



HALSFORD PARK PRIMARY SCHOOL SUPPORTING PUPILS WITH MEDICAL CONDITIONS (Including First Aid)

Review Date: September 2027
Agreed by LGB: September 2025
Source: WSCC

Statement of Intent

Section 100 of the Children and Families Act 2014 places a duty on 'Governing Bodies of maintained schools, proprietors of academies and management committees of PRUs to make arrangements for supporting pupils at their school with medical conditions'. The governing body of Halsford Park Primary School will ensure that these arrangements fulfil their statutory duties and follow guidance outline in 'Supporting pupils at school with medical conditions' December 2015'.

Medicines will be administered to enable the inclusion of pupils with medical needs, promote regular attendance and minimise the impact on a pupil's ability to learn. In an emergency all teachers and other staff in charge of children have a common law duty of care to act for the health and safety of a child in their care – this might mean giving medicines or medical care.

Organisation

The governing body will develop policies and procedures to ensure the medical needs of pupils at Halsford Park Primary School are managed appropriately. They will be supported with the implementation of these arrangements by the Headteacher and school staff.

The Lead for Managing Medicines at Halsford Park Primary School is Mrs Justine Nix, School Secretary. In their absence this falls to the School Administrator; Mrs Nicola Alsbury or the Administration Assistant, Mrs Amanda Metters. In their duties staff will be guided by their training, a competency test, this policy and related procedures.

Implementation monitoring and review

All staff, governors, parents/carers and members of the Halsford Park Primary School community will be made aware of and have access to this policy. This policy will be reviewed biennially and its implementation reviewed as part of the Headteacher's annual report to Governors.

Insurance

Staff who follow the procedures outlined in this policy and who undertake tasks detailed in the RMP Medical Malpractice Treatment Table are covered under WSCC insurance policies. The medical audit is available to view on West Sussex Services for Schools under 'guide to insurance for schools'.

Claims received in respect of medical procedures not covered by the insurers will be considered under the Council's insurance fund.

Admissions

When the school is notified of the admission of any pupil office staff will seek parental consent to administer short term-ad-hoc non-prescriptions medication using 'Parent/Carer consent to administer short-term non-prescribed 'ad-hoc' medicines' form. An assessment of the pupil's medical needs will be completed which may include the development of an Individual Care Plans (ICP) or Education Health Care Plans (EHCP) and require additional staff training. The school will endeavour to put arrangements in place to support that pupil as quickly as possible. However, the school may decide (based on risk assessment) to delay the admission of a pupil until sufficient arrangements can be put in place.

Pupils with medical needs

The school will follow Government guidance and develop an Individual Health Plan or this may be part of their Education Health Care Plan for pupils who:

- Have long term, complex or fluctuating conditions
- Require medication in emergency situations or on a regular basis – these will be detailed using the appropriate 'Individual protocol' form

Parents/Carers should provide the class teacher with sufficient information about their child's medical condition and treatment or special care needed at school. Arrangements can then be made, between the parents/carers, teacher, school nurse (if necessary) and other relevant health professionals to ensure that the pupil's medical needs are managed well during their time in school. Healthcare plans will be reviewed by the school annually or earlier if there is a change in a pupil's medical condition. Teachers will hold a meeting with parents to write the Individual Care Plan. For children with health needs who cannot attend school, there is a separate policy in place.

All prescribed and non-prescribed medication

If a child is unwell parents may request that a member of school staff administer the medicine (the relevant forms must be completed prior to administration). If a pupil refuses their medication, they should not be forced, the school will contact the parent/carer and if necessary, the emergency services. Pupils should not bring any medication to school for self-administration.

The school will keep a small stock of liquid paracetamol, liquid antihistamine and a Salbutamol inhaler, for administration with parental consent ('Parent/Carer consent to administer short-term non-prescribed 'ad-hoc' medicines' form and gained at the time of administration) for symptoms that arise **during the school day**. All other medication must be supplied by the parent/carer in the original pharmacist's container clearly labelled and include details of possible side effects e.g. manufacturer's instructions and/or patient information leaflet (PIL). Medicines must be delivered to the school office with the appropriate consent form 'Parental consent to administer medication' and/or 'Individual protocol for non-prescribed medication' forms.

If a child is unwell and vomits after the administration of medication, parents/carers will be contacted, and school **will not re-administer medication** prior to the next scheduled dose.

Confidentiality

As required by the Data Protection Act 2018, school staff should treat medical information confidentially. Staff will consult with the parent, or the pupil if appropriate, as to who else should have access to records and other information about the pupil's medical needs and this should be recorded on the Individual Health Plan (IHP) or Education Health Care Plan (EHCP). It is expected that staff with contact to a pupil with medical needs will as a minimum be informed of the pupil's condition and know how to respond in a medical emergency.

Consent to administer medication

Parental/carer consent to administer medication will be required as follows:

- **Short term ad-hoc non-prescribed medication** - The school will request parent/carer consent to administer ad-hoc non-prescription by using 'Parent/carer consent to administer short-term ad-hoc medicines'. The school will contact parents/carers prior to administration of ad-hoc medication to confirm consent and ensure no other medication has been administered. The school **MUST** have written consent, verbal consent only **WILL NOT** be accepted. Parents/Carers may withdraw this consent at any time, in writing.
- **Prescribed and non-prescribed medication** - each request to administer medication must be accompanied by 'Parental consent to administer medication form ('Parental consent to administer medication' and/or 'Individual protocol for non-prescribed medication' forms) or if applicable on the IHP).

Prescription Medicines

Medicine should only be brought to school when it is essential to administer it during the school day. In the vast majority of cases, doses of medicine can be arranged around the school day thus avoiding the need for medicine in school. Antibiotics for example are usually taken three times a day, so can be given with breakfast, on getting home from school and then at bedtime. In all cases, only one dose will be administered during the school day. Administration will be recorded. Parents/carers are expected to remove any remaining medicine from school once the prescribed course has been completed.

Non-prescription Medicines

Under exceptional circumstances where it is deemed that their administration is required to allow the pupil to remain in school, the school will administer non-prescription medicines. The school will not administer alternative treatments i.e. homeopathic or herbal potions, pills or tinctures or nutrition supplements unless prescribed or recommended by a Doctor and detailed on an Individual Care Plan or Education Health Care Plan as part of a wider treatment protocol. As recommended by the Government in 'Supporting Pupils at School with Medical Conditions December 2015' the school will also not administer aspirin or ibuprofen unless prescribed. The storage and administration for non-prescription medication will be treated as prescription medicines.

If the relevant symptoms develop during the school day as detailed under the paragraph below 'short term ad-hoc non-prescribed medication', the school will administer the following non-prescription medications:

- liquid paracetamol (to pupils of all ages)
- liquid antihistamine

All other non-prescription medications will only be administered by staff, providing:

- The parent/carer confirms the time the medication was last administered;
- medication is licensed as suitable for the pupil's age;
- medication is suitable for the pupil i.e. if a child is asthmatic the medication is suitable for that condition;
- administration is required more than 3 to 4 times per day;
- medication is supplied by the parent or carer in the original packaging with the manufacturer's instructions and/or (PIL);
- and accompanied by parental/carer consent, 'Parental consent to administer medication' and/or 'Individual protocol for non-prescribed medication' forms and confirmation the medication has been administered previously without adverse effect;
- Medication is supplied to prevent pre-existing travel sickness on the day of a school trip with appropriate paperwork on the day.

The school will **NOT** administer non-prescription medication:

- as a preventative, i.e. in case the pupil develops symptoms during the school day;
- if the pupil is taking other prescribed or non-prescribed medication, i.e. only one non-prescription medication will be administered at a time;
- for more than 48 hours – parents will be advised if symptoms persist to contact their Doctor;
- a request to administer the same or a different non-prescription medication that is for the same/initial condition will not be repeated for 2 weeks after the initial episode; and not for more than 2 episodes per term - it will be assumed that the prolonged expression of symptoms requires medical intervention, and parents/carers will be advised to contact their Doctor.
- skin creams and lotions will only be administered in accordance with the Schools Intimate Care Policy and procedures.
- medication that is sucked i.e. coughs sweets or lozenges, will not be administered by the school and are actively discouraged as they will need to be taken whilst sitting in the school office and so learning time will be missed. If the parent/carer takes the decision that these are required, they will be treated as non-prescribed medication and the relevant forms will need to be completed.
- if parents/carers have forgotten to administer non-prescription medication that is required before school – requests to administer will be at the discretion of the school and considered on an individual basis.

Short term ad-hoc non-prescribed medication

A small stock of standard liquid paracetamol and liquid antihistamine will be kept by the school for administration if symptoms develop during the school day.

ONLY the following will be administered following the necessary procedures:

- For relief from pain
 - Standard Paracetamol will be administered in liquid form for the relief of pain i.e. period pain, migraine.
 - **Ibuprofen will NOT be administered to any pupil**
- For mild allergic reaction – anti-histamine (see Anaphylaxis)

Only 1 dose of any of the above medications suitable to the weight and age of the pupil will be administered during the school day.

Pain relief protocol for the administration of paracetamol (if the Ad-hoc Administration form has been completed)

If a request for non-prescribed pain relief is made by a pupil, carer or staff member (advocate for a non-verbal/non-communicating pupil):

- The school will contact the parent/carers and confirm that a dose of pain relief (Paracetamol) was NOT administered before school, parents/carers and if appropriate the pupil will also be asked if they have taken any other medication containing pain relief medication i.e. decongestants e.g. Sudafed, cold and flu remedies e.g. Lemsip and medication for cramps e.g. Feminax etc. and these conversations will be recorded. If a dose of pain relief has not been administered in the past 4 hours the school will, with parental consent, administer 1 dose.
- If the school cannot contact the parent/carers and therefore cannot confirm if pain relief (Paracetamol) was administered before school then the school will refuse to administer pain relief.

If a dose of pain relief has been administered before school:

- PARACETAMOL - The school will not administer paracetamol until 4 hours have elapsed since the last dose (assume 8am) no more than 4 doses can be administered in 24 hours.

Asthma

The school recognises that pupils with asthma need access to relief medication at all times. Pupils with asthma will be required to have an emergency inhaler and a spacer (if prescribed) in school. The school may ask the pupils parent or carer to provide a second inhaler. Parents are responsible for this medication being in date and the school will communicate with the parents if new medication is required and a record of these communications will be kept (on CPOMS). The school inhaler will only be used in an emergency and will always be used with a spacer. The school will develop Individual Care Plans for those pupils with severe asthma, and ask parents/carers to complete an Asthma Information Form for pupils with mild asthma.

Anaphylaxis

Every effort will be made by the school to identify and reduce the potential hazards/ triggers that can cause an allergic reaction to pupils diagnosed with anaphylaxis within the school population. The school complies with the School Nursing Service who recommend that all staff are trained in the administration of auto injectors and that training is renewed annually.

In accordance with the Medicines and Healthcare Products Regulatory Agency (MHRA) advice, the school will ask parents/carers to provide two auto-injectors for school use. Parents are responsible for this medication being in date and the school will communicate with the parents if new medication is required and a record of these communications will be kept. Parents/carers will be required to fill in an appropriate protocol form.

Mild Allergic Reaction

Non-prescription antihistamine will, with parental consent, be administered for symptoms of mild allergic reaction (i.e. itchy eyes or skin, rash or/and redness of the skin or eyes), the pupil must be monitored for signs of further allergic reaction. If antihistamine is not part of an initial treatment plan, allergic reaction medication will be administered following the guidance for short term ad-hoc non-prescribed medication.

Some antihistamine medication can cause drowsiness and therefore the school will consider if it is necessary for pupils to avoid any contact with hazardous equipment after administration of the medication i.e. P.E. Science, Design and Technology.

Hay fever

Parent(s)/carer(s) will be expected to administer a dose of antihistamine to their child before school for the treatment of hay fever. The school will only administer antihistamine for symptoms of allergic reaction and not as a precautionary measure.

Severe Allergic Reaction

Where a GP/Consultant has recommended or prescribed antihistamine as an initial treatment for symptoms of allergic reaction this will be detailed on the pupils IHP. The school will administer 1 standard dose of antihistamine (appropriate to age and weight of the pupil) and it is very important that symptoms are monitored for signs of further allergic reaction. During this time, pupils must **NEVER** be left alone and should be observed at all times.

If symptoms develop or there are any signs of anaphylaxis or if there is any doubt regarding symptoms then, if the pupil has been prescribed an adrenaline auto injector, it will be administered immediately, an ambulance called, and the parents informed.

Medical Emergencies

In a medical emergency, first aid is given, an ambulance is called and parents/carers are notified. Should an emergency situation occur to a pupil who has an ICP or EHCP, the emergency procedures detailed in the plan are followed, and a copy of the ICP or EHCP is given to the ambulance crew. If applicable, the pupil's emergency medication will be administered by trained school staff, if the pupils medication is not available staff will administer the schools emergency medication with prior parental consent.

In accordance with amendments made to the Human Medicines Regulations 2012 from October 2014 a sufficient number of salbutamol inhaler(s) spacer(s) will be held by the school to cover emergency use. Parents are expected to provide 2 in date auto-injectors for administration to their child.

Parental consent to administer the 'school inhaler and/or auto-injector' will be gained when the pupil joins the school using the appropriate forms. The school will hold a register of the pupils diagnosed with asthma and/or anaphylaxis, and if parental consent has been given to administer the school medication. The school will be responsible for ensuring the school medication remains in date.

Controlled Drugs

The school does not deem a pupil prescribed a controlled drug (as defined by the Misuse of Drugs Act 1971) as competent to carry the medication themselves whilst in school. Controlled drugs will be stored securely in a non-portable locked medicines cabinet and only named staff will have access. Controlled drugs for emergency use e.g. midazolam will not be locked away and will be easily accessible. The administration of a controlled drug will be witnessed by a second member of staff and records kept. In addition to the records required for the administration of any medication, a record will be kept of any doses used and the amount of controlled drug stock held in school.

Pupils taking their own medication

For certain long-term medical conditions, it is important for children to learn how to self-administer their medication. Appropriate arrangements for medication should be agreed and documented in the pupil's ICP or EHCP and parents should complete the self-administration section of 'Parental consent to administer medication' form.

Storage and Access to Medicines

All medicines apart from emergency medicines (inhalers, adrenaline auto injector, midazolam etc.) will be kept securely (where access by pupils is restricted). Medicines are always stored in the original pharmacist's container. Pupils are told where their medication is stored and who holds the key and staff will be fully briefed on the procedures for obtaining their medication.

Emergency medicines such as inhalers, adrenaline auto injectors and midazolam must not be locked away. If appropriate, certain emergency medication can be held by the pupil, or kept in a clearly identified container in his/her classroom. The school will make an assessment as to the competency of each individual pupil to carry their own medication. Parents will be asked to supply a second adrenaline auto injector and/or asthma inhaler for each child and they will be kept in the school office. Staff must ensure that emergency medication is readily available at all times i.e. during outside P.E. lessons, educational visits and in the event of an unforeseen emergency like a fire.

Medicines that require refrigeration are kept in the school office to which pupil access is restricted. There are specific arrangements in place for the storage of controlled drugs.

Waste medication

Where possible staff should take care to prepare medication correctly. If too much medication is drawn up into a syringe the remainder (amount above the required dose) should be returned to the bottle before administration. If only a half tablet is administered the remainder should be returned to the bottle or packaging for future administration.

If a course of medication has been completed or medication is date expired, it will be returned to the parent/carers for disposal.

Spillages

A spill must be dealt with as quickly as possible and staff are obliged to take responsibility/follow the guidelines. Spillages will be cleared up following the schools procedures and considering the control of infection. Any spilled

medication will be deemed unsuitable for administration and if necessary parents will be asked to provide additional medication.

The school has additional procedures in place for the management of bodily fluids which are detailed in the school risk assessment.

If the school holds any cytotoxic drugs, their management will be separately risk assessed and follow Health and Safety Executive (HSE) guidance.

Record Keeping – administration of medicines

For legal reasons records of all medicines administered are kept at the school until the pupil reaches the age of 24. This includes medicines administered by staff during all educational or residential visits. The pupil's parent/carer will also be informed if their child has been unwell during the school day and medication has been administered.

Recording Errors and Incidents

If for whatever reason, there is a mistake made in the administration of medication and the pupil is:

- Given the wrong medication
- Given the wrong dose
- Given medication at the wrong time (insufficient intervals between doses)
- Given medication that is out of date
- Or the wrong pupil is given medication

Incidents must be reported to the Schools Senior Leadership Team who will immediately inform the pupil's parent/carer. Details of the incident will be recorded within the school. Records must include details of what happened, the date, who is responsible and any effect the mistake has caused. Senior Leadership will investigate the incident and change procedures to prevent reoccurrence if necessary.

Staff Training

The school will ensure a sufficient number of staff complete First Aid at Work training which covers managing medicines in schools before they can administer medication to pupils. The school will also ensure that other staff who may occasionally need to administer a medicine are trained in the procedure adopted by the school.

Supply and locum staff will be given appropriate instruction and guidance in order to support the pupils with medical needs in their care. All school staff are trained annually to administer an auto-injector and asthma inhaler in an emergency.

A record of all training must be maintained to show the date of training for each member of staff and when repeat or refresher training is required.

The school will ensure that the staff who administer medicine for specific chronic conditions are trained to administer those specific medicines, for example, Diabetes (insulin) Epilepsy (midazolam). Training in the administration of these specific medicines is arranged via the school nurse.

Educational Visits (Off - site one day)

Staff will administer prescription medicines to pupils when required during educational visits. Parents should ensure they complete a consent form and supply a sufficient amount of medication in its pharmacist's container. Non-prescription medicines as detailed in this policy can be administered by staff, pupils must not carry non-prescription medication for self-administration.

All staff will be briefed about any emergency procedures needed with reference to pupils where needs are known and copies of care plans will be taken by the responsible person.

Residential Visits (overnight stays)

The school acknowledges the common law 'duty of care' to act like any prudent parent. This extends to the administration of medicines and taking action in an emergency, according to the Individual Care Plan.

Occasionally it may be necessary to administer non-prescription medicines as described in this policy i.e. antihistamine to pupils suffering from an allergic reaction or paracetamol for acute pain from things like headache, period pain, toothache etc. Parents must give written consent prior to the residential visit and sign to confirm that they have administered the medication without adverse effect.

The school will keep its own supply of non-prescription medication liquid paracetamol and liquid anti-histamine for administration to pupils during a residential visit and parental consent will be required in order for the school to administer their supply. The medication will be stored and administration recorded as for prescription medicines. Pupils should not bring non-prescribed medication on the residential visit for self-administration.

Risk assessing medicines management on all off site visits

Pupils with medical needs shall be included in visits as far as this is reasonably practicable. School staff will discuss any issues with parents/carers and/or health professionals so that extra measures (if appropriate) can be put in place. A copy of the pupils ICP or EHCP will be taken on the visit and detail arrangements relating to the management of their medication(s) during the visit should be included in the plan.

If a pupil requires prescribed or non-prescribed medication during a visit and an ICP or EHCP has not been developed and the management of their medication differs from procedures followed whilst in school, the school will conduct a risk assessment and record their findings.

Travelling abroad – Currently no trips abroad are offered by the Trust schools. Should this change our policy will be reviewed accordingly.

The results of risk assessments however they are recorded i.e. ICP, EHCP etc. will be communicated to the relevant staff and records kept of this communication.

Complaints

Issues arising from the medical treatment of a pupil whilst in school should, in the first instance, be directed to the Headteacher. If the issue cannot easily be resolved, the Headteacher will inform the governing body who will seek resolution.



Halsford Park Primary School
 Manor Road, East Grinstead,
 West Sussex, RH19 1LR
 Tel: 01342 324643
Mrs Claire Spencer – Headteacher



Pupil Health Information Form

This form is used to help the school to understand the medical needs of your child whilst in school and is used to plan the provision of their care. This information will be kept securely with your child's other records. If further information is needed we will contact you.

Please do not hesitate to contact the school if there are any issues you wish to discuss, or if you do not feel comfortable completing this form.

Childs Name	D.O.B
Gender	Year Group

Has your child been diagnosed with or are you concerned about any of the following:

Condition	Yes	No	Medication
Asthma (Please also complete an asthma information form available from the school)			
Allergies Please include any reactions to medications			
Epilepsy			
Diabetes			

Is your child taking regular medication for any condition other than those listed on the previous page?

Condition	Medication, emergency requirements

Thank you

Signed.....

Name.....

Date.....



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Parent/Carer consent to administer short-term non-prescribed 'ad-hoc' medicines

The school will not administer medication unless this form is completed and signed, **no verbal permission will be accepted**. This information will be kept securely with your child's other records. If further information is required, we will contact you. Please do not hesitate to contact the school if there are any issues you wish to discuss.

Pupils Name	D.O.B
Gender	Class

The Medicines Policy permits the school to administer the following non-prescription medication if your child develops the relevant symptoms during the school day. Pupils will be given a standard dose suitable to their age and weight. You will be contacted prior to medication administration. You will be informed when the school has administered medication by letter. The school holds a small stock of the following medicines:

☐ **Paracetamol**

☐ **Anti-histamine**

Tick the non-prescription medications above that you give your consent for the school to administer during the school day and confirm that you have administered these medications in the past without adverse effect. Please keep the school informed of any changes to this consent.

☐ **I confirm that my child has previously received the above medications and not suffered any adverse reactions**

Signature(s) Parent/Carer

Date

Print name



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Parental/Carer consent to administer medication

(where an Individual Healthcare Plan or Education Healthcare Plan is not required)

The school will not give your child medicine unless you complete and sign this form, and the school has a policy that the staff can administer medicine.

Date for review to be initiated by

Name of child

Date of birth

Class

Medical condition or illness

Medicine

Name/type of medicine
(as described on the container)

Expiry date

Dosage and method

Timing

Special precautions/other instructions

Are there any side effects that the school/setting needs to know about?

Self-administration – y/n

Procedures to take in an emergency

NB: Medicines must be in the original container as dispensed by the pharmacy and the manufacturer's instructions and/or Patient Information Leaflet (PIL) must be included

Contact Details

Name

Daytime telephone no.

Relationship to child

I understand that I must deliver the medicine personally to the school office

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school staff administering medicine in accordance with the school policy. I confirm that this medication has been administered to my child in the past without adverse effect. I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature(s)

Date

Parent/Carer

If this is a request to administer non-prescribed medication, please work with the school to complete the 'Individual Protocol for non-prescribed medication' form.



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Individual Protocol for non-prescribed medication

This form should be completed in conjunction with the 'Parental consent to administer medication' form

Under exceptional circumstances where it is deemed that their administration is required to allow the pupil to remain in school the school will administer non-prescription medicines for a maximum of 48 hours.

Date (requirement reviewed daily)	Time last dose administered at home as informed by parent/guardian	Dosage given in school	Time	Comments
Day 1				
Day 2				
3 main side effects of medication as detailed on manufacturer's instructions or PIL				
1.	2.	3.		

Emergency procedures – if the pupil develops any of the signs or symptoms mentioned above or any other signs of reaction as detailed on the manufacturer's instructions and/or PIL this might be a sign of a negative reaction or if it is suspected that the child has taken too much medication in a 24 hour period staff will call 999 and then contact the Parent/Carer(s).

I agree that the medical information contained in this plan may be shared with individuals involved with my child's care and education.

I am aware that each day I must inform the school when I last administered the medication and that the school will notify me, by telephone, when medication has been administered.

Agreed by: Parent/Carer.....Date.....

Record of medicine administered to all children

Name of school

[illegible]



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Individual protocol for an adrenaline auto injector

Child's name.....

D.O.B.

Class

Nature of Allergy:

.....

School attach photo
here

Contact Information

Name					Relationship to pupil	
Phone numbers	Work		Home		Mobile	

If I am unavailable please contact:

Name					Relationship to pupil	
Phone numbers	Work		Home		Mobile	

GP

Name:

Phone No:

Address:

Clinic/ Hospital Contact

Name:

Phone No:

Address:

MEDICATION

Name & expiry date:

- It is the parents responsibility to supply 2 auto injectors and to ensure they have not expired

Dosage & Method: **1 DOSE INTO UPPER OUTER THIGH**

- The school staff will take all reasonable steps to ensure does not eat any food items unless they have been prepared / approved by parents
- It is the schools responsibility to ensure this care plan is reviewed and parents inform the school of any changes in condition or treatment.

Agreed by: School Representative.....Date.....

- I agree that the medical information contained in this plan may be shared with individuals involved with my child's care and education.
- I give my consent for the school to administer my child's auto injector in an emergency as detailed in this plan

Signed:.....Print name..... Date.....

I am the person with parental responsibility

Individual protocol for.....using an Adrenaline auto injector

Symptoms may include:

- Difficulty in swallowing / speaking / breathing
- Wheezy / irregular breathing / excessive coughing
- Hoarseness
- Nettle rash (hives) anywhere on body
- Sense of impending doom
- Swelling of throat and mouth
- Abdominal pain, nausea & vomiting
- Feeling of weakness (BP drops)
- Collapse & unconsciousness
- Cold and clammy

Stay Calm

Reassure.....

One member of staff to Dial 999

REMEMBER

**A = Airway
B = Breathing
C = Circulation**

**Give autoinjector first
then dial 999**

**Administer autoinjector
in the upper outer thigh**

Remove cap protecting the needle
Hold autoinjector against upper outer thigh and
press it against patients leg. You will hear a click
when the adrenaline is injected.

**Hold in place
for 10 seconds.**

Can be given through clothing, but not very thick
clothing.

Note time injection given.

**If no improvement
give 2nd dose
5 minutes later**

Call Parents/Carers

Reassure

.....

Telephoning for an ambulance

You need to say: "I have a child in anaphylactic shock".

Give school details:

Give details: Childs name has a severe allergy and what has happened.

**DO NOT PUT THE PHONE DOWN UNTIL YOU ARE SURE ALL THE NECESSARY INFORMATION HAS BEEN
GIVEN**

Someone to wait by the school gate to direct the ambulance staff straight to the child.



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Protocol for the administration of Paracetamol

- Paracetamol can be administered to children of any age, dose must be suitable for their age and weight
- Verbal parental consent must be gained at the time of administration, this is as well as a completed and signed ad-hoc administration form. If the parents cannot be contacted paracetamol cannot be administered. Conversation with parent/carer must be recorded.
- If paracetamol is administered at any time during the school day parents will be informed of the time of administration and dosage.
- The school will keep records of the administration of paracetamol as for prescribed medication.
- Pupils must not bring paracetamol (or other types of painkillers) to school for self-administration.

Use with caution:

- Liver problems
- Kidney problems
- Long term malnutrition
- Long term dehydration
- Epilepsy

SIDE EFFECTS:

- Allergic reaction rash, swelling difficulty breathing
- Low blood pressure and a fast heartbeat
- Blood disorders
- Liver and kidney damage (overdose)

Do not administer if the pupil is also taking any of the following drugs:

- Metoclopramide (relieves sickness and indigestion)
- Carbamazepine (treats a number of conditions including epilepsy)
- Phenobarbital or phenytoin (used to control seizures)
- Lixisenatide – used to treat type 2 diabetes)
- Imatinib – used to treat leukaemia
- **Other drugs containing paracetamol e.g. Lemsip, Sudofed, Feminax**

IF YOU SUSPECT AN OVERDOSE CALL 999 IMMEDIATELY only 4 dose in 24 hours



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School will insert photo

Asthma Information Form

Please complete the questions below so that the school has the necessary information about your child's asthma. **Please return this form without delay.**

Child's Name:.....

Class:..... **D.O.B.**.....

1. Does your child need an inhaler in school? **Yes/No**

2. Please provide information on your child's current treatment.

Type of Inhaler

Dosage needed (puffs) How many times in one day?.....

Spacer required? **Yes/No**

3. What triggers your child's asthma?

We ask that an inhaler (and spacer if required) is provided which can be kept in school. Inhalers must be clearly labelled with your child's name and must be replaced before they reach their expiry date.

I agree to ensure that my child has in-date inhalers and a spacer (if required) in school.

Signed:.....(Parent/Carer) Date:.....

4. Does your child need to take their inhaler before doing exercise/PE? **Yes/No**

If so, how many puffs?

5. Do you agree to your child Self Administering? **Yes/No**

Signed:.....(Parent/Carer) Date.....

6. Do you give consent for the following treatment to be given to your child as recognised by Asthma Specialists in an emergency?

- Give **6 puffs of the blue inhaler via a spacer**
- Reassess after 5 minutes
- If the child still feels wheezy or appears to be breathless they should have a further **4 puffs of the blue inhaler**
Reassess after 5 minutes
- **If their symptoms are not relieved with 10 puffs of blue inhaler then this should be viewed as a serious attack:**
- **CALL AN AMBULANCE and CALL PARENT**
- **While waiting for an ambulance continue to give 10 puffs of the reliever inhaler every few minutes**

Yes/No

Signed:.....(Parent/Carer)

Date.....

Emergency Contact number.....

Please remember to inform the school if there are any changes in your child's treatment or condition.

Thank you

Parental Update (only to be completed if your child no longer has asthma)

My child no longer has asthma and therefore no longer requires an inhaler in school or on school visits.

Signed:

(Parent/Carer)

Date

For office use:

	Location of Inhaler	Expiry Date	Expiry Date	Date Checked	Date Checked	Date Checked
Inhaler						
Spacer (if required)						

Record any further follow up with the parent/carers: