BALDWINS HILL PRIMARY SCHOOL SUPPORTING PUPILS WITH MEDICAL CONDITIONS (Including First Aid)

Review Date: June 2027
Agreed by LGB: July 2026

Statement of Intent

The Children and Families Act 2014 places a duty on 'Governing Bodies of maintained schools, proprietors of academies…to make arrangements for supporting pupils at their school with medical conditions'.

The governing body of Baldwins Hill Primary School will ensure that these arrangements fulfil their statutory duties and are informed by Department for Education statutory guidance on Supporting Pupils at School with Medical Conditions, the Children and Families Act 2014 and the Equality Act 2010.

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.

This policy should also be read alongside the following policies:

- Attendance Policy
- SEND Policy
- SEND Information Report
- Children with Health Needs Who Cannot Attend School Policy
- Safeguarding and Child Protection Policy
- Accessibility Plan
- Mental Health and Wellbeing Policy
- Equality Information and Objectives

Inclusion and Equality

Baldwins Hill Primary School is committed to ensuring that pupils with medical conditions are fully included in school life and are able to access the same opportunities as their peers. The school recognises its duties under the Equality Act 2010 and will make reasonable adjustments where necessary to prevent pupils with medical conditions from being placed at a substantial disadvantage.
The school will actively support pupils with medical conditions to participate fully in educational visits, residential visits, clubs, sporting activities and all aspects of school life wherever it is safe and appropriate to do so.

Organisation

The governing body will develop policies and procedures to ensure the medical needs of pupils at Baldwins Hill 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 Baldwins Hill Primary School is Mrs Penny Duly, School Secretary. In her absence this falls to the Administration Assistant Miss Liz Pattenden. In their duties, staff will be guided by their training, this policy and related procedures.

Implementation monitoring and review

All staff, governors, parents/carers and members of the Baldwins Hill Primary School community will be made aware of and have access to this policy. This policy will be reviewed anually 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 the Lead for Managing Medicines 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 this might include the development of an Individual Health Care Plans (IHP) 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. The school will work proactively to put arrangements in place as quickly as possible following admission. In exceptional circumstances, temporary risk management arrangements may be required while specialist training or equipment is secured.

Pupils with medical needs

The school will follow Government guidance and develop an Individual Healthcare Plan (IHP), or where appropriate include provision within an Education, Health and Care Plan (EHCP), for pupils with medical conditions requiring additional support in school.
Medical conditions may include physical health conditions, neurological conditions and diagnosed mental health conditions where medical advice confirms that support is required during the school day.
The school recognises that some medical conditions may impact attendance, wellbeing, participation and learning. The school will work proactively with families, health professionals and the Local Authority to minimise disruption to education and ensure pupils remain engaged in learning wherever possible.
Individual Healthcare Plans will be developed for pupils who:

- have long-term, complex or fluctuating conditions;
- require medication in emergency situations;
- require medication regularly within the school day;
- require additional support, monitoring or reasonable adjustments to access education safely.

Where appropriate, pupils will be involved in discussions regarding their medical needs and will contribute to the development and review of their Individual Healthcare Plan. The school recognises the importance of pupil voice and will seek to involve children in decisions affecting their health, wellbeing and education wherever possible.

Individual Healthcare Plans (IHP) will be reviewed at least annually and whenever the pupil's medical needs or treatment change.

Participation in School Life
The school will make reasonable adjustments to support pupils with medical conditions to participate fully in all aspects of school life.
This includes:

- educational visits;
- residential visits;
- sporting activities;
- after-school clubs;
- enrichment opportunities;
- curriculum experiences.

Where necessary, individual risk assessments and healthcare plans will be reviewed to support participation. Decisions regarding participation will be made on an individual basis in consultation with parents, pupils and relevant healthcare professionals.

Transition Arrangements

The school recognises that transitions can be particularly important for pupils with medical conditions. Appropriate arrangements will be made to ensure that relevant information is shared with staff and receiving settings where necessary.

This may include:

- transition between classes and year groups;
- transfer to another school or educational setting;
- admission to the school mid-year;
- preparation for educational visits, residential visits and other significant changes to routine.

Where appropriate, Individual Healthcare Plans will be reviewed as part of transition planning, and relevant staff, parents, pupils and healthcare professionals will be involved to ensure continuity of support.

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 paracetamol, 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. The school will record and inform the parent/carer of the time and dose of any medication administered at the end of each day by telephone call.

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 (EHC). 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. The school will send annual reminders requesting parents/carers to inform the school if there are changes to consent gained.

- **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. Administration will be recorded using 'Record of medicine administered to an individual child' or 'Record of medicine administered to all children' forms and the parent/carer informed. 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 Health Plan or Education Health Care Plan as part of a wider treatment protocol. As recommended by the Government in 'Supporting pupils with medical conditions at school (DfE statutory guidance)' the school will also not administer aspirin 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:

- paracetamol (to pupils of all ages)
- antihistamine

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

- The parent/carer confirms daily the time the medication was last administered and this is recorded on 'Individual protocol for non-prescribed medication' form;
- 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 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) before 12pm:

- The school will contact the parent/carer 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/carer 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.

If a request for pain relief is made after 12pm:

- The school will assume the recommended time between doses has elapsed and will, with parental consent, administer 1 standard of dose of Paracetamol

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. The school inhaler will only be used in an emergency and will always be used with a spacer as outlined in the Asthma Toolkit. The school will develop IHP's for those pupils with severe asthma, and complete the Individual Protocol for pupils with mild asthma.

Anaphylaxis and allergic reactions – please see separate Trust Allergy Safe policy

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 IHP or EHC, the emergency procedures detailed in the plan are followed, and a copy of the IHP or EHC 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, if the school does not hold 2 in date auto-injectors for each pupil then a suitable number of auto-injectors will be purchased for use by the school in an emergency.

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.

Instructions for calling an ambulance are displayed prominently by the telephone in the school office.

The school recognises that some medical emergencies may arise in relation to diagnosed mental health conditions. Emergency responses will be guided by professional advice, individual healthcare plans and safeguarding procedures where appropriate.

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 IHP or EHC 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, and will be clearly labelled in an airtight container. 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/carer 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, theirsch 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.

Electronic Records

Where appropriate, medical incidents, medication concerns, communications with families and significant health-related events may also be recorded on the school's electronic recording systems in accordance with Data Protection legislation and school procedures.

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 Managing Medicines in Schools training 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 by the person who has completed the Managing Medicines course. Staff given instruction by the Lead for Medicines MUST complete a competency test and achieve a score of 100% in order to administer medication.

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 nursing team.

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 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 paracetamol and 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 ('Parental consent to administer medication' and/or 'Individual protocol for non-prescribed medication' forms). 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 IHP or EHP 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 IHP or EHP 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. IHP, EHP etc. will be communicated to the relevant staff and records kept of this communication.

Safeguarding

The school recognises that concerns about a child's medical care, access to treatment, attendance, welfare or family circumstances may also raise safeguarding concerns.

Where concerns arise regarding neglect of medical needs, failure to access medical treatment or wider concerns about a child's welfare, staff will follow the school's safeguarding procedures and seek advice from the Designated Safeguarding Lead.

All safeguarding actions will be managed in line with the school's Child Protection and Safeguarding Policy.

Unacceptable Practice

The school will not:

- prevent pupils from easily accessing their medication;
- assume every pupil with the same condition requires identical support;
- prevent participation in school activities unless supported by evidence and risk assessment;
- require parents to attend school to administer medication unnecessarily;
- send pupils home frequently or prevent attendance because sufficient arrangements have not been made;
- ignore professional medical advice or Individual Healthcare Plans.

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.

Baldwins Hill Primary School
Lowdells Lane, East Grinstead,
West Sussex, RH19 2AP
Tel: 01342 321572
Miss Jenny Dabell – 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

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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.

_____ _____

Parent/Carer Signature(s) Date **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…….

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Record of medicine administered to an individual child

Name of school	
Name of child	
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 _____

Parent/Carer signature _____

Date			
Time given			
Dose given			
Controlled drug stock			
Name of member of staff			
Staff initials			

Witnessed by _____

Date			
Time given			
Dose given			
Controlled drug stock			
Name of member of staff			
Staff initials			
Witnessed by			

Record of medicine administered to an individual child (Continued)

Date			
Time given			
Dose given			
Controlled drug stock			
Name of member of staff			
Staff initials			
Witnessed by			

Date			
Time given			
Dose given			
Controlled drug stock			
Name of member of staff			
Staff initials			
Witnessed by			

Date			
Time given			
Dose given			
Controlled drug stock			
Name of member of staff			
Staff initials			
Witnessed by			

Date			
Time given			
Dose given			
Controlled drug stock			
Name of member of staff			
Staff initials			
Witnessed by			

Record of medicine administered to all children

Name of school

Date	Child's name	Time	Name of	Dose given	Any reactions	Signature	Print name	Comments

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Consent to administer non-prescribed medication on a Residential Visit/School Trip

The school will not administer medication unless this form is completed and signed. This information will be kept securely with your child's other records. Whilst away if your child feels unwell the school staff may wish to administer the appropriate non-prescription.

Please do not hesitate to contact the school if there are any issues you wish to discuss.

Pupils Name	**D.O.B**
Gender	**Year/Tutor Group**

If your child develops the relevant symptoms during the residential visit, they will be given a standard dose suitable to their age and weight of the appropriate non-prescribed medication. If symptoms persist medical advice will be sought and if necessary the emergency services called. You will be informed when the school has administered medication on our return. The school will hold a small stock of the following medicines:

☐ **Paracetamol** ☐

☐ **Anti-histamine** ☐

☐ **Travel sickness** ☐

Tick the non-prescription medications above that you give your consent for the school to administer during the residential visit/school trip 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.

_____ _____

Signature(s) Parent/Carer Date

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West Sussex, RH19 2AP
Tel: 01342 321572
Miss Jenny Dabell – Headteacher

Individual protocol for Antihistamine as an initial treatment protocol for mild allergic reaction

Child's Name……..

D.O.B. ……

Class ……

School use attach photo here

Nature of Allergy:

……

……

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 - Antihistamine

Name of antihistamine & expiry date …….

- **It is the parents responsibility to ensure the Antihistamine has not expired**

Dosage & Method: As prescribed on the container.

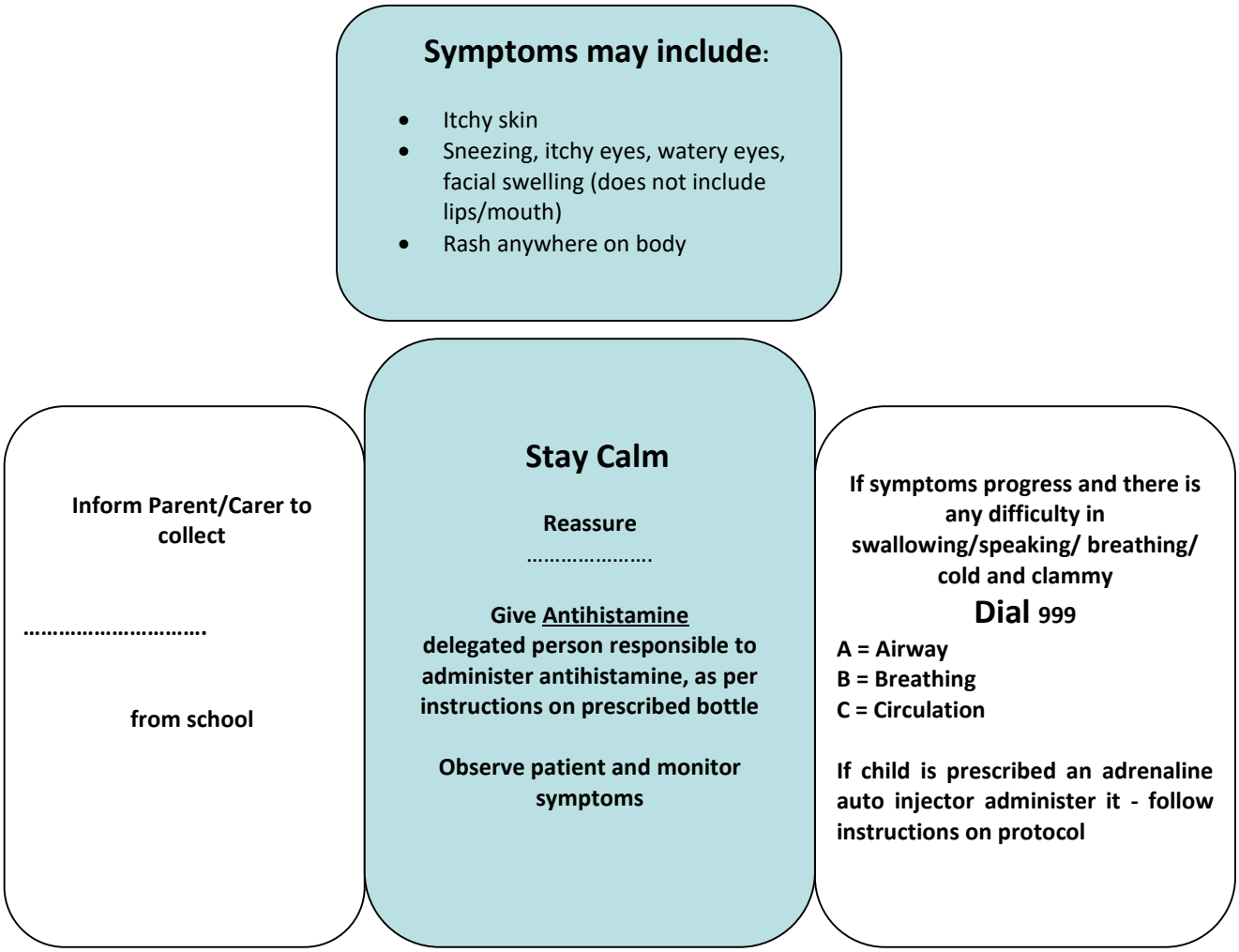
- **It is the schools responsibility to ensure this care plan is reviewed and parents inform the school of any changes in condition or treatment.**

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, and I give my consent to the school to administer anti-histamine as part of my child's treatment for anaphylaxis. I confirm I have administer this medication in the past without adverse effect.

Signed:……Print name……Date……
I am the person with parental responsibility

Individual protocol for using Antihistamine (e.g. Piriton)



If symptoms progress Dial 999 - Telephone for an ambulance

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

Give school details:

Give details: Pupils 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.

Baldwins Hill Primary School
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Individual protocol for an Emerade adrenaline auto injector

School use attach photo here

Child's name……..

D.O.B. ……

Class ……

Nature of Allergy:

……

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 Emerade

Name on Emerade & expiry date: ……

- **It is the parents responsibility to supply 2 EMERADE 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 Emerade or the school held adrenaline auto-injector (if my child's pen is lost/forgotten or malfunctions) to be administered in an emergency as detailed in this plan**

Signed:……Print name…… Date……

I am the person with parental responsibility

Individual protocol for……..……using an EMERADE (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 EMERADE first then dial 999 Administer Emerade in the upper outer thigh

Remove cap protecting the needle
Hold Emerade against upper outer thigh and press it against patients leg. You will hear a click when the adrenaline is injected.
Hold Emerade in place for 10 seconds.
Can be given through clothing, but not very thick clothing.
Note time injection given.

If no improvement give 2nd EMERADE 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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Individual protocol for an Epipen adrenaline auto injector

Child's name……..

D.O.B. ……..

Class ……

Nature of Allergy:

……

School use 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 EPIPEN

Name on EPIPEN & Expiry date: ……..

- **It is the parents responsibility to supply 2 EPIPEN 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 Epipen or the school held adrenaline auto-injector (if my child's pen is lost/forgotten or malfunctions) to be administered in an emergency as detailed in this plan**

Signed:……Print name…… Date……
I am the person with parental responsibility

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 EPIPEN first then dial 999 Administer Epipen in the upper outer thigh

Remove grey safety cap
Hold epipen with black tip downwards against thigh
jab firmly.
Hold epipen in place for 10 seconds
Can be given through clothing, but not very thick clothing.
Note time of injection given

If no improvement give 2nd EPIPEN 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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Individual protocol for a Jext pen adrenline auto injector

Child's name……..

D.O.B. ……

Class ……

School use attach photo here

Nature of Allergy:

……

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 JEXT

Name on JEXT & expiry date: ……

- **It is the parents responsibility to supply 2 JEXT pen 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 Jext pen or the school held adrenaline auto-injector (if my child's pen is lost/forgotten or malfunctions) to be administered in an emergency as detailed in this plan.**

Signed:……Print name…… Date……

I am the person with parental responsibility

Individual protocol for using a JEXT Pen (Adrenaline Autoinjector)

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 JEXT pen first
Then call 999 Administer in the upper thigh

Remove yellow cap, place black tip against upper outer thigh, push injector firmly into thigh until it clicks. **Hold in JEXT Pen in place for 10 seconds**.
Can be given through clothing, but not very thick clothing
Note time of injection given

If no improvement give 2nd JEXT Pen 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/carer:						