

LONG MEADOW SCHOOL

SUPPORTING PUPILS WITH MEDICAL CONDITIONS POLICY



Policy adopted:	September 2014
Date of last review:	April 2018
Date of next review:	April 2021
Type of policy:	Non- Statutory / LMS
Frequency of review:	3 years
Governor committee:	Environment Committee

Long Meadow School

Supporting Pupils with Medical Conditions Policy

Rationale:

- Long Meadow is an inclusive community that aims to support and welcome children with medical conditions
- Long Meadow aims to provide all children with all medical conditions the same opportunities as others at school

Guidelines:

- 1. Long Meadow is an inclusive community that aims to support and welcome children with medical conditions**
 - a. Long Meadow understands that it has a responsibility to make the school welcoming and supportive to children who currently attend and to those who may attend in the future
 - b. Long Meadow aims to provide all children with all medical conditions the same opportunities as others at school
 - c. Pupils with medical conditions are encouraged to take control of their condition. We encourage children to feel confident in the support they receive from the school and to gain independence in the management of their condition whenever possible and appropriate
 - d. Long Meadow aims to include children with medical conditions in all school activities, where appropriate
 - e. We aim to ensure that parents/carers of pupils with medical conditions feel confident in the care their children receive at Long Meadow
 - f. Long Meadow ensures staff understand their duty of care to children and young people in the event of an emergency
 - g. We train and support staff so that they feel confident in knowing what to do in an emergency
 - h. Long Meadow understands that certain medical conditions are serious and can be potentially life threatening, particularly if not managed correctly or misunderstood
 - i. Staff understand the common medical conditions that affect children at this school. Staff receive training on the impact this can have on pupils when and as appropriate.
- 2. Long Meadow's medical conditions policy has been drawn up in consultation with a wide range of local key stakeholders within the school community.**
 - a. The school has consulted on the development of this medical condition policy. These key stakeholders include:
 - The children
 - Parent/carers
 - Staff
 - School governors and other stakeholders
 - b. The views of children with various medical conditions were actively sought and considered central to the consultation process.
- 3. The medical conditions policy is supported by a clear communication plan for staff, parents/carers and other key stakeholders to ensure its full implementation**
 - a. The medical conditions policy is made available to parents/carers by including the policy statement on the school website and in the school prospectus
 - b. School staff are informed about the medical conditions policy:
 - Through information provided in the staff handbook
 - At any medical conditions training
- 4. Staff understand and are trained in what to do in an emergency for the most common serious medical conditions at this school as and when appropriate**
 - a. Staff at Long Meadow are aware of the most common serious medical conditions at this school

- b. Staff at Long Meadow understand their duty of care to children in the event of an emergency. In an emergency situation school staff are required under common law duty of care to act like any reasonably prudent parent. This may include administering medication.
- c. Staff who work with groups of children at this school receive training and know what to do in an emergency for the children in their care with medical conditions
- d. Training is refreshed for staff as and when appropriate
- e. Long Meadow uses Healthcare Plans to inform the appropriate staff of pupils in their care who may need emergency help
- f. Long Meadow has procedures in place so that a copy of a child's healthcare plan is sent to the hospital with the child. On occasions when this is not possible, the form is sent (or the information on it is communicated) to the hospital as soon as possible.

5. Staff understand and are trained in the school's general emergency procedures

- a. Staff know what action to take in the event of a medical emergency. This includes:
 - How to contact emergency services and what information to give
 - Who to contact within the school
- b. Training is refreshed for staff as and when appropriate
- c. If a child needs to be taken to hospital, a member of staff will always accompany them and will stay with them until a parent arrives. The school tries to ensure that the staff member will be one the child knows.

6. The school has clear guidance on the administration of medication at school. Staff may only administer prescription medicines. Non-prescription medicines should NOT be brought into school

Administration – emergency medication

- a. Staff have easy access to emergency medication for children with medical conditions. Some children are encouraged to be responsible for their own medication if appropriate.
- b. Children who do not carry and administer their own emergency medication know where their medication is stored and how to access it under adult supervision.
- c. Children who do not carry and administer their own emergency medication understand the arrangements for a member of staff (and the reserve member of staff) to assist in helping them take their medication safely

Administration – general medication

- d. All use of medication defined as a controlled drug, even if the child can administer the medication themselves, is done under the supervision of a member of staff at this school
- e. Some children are encouraged to administer their own medication without adult supervision, but only with the written consent of parents. A risk assessment is completed in this situation.
- f. Children who are too young or not capable of administering their own medication will always be supervised by an adult
- g. The school understands the importance of medication being taken as prescribed
- h. Staff are aware that there is no legal or contractual duty for any member of staff to administer medication or supervise a child taking medication
- i. There are several members of staff at Long Meadow with first aid training who can support children to take medication
- j. Many other members of staff are happy to take on the voluntary role of administering medication. For medication where no specific training is necessary, any member of staff may administer prescribed medication to children under the age of 16, but only with the written consent of the child's parent/carer
- k. Training is given to all staff members who agree to administer medication to children, where specific training is needed. The local authority provides full indemnity.
- l. School staff will be informed through training that they are required, under common law duty of care, to act like any reasonably prudent parent in an emergency situation. This may include taking action such as administering medication.
- m. Parents/carers at Long Meadow School understand that if their child's medication changes or is discontinued, or the dose or administration method changes that they should notify school immediately.

- n. Staff attending off site visits are aware of any child with medical conditions on a visit. They receive information about the type of condition, what to do in an emergency and any other additional support necessary, including any additional medication or equipment needed.
- o. If a trained member of staff who is usually responsible for administering medication is not available alternative arrangements are made to provide the service. This is always addressed in the risk assessment for off-site activities.
- p. If a child misuses medication, whether their own or another child's, their parents/carers are informed as soon as possible. These children are subject to the school's usual disciplinary procedures.

7. Long Meadow has clear guidance on the storage of medication at school

Safe Storage – emergency medication

- a. Emergency medication is readily available to children who require it at all times during the school day or at off-site activities. If the emergency medication is a controlled drug and needs to be locked up, the keys are readily available and not held personally by members of staff.
- b. At Long Meadow most children have their emergency medication stored in the Medical Room
- c. Children and staff know exactly where to access their emergency medication

Safe Storage – non emergency medication

- a. Staff ensure that medication is only accessible to those for whom it is prescribed

Safe Storage – general medication

- a. All controlled drugs are kept in a locked cupboard and only named staff have access, even if children normally administer the medication themselves
- b. Expiry dates for all medication stored at school is checked on a regular basis
- c. The identified member of staff, along with the parents/carers of children with medical conditions, ensure that all emergency and non-emergency medication brought in to school is clearly labelled with the child's name, the name and dose of the medication and the frequency of dose.
- d. All medication is supplied and stored, wherever possible, in its original containers. All medication is labelled with the child's name, the name of the medication, expiry date and the prescriber's instructions for administration, including dose and frequency.
- e. Medication is stored in accordance with instructions, paying particular note to temperature
- f. Some medication may need to be refrigerated. The refrigerator in the medical room is used for this purpose.
- g. It is the parents/carers responsibility to ensure new and in date medication comes into school when medication expires. The School Health Administrator also monitors this and sends reminders home when necessary.

Safe disposal

- a. Parents/carers are given out of date medication to dispose of
- b. Sharps boxes are used for the disposal of needles when needed. Parents/carers obtain sharps boxes from the child's GP or paediatrician on prescription and each child who needs one has their own individual sharps box.
- c. If a sharps box is needed off site or on a residential visit, a named member of staff is responsible for its safe storage and return or to the parents/carers.
- d. Collection and disposal of sharps boxes is the responsibility of parents/carers.

8. Long Meadow has clear guidance about record keeping

Data collection forms

Parents and carers are asked if their children have any health conditions or health issues on an annual basis. Parents/carers of new pupils starting at other times of the school year are also asked to provide this information on data collection forms.

Healthcare Plans

- a. Long Meadow uses healthcare plans to record important details about individual children's medical needs at school, their triggers, signs, symptoms, medication and other treatments. Further documentation can be attached to the Healthcare plan if required.

- b. Healthcare plans are issued for completion by parents/carers of children with long term medical conditions at
 - The beginning of the school year
 - On enrolment
 - When a diagnosis is first communicated to the school
- c. If a child has a short term medical condition that requires medication during school hours, a medication form should be completed by the child's parents/carers
- d. Where appropriate it is recommended that the parents/carers, health care professional and the child should complete the healthcare plan together, before returning to school. A member of school staff can also be present in cases of complex healthcare or educational needs.
- e. Healthcare plans are held centrally in the medical room. All members of staff who work with groups of children have access to the healthcare plans of children in their care.
- f. Parents/carers are reminded to update their child's healthcare plan if their child has a medical emergency or if there have been changes to their symptoms (getting better or worse), or their medication and treatment change.
- g. Staff use opportunities such as teacher-parent consultations to check that information held by the school on a child's condition is accurate and up to date.
- h. Long Meadow ensures that all staff protect pupil confidentiality.
- i. Healthcare plans are to be sent ahead to emergency care staff, should an emergency happen during school hours or at a school activity outside normal school day.
- j. This school seeks permission from the child and parents/carers before sharing any medical information with any other party.

Use of Healthcare Plans

Healthcare plans are used at Long Meadow to:

- Inform appropriate staff and supply teachers about the individual needs of a child with a medical condition in their care
- Remind children with medical conditions to take their medication when they need to
- Identify common or individual triggers for children with medical conditions at school that bring on symptoms and can cause emergencies, and subsequently reduce the impact of common triggers
- Ensure the school provide timely and accurate information regarding the child's condition to emergency services if required

Consent to administer medicines

- a. If a child requires regular prescribed medication at school, parents/carers are asked to provide consent by completing a medication form (parental request for prescribed medication to be administered by school staff)
- b. All parents/carers of children with a medical condition who may require medication in an emergency are asked to provide consent on the healthcare plan for staff to administer medication.
- c. If a child requires regular/daily help in administering their medication then the school outlines the school's agreement to administer this medication on the child's healthcare plan

Residential visits

- a. Parents/carers are sent a residential visit form to be completed and returned to school shortly before their child leaves for an overnight or extended day visit. This form requests up to date information about the child's current condition and their overall health. This provides essential information to help manage their condition while they are away. This will include information about medication not normally taken during school hours. The residential visit form will detail what medication and what dose the child is currently taking at different times of the day.
- b. All residential visit forms are taken by the visit leader on visits where medication is required. These are accompanied by the child's healthcare plan.
- c. All parents/carers of children with a medical condition attending a school trip or overnight visit are asked for consent, giving staff permission to administer medication at night or in the morning if required.

Record Keeping

- a. Long Meadow School keeps an accurate record of each occasion a child is given or supervised taking medication. Details of the supervising staff member, child, dose, date and time are recorded. If a child refuses to have medication administered this is also recorded and parents/carers are informed as soon as possible.
- b. Training is held on common medical conditions as and when appropriate. A log of the medical condition training is kept by the school.

- c. All school staff who volunteer or who are contracted to administer medication are provided with training by a healthcare professional as and when appropriate. The school keeps a register of staff who have had the relevant training.

9. Long Meadow ensures that the whole school environment is inclusive and favourable to children with medical conditions. This includes the physical environment, as well as social, sporting and educational activities.

Physical environment:

- a. Long Meadow is committed to providing a physical environment that is accessible to children with medical conditions
- b. Children with medical conditions are included in the consultation process to ensure the physical environment at this school is accessible
- c. Long Meadow's commitment to an accessible physical environment includes out of school visits. The school recognises that this sometimes means changing activities or locations.

Social Interactions:

- a. Long Meadow ensures the needs of children with medical conditions are adequately considered to ensure their involvement in structures and unstructured social activities, including during breaks
- b. Long Meadow ensures the needs of children with medical conditions are adequately considered to ensure they have full access to extended school activities such as school discos, school productions, after school clubs and residential visits.
- c. Staff are made aware of the potential social problems that children with medical conditions may experience. Staff use this knowledge to try to prevent and deal with problems in accordance with the school's anti-bullying and behaviour policies
- d. Staff sometimes teach PSHE lessons, when appropriate, to raise awareness of medical conditions amongst children and to help create a positive social environment.

Exercise and Physical activity

- a. Long Meadow understands the importance of all children taking part in sports, games and activities
- b. Long Meadow ensures all classroom teachers, teaching assistants, PE teachers and sport coaches make appropriate adjustments to sports, games and other activities to make physical activity accessible to all children
- c. Long Meadow ensures all classroom teachers, teaching assistants, PE teachers and sport coaches understand that children should not be forced to take part in physical activities if their medical condition causes them to find it difficult
- d. Staff are made aware of children in their care who have been advised to avoid or take special precautions with particular activities
- e. The school ensures staff are aware of potential triggers for children's medical conditions when exercising and how to minimise these triggers
- f. Long Meadow ensures all children with medical conditions are actively encouraged to take part in out of school clubs and team sports

Education and Learning

- a. Long Meadow ensures that children with medical conditions can participate fully in all aspects of the curriculum and ensures that appropriate adjustments and extra support are provided
- b. If a child with a medical condition is missing a lot of time at school, they have limited concentration or they are frequently tired, all teachers at Long Meadow understand that this may be due to their medical condition
- c. Teachers are aware of the potential for children with medical conditions to have special educational needs (SEN). Children with medical conditions who are finding it difficult to make expected progress are referred to the Inclusion Manager who will consult with the child, parents/carers and the child's healthcare professional to ensure the effect of the child's condition on their school work is properly considered.
- d. Long Meadow ensures that lessons about common medical conditions are incorporated into PSHE lessons and other parts of the curriculum, when appropriate

Residential Visits

- a. Risk assessments are carried out prior to any out of school visit and medical conditions are considered during this process. Factors considered include: how all children will be able to access the activities proposed, how routine and emergency medication will be stored and administered, and where help can be obtained in an emergency.

- b. Long Meadow understands that there may be additional medication, equipment or other factors to consider when planning residential visits. Long Meadow considers additional medication and facilities that are normally available to school.
- 10. Long Meadow is aware of the common triggers that can make medical conditions worse or can bring on an emergency. The school is actively working towards reducing or eliminating these health and safety risks.**
- a. Long Meadow is committed to reducing the likelihood of medical emergencies by identifying and reducing triggers both at school and on out of school visits
- b. Healthcare plans are used to identify individual children who are sensitive to particular triggers, and action plans are in place as required to ensure these children remain safe throughout the day
- c. Risk assessments, including those for residential visits, take into account the needs of children with medical conditions
- d. Long Meadow reviews medical emergencies and incidents to see how they could have been avoided. Appropriate changes to Long Meadow's policy and procedures are implemented after each review.
- 11. Each member of the school and health community knows their roles and responsibilities in maintaining an effective medical conditions policy.**
- a. Long Meadow work in partnership with all interested and relevant parties including the school's governing body, school staff, parents/carers, community healthcare professionals and children to ensure the policy is planned, implemented and maintained successfully
- b. The following roles and responsibilities are used to implement the medical conditions policy at Long Meadow. These roles are understood and communicated regularly.

Employer

This school's employer has a responsibility to:

- Ensure the health and safety of their employees and anyone else on the premises or those taking part in school activities (including all children). This responsibility extends to those staff and others leading activities taking place off site, such as visits, outings or field trips.
- Ensure health and safety policies and risk assessments are inclusive of the needs of children with medical conditions
- Make sure the medical conditions policy is effectively monitored and evaluated and regularly updated
- Report to parents/carers, children, staff and the Senior Leadership Team about the successes and areas of improvement of this school's medical conditions policy
- Provide indemnity for staff who volunteer to administer medication to children with medical conditions

Headteacher

The headteacher has a responsibility to:

- Ensure the school is inclusive and welcoming and that the medical conditions policy is in line with local and national guidance and policy frameworks
- Liaise between interested parties including children, school staff, the inclusion manager, school nurses, parents/carers, governors, the school health service, local emergency care services
- Ensure the policy is put into action, with good communication to all
- Ensure that every aspect of the policy is maintained
- Ensure that information held by the school is accurate and up to date and that there are good information sharing systems in place using the health care plans
- Ensure pupil confidentiality
- Assess the training and development needs of staff and arrange for them to be met
- Ensure all new staff know the medical conditions policy
- Ensure that the expiry date of medicines kept in school are checked and maintain the schools medical conditions register
- Monitor and review the policy at least once a year

School Staff

School staff have a responsibility to:

- Be aware of the potential triggers, signs and symptoms of common medical conditions and know what to do in an emergency
- Understand the school's medical conditions policy
- Know which children in their care have a medical condition and be familiar with the content of the pupil's healthcare plan

- Allow all children to have immediate access to their emergency medication
- Maintain effective communication with parents/carers including informing them if their child has been unwell at school
- Be aware of children with medical conditions who may be experiencing bullying or need extra social support
- Understand the common medical conditions and the impact it can have on children
- Ensure all children with medical conditions are not excluded unnecessarily from activities they wish to take part in
- Ensure children have the appropriate medication of food with them during any exercise and are allowed to take it when needed.

Teaching Staff

Teaching staff at this school have a responsibility to:

- Be aware that medical conditions can affect children's learning and provide extra help when children need it
- Liaise with parents/carers, the child's healthcare professionals and Inclusion Manager if a child is falling behind with their work because of their condition
- Use opportunities such as PSHE and other areas of the curriculum to raise pupil awareness about medical conditions

Health Care Professional

The School Health Administrator at Long Meadow is Mrs Georgina Press. She has a responsibility to:

- Help update the school's medical conditions policy
- Help provide regular training for school staff in managing most common medical conditions at school
- Provide information about where the school can access other specialist training

First Aider

First aiders at Long Meadow have a responsibility to:

- Give immediate help to casualties with common injuries or illnesses and those arising from specific hazards within the school
- When necessary ensure that an ambulance or other professional medical help is called.

Inclusion Manager

The Inclusion Manager at Long Meadow is Miss Emma Kidd. She has a responsibility to:

- Help update the school's medical conditions policy
- Know which children have a medical condition and which have SEN because of their condition
- Ensure teachers make the necessary arrangements if a child needs special consideration or access arrangement in tests or class work

Children

The pupils at Long Meadow have a responsibility to:

- Treat other children with and without a medical condition equally
- Tell their parents, teacher or nearest staff member when they are not feeling well
- Let a member of staff know if another child is feeling unwell
- Let any child take their medication when they need it, and ensure a member of staff is called
- Treat all medication with respect
- Know how to gain access to their medication in an emergency
- If mature and old enough, know how to take their own medication and to take it when they need it
- Ensure a member of staff is called in an emergency situation

Parents/Carers

The parents/carers of a child at this school have a responsibility to:

- Tell the school if their child has a medical condition
- Ensure the school has a complete and up-to-date healthcare plan for their child
- Inform the school about the medication their child requires during school hours
- Inform the school of any medication their child requires while taking part in visits, outings or field trips and other out-of-school activities
- Tell the school of any changes to their child's medication, what they take, when, and how much
- Inform the school of any changes to their child's condition
- Ensure their child's medication and medical devices are labelled with their child's full name
- Provide the school with appropriate spare medication labelled with their child's name
- Ensure that their child's medication is within expiry dates
- Keep their child at home if they are not well enough to attend school

- Ensure their child has regular reviews about their condition with their doctor or specialist healthcare professional
- Ensure their child has a written care/self-management plan from their doctor or specialist healthcare professional to help their child manage their condition.

12. The medical conditions policy is regularly reviewed, evaluated and updated. Updates are produced every year.

- a. Long Meadow's medical condition policy is reviewed, evaluated and updated every year in line with the school's policy review timeline
- b. The Department for Children, Families and Schools and Department of Health guidance is actively sought and fed into the review
- c. In evaluating the policy, Long Meadow seeks feedback on the effectiveness and acceptability of the medical conditions policy with a wide-range of key stakeholders within the school and health settings
- d. The views of children with various medical conditions are actively sought and considered central to the evaluation process

Policy adopted by Environment Committee: September 2014

To be reviewed: September 2017

Appendix 1

Legislation and guidance

Introduction

- Local authorities, schools and governing bodies are responsible for the health and safety of children in their care
- The Children and Families Act 2014 places a duty on governing bodies of maintained schools, proprietors of academies and management committees of pupil referral units to make arrangements for supporting pupils at their school with medical conditions. This duty will come into force from September 2014 and is set out in section 100 of the Act:

Children and Families Act 2014: Section 100, [legislation.gov.uk](http://www.legislation.gov.uk)
<http://www.legislation.gov.uk/uklgpa/2014/6/section/100/enacted>

- Areas of legislation that directly affect a medical conditions policy are described in more detail in Managing Medicines in School and Early Years Settings. The main pieces of legislation are the Disability Discrimination Act 1995 (DDA), amended by the Special Educational Needs and Disability Act 2001 (SENDA) and the Special Educational Needs and Disability Act 2005. These acts make it unlawful for service providers, including schools, to discriminate against disabled people. Other relevant legislation includes the Education Act 1996, the Care Standards Act 2000, the Health and Safety at Work Act 1974, the Management of Health and Safety at Work Regulation 199 and Medicines Act 1968.

This section outlines the main points from the relevant legislation and guidance that schools should consider when writing a medical conditions policy.

Managing Medicines in Schools and Early Years Settings (2004)

This provides guidance from the DFE and DH on managing medicines in schools and early years settings.

The document includes the following chapters:

- ❖ Developing medicines policies
- ❖ Roles and responsibilities
- ❖ Dealing with medicines safely
- ❖ Drawing up a healthcare plan
- ❖ Relevant forms

Medical Conditions at School: A Policy Resource Pack is designed to work alongside Managing Medicines in School and Early Years Settings.

Disability Discrimination Act 1995 (DDA) and the Special Educational Needs and Disability Acts (2001 and 2005)

- ❖ Many pupils with medical conditions are protected by the DDA and SENDA, even if they don't think of themselves as 'disabled'.
- ❖ The commission for Equality and Human Rights (CEHR) (previously the Disability Rights Commission) publishes a code of practice for schools, which sets out the duties under the DDA and gives practical guidance on reasonable adjustments and accessibility. The CEHR offers information about who is protected by the DDA, schools' responsibilities and other specific issues.

Schools' responsibilities include:

- ❖ Not to treat any pupil less favourably in any school activities without material and sustainable justification
- ❖ To make reasonable adjustments that cover all activities – this must take into consideration factors such as financial constraints, health and safety requirements and the interests of other pupils. Examples of reasonable adjustments can be found in the DFES resource: Implementing the DDA in Schools and Early Years Settings (DFES publications are available through the DCSF).
- ❖ To promote disability equality in line with the guidance provided by the DCSF and CEHR through the Disability Equality Scheme.

The Education Act 1996

Section 312 of the Education Act covers children with special educational needs, the provisions that need to be made and the requirements local health services need to make to help a local authority carry out its duties.

The Care Standards Act 2000

This act covers residential special schools and responsibilities for schools in handling medicines.

Health and Safety at Work act 1974

This act places duties on employers for the health and safety of their employees and anyone else on their premises. This covers the headteacher and teachers, support staff, pupils and visitors.

Management of Health and Safety at Work Regulations 1999

These regulations require employers to carry out risk assessments, manage the risks identified and to communicate these risks and measures taken to employees.

Medicines Act 1968

This act specifies the way that medicines are prescribed, supplied and administered.

Additional guidance

Other guidance resources that link to a medical conditions policy include:

- ❖ National Service Framework for Children and Young People and Maternity Services (2004) – provides standards for healthcare professionals working with children and young people including school health teams
- ❖ Health and Safety of Pupils on Educational Visits: A Good Practice Guide (2001) – provides guidance to schools when planning educational and residential visits
- ❖ Misuse of Drugs Act 1971 – legislation on the storage and administration of controlled medication and drugs
- ❖ Home to School Travel for Pupils Requiring Special Arrangements (2004) – provides guidance on the safety for pupils when traveling on local authority provided transport
- ❖ Including Me: Managing Complex Health Needs in School and Early Years Settings (2005)

Further advice and resource

<p>The Anaphylaxis Campaign PO Box 275 Farnborough Hampshire GU14 6SX Phone 01252 546100 Fax 01252 377140 info@anaphylaxis.org.uk www.anaphylaxis.org.uk</p> <p>Asthma UK Summit House 70 Wilson Street London EC2A 2DB Phone 020 7786 4900 Fax 020 7256 6075 info@asthma.org.uk www.asthma.org.uk</p> <p>Diabetes UK Macleod House 10 Parkway London NW1 7AA Phone 020 7424 1000 Fax 020 7424 1001 info@diabetes.org.uk www.diabetes.org.uk</p> <p>Epilepsy Action New Anstey House Gate Way Drive Yeadon Leeds LS19 7XY Phone 0113 210 8800 Fax 0113 391 0300 epilepsy@epilepsy.org.uk www.epilepsy.org.uk</p>	<p>Long-Term Conditions Alliance 202 Hatton Square 16 Baldwins Gardens London EC1N 7RJ Phone 020 7813 3637 Fax 020 7813 3640 info@ltca.org.uk www.ltca.org.uk</p> <p>Department for Children, Schools and Families Sanctuary Buildings Great Smith Street London SW1P 3BT Phone 0870 000 2288 Textphone/Minicom 01928 794274 Fax 01928 794248 info@dcsf.gsi.gov.uk www.dcsf.gov.uk</p> <p>Council for Disabled Children National Children's Bureau 8 Wakley Street London EC1V 7QE Phone 020 7843 1900 Fax 020 7843 6313 cdc@ncb.org.uk www.ncb.org.uk/cdc</p> <p>National Children's Bureau National Children's Bureau 8 Wakley Street London EC1V 7QE Phone 020 7843 6000 Fax 020 7278 9512 www.ncb.org.uk</p>
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