assisting in the identification of the training and awareness-raising resources, including video links, required for the school to successfully implement IHPs
- supporting staff to implement a learner's IHP through advice and liaison with other healthcare, social care and third sector professionals.

## **4. Creating an accessible environment**

In accordance with schedule 10, the Equality Act 2010, St David's has an accessibility plan and works to action priorities. The school is committed to making reasonable adjustments to ensure that all learning is inclusive and accessible to all learners.

Our plan aims to improve *'the physical environments of schools for the purpose of increasing the extent to which disabled learners are able to take advantage of education and benefits, facilities or services provided or offered'*. If required, the school will formulate a risk assessment.

### **4.1 Physical Access**

Access to all main use school buildings is accessibility plan following the same principles as the strategies via ramped surfaces and wide access doors. A low level door buzzer and a CCTV security camera exists in the main entrance foyer.

A toilet has been designated as suitable for pupils with pupils with a disability.

### **4.2 Adapting learning**

St David's will ensure that class teachers are aware of a learner's healthcare needs and class teachers will adapt learning experiences and the environment accordingly.

Staff will liaise with external providers that attend school site to ensure all learners are able to fully access the provision. This may necessitate the sharing of some basic information regarding a learners' healthcare plan. Where the sharing of more detailed information is required, school will liaise with the learners' parents.

### **4.3 Reasonable adjustments – auxiliary aids or services**

The Equality Act 2010 places a duty on learning establishments to make 'reasonable adjustments' for learners who are disabled as defined by the Act. In regard to these learners, auxiliary aids or services (with the appropriate number of trained staff) must be provided.

### **4.4 Day trips and residential visits**

St David's staff and governors are aware of their legal requirements to make reasonable adjustments to trips and residential visits ensuring full participation from all learners.

Staff should be aware of how a learner's healthcare needs may impact on participation, and seek to accommodate any reasonable adjustments which would increase the level of participation by the learner.

Staff should consider how to accommodate the sharing of personal information with third parties if necessary for off-site activities (in compliance with the Data Protection Act 1998 and in respecting the learner's right to privacy). This may include information about the healthcare needs of learners, what to do in an emergency and any additional support, medication or equipment needed.

### **4.5 Social interactions**

The school will aim to ensure the involvement of learners with healthcare needs is adequately considered in structured and unstructured social activities, such as during breaks, breakfast club, productions, after-hours clubs and residential visits.

Staff are aware of the social barriers learners with healthcare needs may experience and how this can lead to bullying and social exclusion. A proactive approach is used to remove any barriers.

#### **4.6 Exercise and physical activity**

Where deemed appropriate and agreed with the headteacher, adjustments will be made to the expectation and provision for physical activity, including that of Physical Education lessons, swimming lessons and extra-curricular sports.

If required, staff may seek advice from specialists and may provide whole class alternatives (such as previously - Goal Ball.) Separate 'special provisions' for particular activities should be avoided, with an emphasis instead on activities made accessible for all. Where this might not be possible, advice from healthcare or physical education professionals and the learner should be sought.

The school provides a Chill Zone, quiet area at unstructured times such as breaktimes and lunchtimes. Staff will monitor this provision carefully to ensure a pupil mixes socially when unable to engage in physical activity.

All adults responsible for our pupils should be made fully aware of learners' healthcare needs and potential triggers. They should know how to respond appropriately and promptly if made aware that a learner feels unwell. They should always seek guidance when considering how participation in sporting or other activities may affect learners with healthcare needs.

Staff should also understand that it may be appropriate for some learners with healthcare needs to have medication or food with them during physical activity; such learners should be encouraged to take the medication or food when needed.

#### **4.7 Food management**

Where appropriate school will liaise with Vale Catering service in order to meet any dietary requirements associated with a learners' healthcare needs. This is especially important when carbohydrate counting is required.

Many specific types of dietary menus are available on the Vale Catering webpage and parents are provided with alternative choices. Their website provides complete lists of ingredients and nutritional information. Gluten and other intolerances or allergens are clearly marked. Copies of these are displayed outside the school kitchen.

Class teachers will make suitable adjustments or allowances where a learner requires access to food or drink during lesson times in order to meet their healthcare needs. Food provided for snacks should also take the dietary and treatment needs of these learners into account. While St David's is a healthy school and has a 'no sweets' policy other than Friday, it recognises learners with healthcare needs may need to be exempted from these policies.

Food provided for trips must reflect the dietary and treatment needs of the learners taking part. Learners needing to eat or drink as part of their condition should not be excluded from the classroom or put in isolation.

#### **4.8 Risk assessments**

Staff should be clear when a risk assessment is required and be aware of the risk assessment systems in place.

They should start from the premise of inclusion and have built into them a process of seeking adjustments or alternative activities rather than separate provision.

## 5. Sharing information

5.1 In order to best support a learner's healthcare needs arrangements, information must be shared with staff. It is essential that all information is kept up to date. All information-sharing techniques such as staff noticeboards must be agreed by the learner and parent in advance of being used, to protect confidentiality. This must be done in line with the Data Protection Act 1998 and the WASPI Information Sharing Policy ([www.waspi.org](http://www.waspi.org)).

5.2 Generic information that does not identify an individual such as the school's procedures for First Aid are displayed in the staffroom and contained in policy folder. School staff are made aware as to the location of these documents and in some instances are provided with personal copies.

5.3 Our managing healthcare needs policy and the information sharing policy is made available to parents/carers via the school website and annual letters to parents/carers. When being reviewed, where appropriate, it will include input from the School Council and Healthy School Committees further developing our healthcare needs arrangements.

5.4 To protect pupil confidentiality, we will discuss with the pupil and parent/carer how we can share information about their healthcare needs. Parents/carers may be asked to sign additional consent forms which clearly details the bodies, individuals and methods through which the pupil's medical information will be shared, on top of the consents included in the Admission Booklet. Because sharing medical information can be a sensitive issue, as appropriate will we involve the pupil in any decisions.

5.5 We will share any information to ensure that teachers, supply teachers, any support staff and temporary staff are aware of the healthcare needs of pupils, including IHPs, particularly if there is a possibility of an emergency situation arising. This will include any changes to healthcare needs, IHPs and medication.

5.6 We share information with staff about the healthcare needs of pupils on the schools secure SIMS pupil information. Copies of healthcare plans, risk-assessments etc. are provided to key staff as needed and are kept securely and disposed of in line with local authority procedures. All staff are briefed at staff meetings. Where a learner's healthcare is more complex or prolonged, specific information sharing training sessions are provided. A list of learners with healthcare needs are held by class teachers.

5.7 Visitors, supply teachers and staff not-directly employed by the school will be informed as required in order to fully meet a learner's healthcare needs. The medical needs folder is stored in the staff room with brief details of essential support. Alongside are all relevant forms related to medication and the templates linked to this policy.

5.8 Catering staff are supplied with essential information in relation to learners' dietary needs and allergies, alongside a photo of the child.

5.9 During preparation, delivery and review of provision to meet a learner's healthcare needs, school may need to share information with a third-party including those detailed in the preceding paragraphs. Where this sharing is required, school will request consent from parents and if

appropriate, learners. School will inform parents and if appropriate, learners who the information will be shared with, what will be shared and why.

5.10 If needed, school will share age appropriate information with other pupils to allow them to be vigilant to symptoms of when a learner is unwell.

5.11 When pupils are placed with other services for all/some of the time (e.g. EIB unit or resource based provision) we will ensure that the appropriate healthcare needs information is shared in line with our information sharing policy and with the consent of the parent/carer and pupil.

5.12 We will keep a list of what information has been shared with whom and why, for the pupil or parent/carer to view on request. This can be accessed by looking at the pupil's IHP created by the school and/or the medication consent form

## **6 Procedures and record keeping for the management of learners' healthcare needs**

6.1. The following documentation will be collected and maintained, where appropriate.

1. Contact details for emergency services
2. Parental agreement for educational setting to administer medicine
3. Head of educational setting agreement to administer medicine
4. Record of medicine stored for and administered to an individual learner
5. Record of medicines administered to all learners by date
6. Request for learner to administer own medicine
7. Staff training record – administration of medicines
8. Medication incident report

6.2 Pupils healthcare needs records are computerised (stored as a linked document on SIMS) to allow quick and easy access by the appropriate staff. Procedures in place for supply staff to access hard copies of the required information - for staff that may be placed into classrooms where they are not familiar with the healthcare needs of the pupils.

6.3 New paperwork will be completed whenever there are changes to an IHP, a break in the administration of the medicine, a change in medication or dosage. We will ensure that the old forms are clearly marked as being no longer relevant and stored in line with our information retention policy.

6.4 Where a learner with healthcare needs has a requirement for long term, on-going administration of medication school will work with parents and healthcare professionals to establish an individual healthcare plan which will be reviewed periodically and especially in light of any changes to the plan or school staffing.

6.5 There will be occasions where a learner has healthcare needs that require administration of medicines for a short period. We will administer medicines only following the completion of parental agreement to administer medicine (Form 2 in appendix). Upon receipt of the agreement the designated staff member will decide whether the request can be accommodated. If it is deemed appropriate then the designated staff member will complete Form 3. Where it is deemed that the setting cannot accommodate the administration of the medicine, then the headteacher will contact parents to explain the decision.

6.6 For each pupil receiving medicine in school, a record will detail who has administered, when and the dosage.

## **7. Storage, access and the administration of medication and devices**

Where medication is prescribed to be taken in frequencies which allow the daily course of medicine to be administered at home, parents/carers should seek to do so e.g. before and after school and in the evening.

### **7.1 Storage and access**

While all medicines should be stored safely, the type and use of the medication will determine how this takes place. Staff will ensure learners to know where their medication is stored and how to access it.

School will only store medicine that is in current use, where written consent has been provided by parents. School will only accept prescribed medicines and devices that:

- are in date
- have contents correctly and clearly labelled
- are labelled with the learner's name
- are accompanied with written instructions for administration, dosage and storage
- are in their original container/packaging as dispensed by the pharmacist (with the exception of insulin which is generally available via an insulin pen or a pump).

Staff will never transfer medication from its original container, unless the container breaks, the parent/carer will be informed and appropriate action will be taken.

We will not keep surplus volumes of medication in school, as stated in the consent form. The exception being where it is in the best interests of the child.

### **7.2 Refrigeration**

Where required, medicines will be stored in the Breakfast Club lockable refrigerator. As this contains food, parents would be asked to provide an air tight, clearly labelled container for this purpose. The refrigerator temperature is regularly monitored to ensure it is in line with storage requirements.

### **7.3 Emergency medication**

Emergency medication (such as asthma inhalers, blood glucose testing meters and auto-injectors) will be easily accessible for learners at all times during the day or at off-site activities. They will not be locked away, but be readily available to learners' - usually in the class store cupboard in a labelled container. If the emergency medication is a controlled drug it should be kept as securely as possible so as to minimise the risk of unauthorised access. Controlled medication will be kept in the school office where it is secure but readily available.

### **7.4 Disposal of medicines**

When no longer required medicines will be returned to the parents for disposal. In the event that the parents/carers are unavailable, then we will seek advice from our school nurse on the disposal of unused medication left in school. If they are unavailable, the medication will be handed into a local pharmacy. Sharps boxes will be used as required.

## 7.5 Administration of medicines

Medication will only be administered by suitably trained staff. The movement and location of these trained staff will always be in conjuncture with the learners they support.

Certain medical procedures may require administration by an adult of the same gender as the learner, and may need to be witnessed by a second adult. The learner's thoughts and feelings regarding the number and gender of those assisting must be considered when providing intimate care. There is no requirement in law for there to be more than one person assisting. This should be agreed and reflected in the IHP and risk assessment. Intimate care can be defined as any care which involves washing or carrying out a procedure to intimate personal areas which most people usually carry out themselves but some learners are unable to do because of their young age, physical difficulties or other special needs. Examples include care associated with continence and menstrual management as well as day-to-day tasks such as help with washing, toileting or dressing. It also includes supervision of learners involved in intimate self-care. The school will follow the intimate care guidance in the toileting policy, unless alternative arrangements have been agreed, and recorded in the learner's IHP.

The school will:

- only administer medicines following written parental consent
- **not** administer aspirin unless prescribed by a doctor
- record any medication administered on the appropriate forms
- inform parents promptly if a learner refuses their medication and follow the defined procedures
- ensure all staff in contact with the learner is aware of their medical needs particularly in off-site excursions.
- ensure that staff check the maximum dosage and the amount and time of any prior dosage administered.

If a learner refuses their medication, staff should record this and follow their defined procedures informing parents as soon as possible. If a learner misuses any medication, their parents should be informed as soon as possible. The education setting should ask parents to seek healthcare advice as appropriate. If parents cannot be contacted immediately, staff need to consider seeking immediate healthcare advice.

All staff supporting off-site visits should be made aware of learners who have healthcare needs. They should receive the required information to ensure staff are able to facilitate an equal experience for the learner. This information may include health and safety issues, what to do in an emergency and any other additional necessary support that the learner requires, including medication and equipment.

## 8. Emergency procedures

8.1 In the event of a medical emergency designated staff will adhere to the procedures indicated in the individual healthcare plan. Staff should be made aware of emergency symptoms and procedures.

8.2 Where a learner without an individual healthcare plan is exhibiting signs that emergency treatment is required school staff administer any required treatment.

8.3 Mrs Lisa James and Mrs Leah Croke-West are the Nominated First Aiders.

8.4 Where this is not suitable or relevant school staff will immediately call 999 and inform a senior leader.

#### 8.5 The senior leader will:

- ensure the learner is treated as required by one of the designated staff or first aiders
- ensure the learner is moved to a comfortable location within school to provide privacy
- ensure attempts are made to contact parents using the provided contacts list
- ensure a member of staff is present with the learner at all times until the arrival of parents
- ensure a member of staff accompanies the learner to hospital in the absence of a parents and remains with the learner until the parent arrives

8.6 School will ensure that senior leaders and office staff are aware of the location of healthcare records and emergency contact details.

8.7 School staff will remind learners with healthcare needs to report to any member of staff when they are feeling unwell. School staff will remind learners with healthcare need's peers of how to report any concerns immediately.

8.8 Other learners in the education setting should also know what to do in general terms in an emergency, such as to inform a member of staff immediately.

8.9 If a learner needs to be taken to hospital, a staff member should stay with the learner until a parent arrives. This includes accompanying them in an ambulance to hospital. The member of staff should have details of any known healthcare needs and medication.

8.10 In an emergency situation that may involve evacuating the school, medication of learners with healthcare needs should be taken with the staff member responsible for them. See Emergency Procedures Policy

### **9. Training**

9.1 Where a learner with healthcare needs has an individual healthcare plan, designated staff will be identified to support the learner. The Governing body will ensure staff who volunteer or who are contracted to support those with healthcare needs are provided with appropriate training. Governing bodies should also ensure their policies clearly set out how a sufficient number of these staff will be identified and supported.

9.2 If the trained staff who are usually responsible for administering medication are not available, the IHP should set out alternative arrangements. This also needs to be addressed in risk assessment and planning of off-site activities.

9.3 A risk assessment will be devised in conjunction with parents, the learner (as appropriate), staff and corporate health and safety. As a result of the risk assessment, any training needs will be identified.

9.4 School will liaise with parents, healthcare professionals and corporate health and safety to source appropriate training for designated staff and a briefing session for all staff. Training will be refreshed when there are changes to the healthcare plan, risk assessment or adaptive technologies. This training may also be in the use of aids such as hearing aids (staff could be shown how to change batteries) and various adaptive technologies.

9.5 New and temporary staff should especially be made aware of what preventative and emergency measures are in place so staff can recognise the need for intervention and react quickly.

9.6 The headteacher or deputy headteacher will document the training in the school's safeguarding records.

9.7 The headteacher will periodically provide training on common medical conditions (such as asthma) detailing symptoms and treatments. All staff will attend basic first aid training. At staff meetings the headteacher will remind staff of learners with healthcare needs and procedures for emergencies.

## **10. Qualifications and assessments**

10.1 Class teachers will use professional judgement to ensure learners with healthcare needs are supported in class and at unstructured times (e.g. break-times).

10.2 School will follow guidance as outlined in the current National Reading and Numeracy Tests – Test administration handbook to determine any adaptations, adjustments or additional time for a learner with healthcare needs. Any alterations will be based on classroom practice.

10.3 Efficient and effective liaison is imperative when learners with healthcare needs are approaching assessments, including those undertaking examinations in hospital or at home. The coursework element may help learners to keep up with their peers. The home and hospital teachers may be able to arrange for concentration on this element to minimise the loss of learning while they are unable to attend. Liaison between the education setting and the hospital teacher or home teacher is most important, especially where the learner is moving from education setting or home to the hospital on a regular basis.

## **11. Education other than at school (EOTAS)**

11.1 Local authorities have a duty (sections 19(1) and 19(4) of the Education Act 1996) to make arrangements for the provision of suitable education for all children and young people of compulsory school age.

11.2 A learner who is unable to attend school for a short period of time will have their educational needs provided for by school. School staff, in consultation with parents, will provide work to be completed at home.

11.3 Upon the learner's return to school, class teachers will ensure support is provided so that the learner can catch up on work missed.

11.4 Where the learner with healthcare needs will be absent for a prolonged period (usually more than 15 school days) school will make contact with the local authority designated person for Education other than at school (EOTAS).

11.5 Cooperation between education, health and administrative staff in hospital is essential. The aim should be to achieve the greatest possible benefit for the child or young person's education and health, which should include the creation of an atmosphere conducive to effective learning.

## 12. School transport

School will liaise with the local authority where this is a requirement.

There are statutory duties on local authorities, head teachers and governing bodies in relation to learners travelling to the place where they receive their education or training<sup>17</sup>. For example, depending upon the circumstances, local authorities may need to arrange home-to-school transport for a learner, or provide appropriately trained escorts for such journeys to facilitate the attendance of a learner.

## 13. Reviewing policies, arrangements and procedures

School will review its practices at least annually and update the policy accordingly.

School will work with parents, healthcare professionals, local authority and other relevant bodies to review and update any healthcare plans as changes are needed.

IHPs may require frequent reviews depending on the healthcare need – this should involve all key stakeholders including, where appropriate, the learner, parents, education and health professionals and other relevant bodies.

## 14. Insurance arrangements

School maintains public liability insurance to the level of forty million pounds. This covers on and off site activities. School is also covered by further levels of insurance for specific activities or eventualities. Further details can be obtained by contacting school. (Zurich Municipal)

Where a learner's healthcare needs are significantly complex, school will consult with the local authority to ascertain its insurance cover and responsibilities.

Additional cover is arranged for some activities, e.g. off-site activities for learners with particular needs.

## 15. Complaints procedure

Occasionally there may be times when you have a concern or issue that you wish to raise. We would welcome the opportunity to deal with this matter and ask that you contact school as soon as possible.

### From the School Prospectus:

There may be an occasion when something happens in school that you are not happy about. Our complaints procedure is a way of ensuring that anyone with an interest in the school can raise a concern, with confidence that it will be listened to and, if well founded, dealt with in an appropriate and timely fashion. Sometimes you might be concerned about matters that are not decided by the school, in which case we will tell you to whom you should complain.

### INFORMAL

Most concerns can be settled quickly just by speaking to the relevant person in school, without the need to use a formal procedure:

- Generally, the member of staff involved should be parents' initial contact. Complaints should be brought to the attention of the school as soon as possible- within 10 school days.
- If it is not possible to resolve the matter in this way, the Headteacher should be approached, within 5 days of receiving a response to your concern.

**FORMAL**

- Complaints should **then** be passed in writing to the Headteacher.
- If it is not possible to resolve the matter in this way, the complaint should be addressed to the Chair of Governors.

The following is a **summary** of our full complaints procedure. Full details of the procedure may be obtained from the School Office or from the Clerk to the Governing Body:

- Complaints should be brought to the attention of the school as soon as possible. Any matters raised more than 3 months after the event will not be considered, save in exceptional circumstances.
- A log will be kept of all complaints and is retained for seven years.
- Your complaint will be dealt with fairly and impartially, and as quickly and effectively as possible – within 10 school days of receipt of the same, save in exceptional circumstances.
- Your complaint will be kept confidential, with only those involved in investigating and making a decision being aware of the details of the complaint. It is likely, however, that the person who is being complained about will be told of the complaint.
- You will be kept informed of progress throughout the process.

A copy of the full complaints procedure is available from the Headteacher and on the school website.

## **16. Individual healthcare plans (IHPs)**

16.1 IHPs set out what support is required by a learner. IHPs are essential where healthcare needs are complex, fluctuating, long term or where there is a high risk that an emergency intervention will be needed. However, not all learners with healthcare needs require an IHP. The aim of the plan is to capture the steps which need to be taken to help a learner manage their condition and overcome any potential barriers to participating fully in education.

16.2 School retains responsibility for finalising and implementing the plan but will liaise with learners, parents, health professionals and local authority as required.

16.3 School will ensure the plan retains the best interests of the learner in mind and ensure it assesses the risks to the learner's education, health and social well-being. Where a learner has an SEN the IHP will be linked or attached to any individual education plan, Statement of SEN, or learning and skills plan.

16.4 School will review at least annually or more frequently should there be new evidence that the needs of the learner have changed.

16.5 In formulating a plan school will organise a meeting with appropriate staff, the parents, the learner and appropriate clinicians to determine if the learner's healthcare needs require an IHP, or whether this would be inappropriate or disproportionate. If consensus cannot be reached, the headteacher will make the final decision. This can be challenged through the complaints procedure.

### **16.6 Development of the IHP**

Figure 1 outlines the process for identifying whether an IHP is needed.

In some cases e.g. short term anti-biotics; at the end of stage 2 'gather information' stage it might be clear that an IHP is not needed. In this case it will not be necessary to progress to stage 3 and 4.

## Figure 1

**Stage 1: Identify pupils with healthcare needs:**

- Pupil is identified from enquiry form/admission booklet or other route (or annual pupil data collection form).
- Parent/carer or pupil informs school of a healthcare need or change in healthcare need.
- Healthcare professional identifies.
- Transition discussions are held in good time, e.g. 8 weeks before either the end of term or moving to comprehensive school.

**Stage 2: Gather information:**

- If there is a potential need for an IHP; the school should discuss this with the parent/carer and if appropriate, the pupil themselves.
- This must be done where appropriate in conjunction with the relevant healthcare professional. This will support the decision making process about whether an IHP is needed.

**Stage 3: Establish if an IHP should be made:**

- The headteacher or delegated person should organise a meeting with appropriate staff, parents/carers, the pupil, and appropriate clinicians to determine if the healthcare needs of the pupil require an IHP, or whether this would be inappropriate or disproportionate.
- If there is a contentious issue with a parent/carer, then the headteacher will take the decision on how to take this forward; which can be challenged through the complaints procedure.

**Stage 4: If an IHP is needed:**

- The headteacher or delegated person, under the guidance of the appropriate healthcare professionals, parents/carers and the pupil should develop the IHP in partnership. This includes instigating, coordinating, facilitating meetings, documentation and overall communication in the school. **(The school may use some third sector organisations online condition-specific IHPs to tailor for learners' needs.)**
- The headteacher or delegated person to facilitate necessary risk assessments and interventions are done to ensure the child's safety.
- The headteacher or the delegated person will identify appropriate staff to support the pupil including identifying any training needs and the source of training.
- The headteacher or the delegated person will make arrangements for training by relevant and appropriately qualified specialists.
- The headteacher or delegated person will circulate the IHP and any subsequent updates to: parent/carer, headteacher, class teacher/ALNCo (as appropriate), and the relevant healthcare professional. NB consent from parent/carer and pupil must be obtained to do this.
- The headteacher or delegated person will set appropriate review date and define any other triggers for review.

16.7 The development of detailed IHPs may involve:

- the learner
- the parents
- input or information from previous education setting
- appropriate healthcare professionals
- social care professionals
- the Headteacher and/or delegated responsible individual for healthcare needs
- teachers and support staff, including catering staff
- any individuals with relevant roles such as a first aid coordinator, a well-being officer, and special educational needs coordinator (ALNCo).

16.8 While the plan should be tailored to each individual learner, it may include:

- details of the healthcare need and a description of symptoms
- specific requirements such as dietary requirements, pre-activity precautions (e.g. before physical education classes)
- medication requirements, e.g. dosage, side effects, storage requirements, arrangements for administration
- an impact statement (jointly produced by a healthcare professional and a teacher) on how the learner's healthcare condition and/or treatment affects their learning and what actions are required to mitigate these effects
- actions required
- emergency protocols and contact details
- the role the education setting can play, e.g. a list of things to be aware of
- review dates and review triggers
- roles of particular staff, e.g. a contact point for parents, staff responsible for administering/supervising medication, and arrangements for cover in their absence
- consent/privacy/sensitive information-sharing issues
- staff training needs, such as with regard to healthcare administration, aids and adaptive technologies
- record keeping – how it will be done, and what information is communicated to others
- home-to-school transport – this is the responsibility of the local authority, who may find it helpful to be aware of the learner's IHP and what it contains, especially in respect of emergency situations.

16.9 The aim of the plan is to capture the steps which need to be taken to help a learner manage their condition and overcome any potential barriers to participating fully in education. Those devising the plan should agree who will take the lead, but responsibility for ensuring it is finalised and implemented rests with the education setting. Many third sector organisations have produced condition-specific template IHPs that the school can use as a template.

**17. Unacceptable practice**

St David's school recognises that it is not acceptable practice to:

- prevent learners from attending an education setting due to their healthcare needs, unless their attending the setting would be likely to cause harm to the learner or others
- prevent learners from easily accessing their inhalers or other medication, and prevent them from taking their medication when and where necessary
- assume every learner with the same condition requires the same treatment
- ignore the views of the learner or their parents, or ignore healthcare evidence or opinion (although these views may be queried with additional opinions sought promptly)
- send learners with healthcare needs home frequently or prevent them from staying for normal activities, including lunch, unless this is suitably specified in their IHP
- send a learner who becomes ill or needs assistance to a medical room or main office unaccompanied or with someone unable to properly monitor them
- penalise a learner for their attendance record if the absence is related to their healthcare needs- these absences are authorised
- prevent learners from drinking, eating or taking toilet or other breaks whenever needed in order to manage their healthcare needs effectively
- require parents, or otherwise make them feel obliged, to attend the education setting, trip or other off-site activity to administer medication or provide healthcare support to the learner, including for toileting issues (unless specified in their IHP or risk assessment)
- expect or cause a parent to give up work or other commitments because the education setting is failing to support a learner's healthcare needs
- ask a learner to leave the classroom or activity if they need to administer non-personal medication or consume food in line with their health needs (unless specified their IHP or in agreement with learner/parents)
- prevent or create unnecessary barriers to a learner's participation in any aspect of their education, including trips, e.g. by requiring a parent to accompany the learner.
- request adjustments or additional time for National Tests a learner at a late stage. They should be applied for in good time. Consideration should also be given to adjustments or additional time needed in other tests

School will ensure that all staff are made aware of the policy and this will be reviewed in staff meetings periodically.

School will audit its provision for supporting learners with healthcare needs when revising this policy or reviewing IHP.

## **Annex 2: Form templates**

Our school uses the forms listed below according to their particular policies on supporting learners with healthcare needs.

- Form 1 – Contacting emergency services
- Form 2 – Parental agreement for education setting to administer medicine
- Form 3 – Headteacher/head of setting agreement to administer medicine
- Form 4 – Record of medicine stored for and administered to an individual learner
- Form 5 – Record of medicines administered to all learners – by date
- Form 6 – Request for learner to carry/administer their own medicine
- Form 7 – Staff training record – administration of medicines
- Form 8 – Medication/healthcare incident report

## **Form 1: Contacting emergency services**

### **Request for an Ambulance**

**Dial 999, ask for an ambulance, and be ready with the following information where possible.**

- 1. State your telephone number.**
- 2. Give your location as follows**

**St David's CIW Primary School  
Colwinston Village  
Near Cowbridge  
Vale of Glamorgan**

- 3. State that the postcode is CF71 7NL**
- 4. Give the exact location in the education setting**  
**Off the A48 at Crack Hill & follow the school sign.**  
**School is on the right hand side**
- 5. Give your name.**
- 6. Give the name of the learner and a brief description of symptoms.**
- 7. Inform Ambulance Control of the best entrance and state that the crew will be met in the main car park and taken to [name location of pupil].**
- 8. Don't hang up until the information has been repeated back.**

**Speak clearly and slowly and be ready to repeat information if asked to.**

**Put a completed copy of this form by all the telephones in the education setting.**

**Form 2: Parental agreement for education setting to administer medicine**

**St David's needs your permission to give your child medicine. Please complete and sign this form to allow this.**

Name of education setting	<b>St David's CIW VA Primary</b>		
Name of child		Date of birth	
Group/class/form			
Healthcare need			
<b>Medicine</b>			
Name/type of medicine (as described on the container)			
Date dispensed		Expiry date	
Agreed review date to be initiated by [name of member of staff]			
Dosage and method			
Timing			
Special precautions			
Are there any side effects that the setting needs to know about?			
Self-administration	(delete as appropriate) <b>Yes / No</b>		

Procedures to take in an emergency			
<b>Contact details</b>			
Name		Daytime telephone no.	
Address			
Relationship to child			
<ul style="list-style-type: none"> <li>• I understand that I must deliver the medicine personally to: <i>agreed member of staff</i>.....</li> <li>• I understand that I must notify the setting of any changes in writing.</li> </ul>			
Signature(s)		Date	

**Form 3: Headteacher/head of setting agreement to administer medicine**

Name of setting	St David's CIW VA Primary		
It is agreed that [name of learner]  .....	will receive [quantity or quantity range and name of medicine]  .....		
every day at	[time medicine to be administered, e.g. lunchtime/ afternoon break]  .....		
[Name of learner] ..... will be			
given / supervised while they take their medication by	[name of member of staff]  .....  Or in their absence  .....		
This arrangement will continue until [either end date of course of medicine or until instructed parents/carers] .....			
Signed [The headteacher/ head of setting/ named member of staff]		Date	

**Form 4: Record of medicine stored for and administered to an individual learner**

Name of setting	<b>St David's CIW VA Primary School</b>
Name of learner	
Date medicine provided by parent	
Group/class/form	
Quantity received	
Name and strength of medicine	
Expiry date	
Quantity returned	
Dose and frequency of medicine	
Staff signature	
Signature of parent/carers	

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			



**Form 6: Request for learner to carry/administer their own medicine**

This form must be completed by the parent/carer.

**If staff have any concerns discuss this request with healthcare professionals.**

Name of setting	<b>ST DAVID'S CIW VA PRIMARY</b>
Learner's name	
Group/class/form	
Address	
Name of medicine	
Carry and administer	
Administer from stored location	
Procedures to be taken in an emergency	
<b>Contact information</b>	
Name	
Daytime telephone no.	
Relationship to learner	
<i>I would like my child to administer      and/or      carry their medicine.</i>	
Signed parent/carer	
Date	
<i>I agree to administer and/or carry my medicine. If I refuse to administer my medication as agreed, then this agreement will be reviewed.</i>	
Learner's signature	
Date	

### Form 7: Staff training record – administration of medicines

Please ensure that the Education Workforce Council registration is updated accordingly.

Name of setting	ST DAVID'S CIW VA PRIMARY SCHOOL
Name	
Type of training received	
Date of training completed	
Training provided by	
Profession and title	
<p><i>I confirm that [name of member of staff] ..... has received the training detailed above and is competent to carry out any necessary treatment.</i></p>	
<p><i>I recommend that the training is updated</i></p>	<p>[please state how often]</p> <p>.....</p>
Trainer's signature	
Date	
<p><i>I confirm that I have received the training detailed above.</i></p>	
Staff signature	
Date	
Suggested review date	

**Form 8: Medication/healthcare incident report**

Learner's name	
Home address	
Telephone no	
Date of incident	
Time of incident	
<b>Correct medication and dosage:</b>	
<b>Medication normally administered by:</b>	Learner <input type="checkbox"/> Learner with staff supervision <input type="checkbox"/> Nurse/school staff member <input type="checkbox"/>
<b>Type of error:</b>	Dose administered 30 minutes after scheduled time <input type="checkbox"/> Omission <input type="checkbox"/> Wrong dose <input type="checkbox"/> Additional dose <input type="checkbox"/> Wrong learner <input type="checkbox"/> Dose given without permissions on file <input type="checkbox"/> Dietary <input type="checkbox"/> Dose administered by unauthorised person <input type="checkbox"/>
<b>Description of incident:</b>	
<b>Action taken:</b>	<input type="checkbox"/> School nurse notified: name, date and time
	<input type="checkbox"/> Parent notified: name, date and time
	<input type="checkbox"/> Physician notified: name, date and time
	<input type="checkbox"/> Poison control notified
	<input type="checkbox"/> Learner taken home
	<input type="checkbox"/> Learner sent to hospital
	<input type="checkbox"/> Other
<b>Note:</b>	
<b>Signed:</b>	

**Form 9: Data Protection Consents**

This form must be completed by the parent/carer.

Name of setting	<b>ST DAVID'S CIW VA PRIMARY</b>	
Learner's name		
Group/class/form		
<i>I consent for brief and relevant details of my child's medical details, a photograph of my child, any triggers &amp; symptoms or other emergency details being shared with staff who will be working with my child. I am aware that this means in a file in the staffroom. This includes any supply teachers taking my child's class.</i>		
Signed parent/carer	Date	
<i>I consent for brief and relevant details of my child's medical details, any triggers &amp; symptoms, medication or other emergency details being shared with third party staff who will be working with my child at locations other than the school where St David's staff may not be present. (ie at other schools). I am aware that this will be stored securely by the location with the staff responsible for the care of my child and any data would be securely destroyed once the activity/event is completed.</i>		
Signed parent/carer	Date	
<i>Where food or allergy related medical condition, I consent for brief and relevant details of my child's medical details, a photograph of my child, any triggers &amp; symptoms or other emergency details being shared with Vale Catering Staff who are in the dinner hall at lunch times. I am aware that photos will be displayed within the kitchen only.</i>		
Signed parent/carer	Date	
<i>I consent for brief and relevant details of my child's medical details, any triggers &amp; symptoms, medication or other emergency details being shared with third party staff who are providing external specialist support for my child and may be working with them on a 1:1 basis. This includes speech therapists, education psychologists, occupational therapists, specialist teachers etc- who I would have already given my consent to work with my child.</i>		
Signed parent/carer	Date	
<i>Any other information following discussions with the parent/learner.</i>		
<b>Where appropriate Learner's signature</b>	<b>Date</b>	

