

DAVISON CE HIGH SCHOOL FOR GIRLS

POLICY AND MANAGEMENT DOCUMENT

Medical Policy

JANUARY 2023

Our Vision is that at Davison Church of England High School for Girls, students are free to choose any faith or none, but as a Church school, we want them to flourish, to live life in all its fullness as God intended. We reflect on what God has done for us through Jesus. We model his work through our Christian values. In our school we strive to reflect these values in the way we treat one another, conduct ourselves, and care for those in our community and around the world.

This policy reflects our commitment to our vision to supporting every child in our care to ensure they receive appropriate and timely medical support.

At Davison CE High School, it is a prime aim that every member of the school community feels valued and respected, and that each person is treated fairly. We are a caring Christian community, whose values are built on trust, friendship, thankfulness, hope, forgiveness and endurance. This outworks in the form of respect, love and care for all, as reflected in this policy.

Davison CE High School is committed to the care and well-being of all staff and students. Staff do not have a statutory duty to give medicines or medical treatment. However, prescribed medicines will be administered to enable the inclusion of students with medical needs and to enable regular attendance of all students. Furthermore, 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.

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 Davison C.E High School will ensure that these arrangements fulfil their statutory duties and follow guidance outlined 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.

Signed	Date
Chair of Governors	

Organisation

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

The Student Services Lead for Managing Medicines at Davison CE High School is Katie Adams or in her absence Charlotte Arinze. In their duties, staff will be guided by their training, this policy and related procedures.

Where there is a pupil that requires an EHCP and the SENCo is a more appropriate person, the lead will be Nicola Roberton.

Implementation monitoring and review

All staff, governors, parents/carers and members of the Davison CE High 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

An assessment of the pupil's medical needs will be completed. This might include the development of an Individual Health Care Plan (IHCP Appendix 5) or Education Health Care Plans (EHCP) and require a meeting with the school SENCo, a Risk Assessment and in some cases additional staff training. The school will endeavour to put arrangements in place to support that pupil as quickly as possible, and a pupil will only begin their admission when both parties are confident that sufficient arrangements can be put in place.

Pupils with medical needs

The school will follow Government guidance and develop an IHCP, EHCP or Risk Assessment for pupils who:

- Have long term, complex or fluctuating conditions
- Require medication in emergency situations ie Asthma / Anaphylaxis

Parents/Carer should provide Student Services with sufficient information about their child's medical condition and treatment / special care needed at school. Formal documentation, i.e. doctors letters/hospital discharge summaries should be given to Student Services if possible. Arrangements can then be made 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. Appendix 2 as attached.

All prescribed and non-prescribed medication

Pupils should not bring any medication to school for self-administration unless previously agreed with Student Services. On no account should a child come to school with medicine if they are unwell. Parents may call into the school and administer medicine to their child, or they may request that a member of school staff administers the medicine.

The school will keep a small stock of paracetamol, ibuprofen and antihistamine, for administration with parental consent 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 Student Services with the appropriate consent form: Form 3. The school will inform the parent/guardian of the time and dose of any medication administered at the end of each school day via email.

Confidentiality

As required by the Data Protection Act 1998, school staff should treat medical information confidentially.

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

Prescription Medicines

Medicine should only be brought to school when it is essential to administer it during the school day. Medication can ONLY be administered once a FORM 3 'Parental agreement for school to administer medicine' is completed. 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 the Medical Tracker database and parents will receive an email at the end of the school day advising them what medication has been administered.

Parents/carers are expected to remove any remaining medicine from school if they expire or 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 IHCP.

The school will also not administer aspirin unless prescribed, or unless they are guided to by a member of the ambulance call centre staff.

The storage and administration for non-prescription medication will be treated as prescription medicines.

A small stock of standard paracetamol, ibuprofen and antihistamine will be kept by the school for administration.

Before administering any pain relief pupils will be encouraged to get some fresh air/have a drink/eat something/go for a walk/sit in the shade/try a cool compress for a headache etc

ONLY the following will be administered following the necessary procedures:

- For relief from pain
- Standard Paracetamol (i.e. No plus caffeine or "extra") will be administered in liquid or tablet form for the relief of pain, i.e. period pain, migraine.
- Standard Ibuprofen will ONLY be administered in tablet form to pupils age 12 and over for period pain, migraine and muscle/skeletal disorders involving inflammation, i.e. joint sprains
- Ibuprofen will NOT be administered to any pupil diagnosed with asthma, unless under parental guidance.
- For mild allergic reaction anti-histamine [non-drowsy]
- Parental consent should be gained for those pupils known to require antihistamine as part of their IHCP.
- 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.
- Parents should administer antihistamine before the pupil starts school, it is not necessary for schools to administer antihistamine for the treatment of hayfever.
- For travel sickness For travel sickness medication will be administered if required before educational visits and must be age appropriate and supplied by the parent/guardian in its original packaging with the PIL if available. Parental consent to administer gained as part of the educational or residential visit.

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

Pain relief protocol for the administration of paracetamol and ibuprofen

If a request for non-prescribed pain relief is made by a pupil before 12pm:

- The school will contact the parent/carer and confirm that a dose of pain relief (Paracetamol or Ibuprofen) 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 documented. 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 and Ibuprofen) 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.
- IBUPROFEN The school will NOT administer Ibuprofen at all during the school day if it has been administered at home before school.

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

• The school will assume the recommended time between doses has elapsed and will, with prior parental consent, administer 1 standard dose of paracetamol or ibuprofen without any need to confirm with the parent/carer if a dose was administered before school, but if appropriate the pupil will still be asked if they have taken any other medication containing pain relief medication and this conversation will be recorded.

The school will inform the parent/carer at the end of the school day via email if pain relief has been administered, this will include the type of pain relief and time of administration.

Medical room, Student Services staff will contact parents via email if their child attends the medical room more than four times in a two-week period. Should their child continue to frequently visit the medical room, parents will be invited to attend a meeting so any medical issues can be addressed.

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 the Student Services database.
- Medication is licensed as suitable for the pupil's age;

- Medication is suitable for the pupil and their condition
- Administration is required more than 3 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 [Form 3] and confirmation the medication has been administered previously without adverse effect;

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. cough sweets or lozenges, will not be administered by the school.
- 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.

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 will ask the pupils parent/carer to provide a second inhaler which will be stored in the medical room, Student Services.

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 will develop IHCP's for those pupils with severe asthma, and complete the Individual Protocol [Appendix 6] for pupils with mild asthma.

Anaphylaxis

Where a doctor has recommended or prescribed an antihistamine as an initial treatment for symptoms of allergic reaction this will be detailed on the pupils IHCP. 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 the pupil must <u>NEVER</u> be left alone and should be observed at all times.

If symptoms develop or there are any signs of anaphylaxis, then the pupil will have an adrenaline auto injector administered if they have one prescribed. An ambulance will be called and the parents informed.

The school will ask parent/ carer to provide a spare auto-injector for school use. One auto-injector will be kept with the student in the event of an emergency and the other will be stored within the medical room, Student Services.

A student is responsible for carrying their auto-injector at all times, including residential and school trips. Parents are responsible for ensuring that the medication is within the expiry date and to update the school of any changes. The school will communicate with the parents if new medication is required and a record of these communications will be kept.

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.

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.

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 isn't available staff will administer the schools emergency medication with prior parental consent.

Parental consent to administer the 'school inhaler and/or auto-injector' will be gained when the pupil joins the school. 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 in a locked room and only named staff will have access. 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 kept in school.

Pupils taking their own medication

For certain long-term medical conditions, i.e. diabetes, 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 IHCP and parents should complete the request for student to carry their own medication [Form 7] Appendix 4 attached.

Storage and Access to Medicines

All medicines apart from emergency medicines (inhalers, adrenaline auto injector) will be kept securely (where access by pupils is restricted). Medicines are always stored in the original pharmacy container.

Emergency medicines such as inhalers, adrenaline and auto injectors must not be locked away. 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 Medical Room. 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 Medical Room Fridge to which pupil access is restricted, and will be clearly labelled in an airtight container.

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.

Record Keeping

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.

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 Management Team who will immediately inform the pupil's parent/carer. Details of the incident will be recorded locally as part of the school's local arrangements. Local records must include details of what happened, the date, who is responsible and any effect the mistake has caused. Senior Management will investigate the incident and change procedures to prevent reoccurrence if necessary. NB: Incidents that arise from medical conditions that are being well managed by the school do not need to be reported or recorded locally.

Staff Training

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.

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.

Educational Visits / Residential Visits

Educational Visit (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. Staff will contact parents at the time of administration to obtain consent.

A copy of the pupils IHCP will be taken on the visit and detail arrangements relating to the management of their medication during the visit should be included in the plan.

Residential Visit (Overnight Stay)

A copy of the pupils IHCP will be taken on the visit and detail arrangements relating to the management of their medication during the visit should be included in the 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 previously without adverse effect.

The school will keep its own supply of the following non-prescription medication [Paracetamol / Ibuprofen / Antihistamine] for administration to pupils during a residential visit. 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.

If Ad-hoc medication is administered on a school trip a record is kept and passed to student services on return.

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 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 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 – a risk assessment will be developed considering parental and medical advice and documented on the pupils IHP or EHP. If an IHP or EHP has not been developed, the school will record their findings.

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.

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.

Policy Created: July 2015

Policy Reviewed: February 2023 **Next Policy Review**: Spring 2024

Appendix 2:

Procedure for Establishing IHCP, Protocols or Risk Assessments

Parent/Healthcare Professional informs school that child has been newly diagnosed or is due to attend a new school, or is due to return to school following a long-term absence, or that medical needs have changed.



Staff within medical room, Student Services contact parent/healthcare professional to discuss the child's medical needs and identifies support required in school and most appropriate form of written plan.



Meeting or telephone contact to discuss and agree on the need for an IHCP/Protocol and Risk Assessment.



IHCP/Protocol and Risk Assessment completed by relevant trained staff and sent to Parent/carer for agreement and signed by all parties.



On receipt of signed documents to Student Services only relevant staff will be notified with a copy of IHCP/Protocol or Risk Assessment.



All IHCP/ Protocols will be reviewed on an annual basis unless there are medical changes notified to school by parent/carer prior to the end of year.

All risk assessments will be reviewed according to the injury sustained by the student and the review will be initiated by relevant staff within the medical room, Student Services.

FORM 3 - DAVISON C E HIGH SCHOOL FOR GIRLS

Parental agreement for school to administer medicine.

The school are unable to administer medication to your child unless you complete and sign this form: Please return the form once completed to Student Services*.

NOTE: All medication needs to be in its prescribed box with pharmacy label attached and patient information leaflet inside as per WSCC guidelines.

DATE:
CHILD'S NAME:
DATE OF BIRTH:
CLASS/FORM:
MEDICAL CONDITION/ILLNESS:
NAME & STRENGTH OF MEDICINE:
EXPIRY DATE:
DOSAGE & METHOD:
WHEN TO BE GIVEN:
SPECIAL PRECAUTIONS/INSTRUCTION:
ANY OTHER INSTRUCTIONS:
SELF ADMINISTRATION YES / NO [PLEASE DELETE AS APPROPRIATE]
NUMBER / QUANTITY OF TABLETS TO BE GIVEN IN SCHOOL
DATE FOR REVIEW [TO BE INITIATED BY MEMBER OF STAFF]
PARENT/CARER CONTACT DETAILS
NAME
ADDRESS
DAYTIME CONTACT NUMBER
RELATIONSHIP TO CHILD
The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to the school staff administering medicine in accordance with the school policy. I will inform the school immediately i writing if there is any change in dosage or frequency of the medication or if the medicine is stopped.
PARENT/CARER SIGNATURE
DDINT NAME
PRINT NAME* If more than one medicine is to be given a separate form should be completed for each one

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Appendix 4;

Davison CE High School for Girls Form 7

Request for student to carry her medication – Diabetics/Asthma/Auto-Injector

This form must be completed by parent/carer

If staff have any concerns, discuss the request with school healthcare professional

Students Name:
Address:
Form:
Name and Strength of Medicine:
Procedures to take in an Emergency:
Contact Information:
Name:
Daytime Phone number:
Relationship to student:
I would like my daughter to keep her medicine on her for use as necessary. I have explained to my daughter that the above-named medication should be kept in a bag that is either with her at all times or locked in her locker. Under no circumstances should she give any of her medication to any other student.
Signed:
Print Name:
Date:
NB If more than one medicine is required a separate form should be completed for

each.

Appendix 5:	<u>Healthcare plan</u>
	Student's Name:
	Form:
	Date of Birth:
	Medical Diagnosis or Condition:
•	
Describe medical need	ds and give details of student's symptoms:
•	
Della sana analasana	la (a. a. Dafana an and (ad Lan alaPana).
Daily care requirement	ts (e.g. Before sport/at lunchtime):
•	
Describe what constitu occurs:	tes an emergency for the student, and the action to be taken if this
•	
Follow up care:	
NA	

Who is responsible in an Emergency (State if different for off-site activities)

Student Services Officers/ Pastoral Manager/ First Aiders **CONTACT INFORMATION Family Contact 2** Family Contact 1 Name: Name: Phone No. Work: Phone No. Work: Home: Home: Mobile: Mobile: GP Clinic/Hospital contact Name: Name: Phone No: Phone No: Date Form Completed: June 2021 Review Date: July 2022 Signed..... Signed Student Services Officer Print Name..... Parent/Carer Print Name..... Date Signed: Date Signed

k.adams@davisonhigh.school c.arinze@davisonhigh.school

	Student's	Name:		
	Form:			
	Date of Bi	irth:		
	Dale of Bi	II III.		
CONTACT INFORMA	TION			
amily Contact 1			Family Contac	t 2
lame:		Nan	ne:	
hone no Work:		Pho	ne no Work:	
Home:			Home:	
Mobile:			Mobile:	
elationship to			ationship to	
tudent:		STUC	lent:	
3. Please provid	de informatio	YES/NO ou provided one to on on your child's c othma that is not re	current treatmen	t, including
Please provious medication/ Iame of	de informatio tablets for As	on on your child's o	current treatmen	t, including ken at school
3. Please provio	de informatio tablets for As	ou provided one to on on your child's c othma that is not re	current treatmen equired to be tak	t, including ken at school
3. Please provious medication/ lame of Medication	de informatio tablets for As Type of Inhaler	ou provided one to on on your child's c othma that is not re	Directions fo	t, including ken at school or use
3. Please provious medication/ Iame of Medication 4. What trigger 5. Does your chelling the many person of the medication of the medic	de information tablets for As Type of Inhaler s your child's anild need a resuffs?	su provided one to on on your child's continued that is not restricted. Strength asthma? E.g Exerced.	Directions for Direct	t, including ken at school or use

Please TICK as appropriate:

I would like a spare inhaler to be kept at school.

- The Inhaler(s) is in its original prescribed box with the pharmacy label attached and patient information leaflet inside.
- I am aware I am responsible for supplying the school with in date inhaler(s) for school use and that it must be replaced before they reach their expiry date

My child carries their own inhaler and does not require one to be kept in Student Services

- I have explained to my daughter that their inhaler(s) should be kept in a bag that is with her at all times and under no circumstances should she give any of her medication to any other student
- 8. The school keep spare Salbutamol inhalers for emergency use only.
 - I agree that the school can administer the school emergency salbutamol inhaler if required YES/NO
- 9. Do you give consent for the following treatment as outlined below to be given to your child as recognised by Asthma Specialists in an emergency? YES/NO
- 1. Take one puff of their reliever inhaler (with a spacer, if available) every 30-60 seconds up to 10 puffs.
- 2. If they feel worse at any point OR they don't feel better after 10 puffs call 999 for an ambulance and Call Parent.
- 3. If the ambulance has not arrived after 10 minutes and the symptoms are not improving, repeat step 1.
- 4. If the symptoms are no better after repeating step 1, and the ambulance has still not arrived, **contact 999 again immediately.**

If your child's emergency protocol is different to the one above, please ensure you provide us with their specific protocol.

- I give consent for the school to administer my child's inhaler in accordance with the emergency treatment detailed above YES/NO
- The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to the school staff administering medicine in accordance with the school policy
- I agree that my child's medical information can be shared with school staff responsible for their care YES/NO
- 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.

Signed:	Print name
Č	
Date	

Individual protocol for Adrenaline Auto-injector

	Student's Name:		
	Form:		
	Date of Birth:		
CONTACT INFORMATIO			
CONTACT INFORMATION Family Contact 1	JN	Family Contact 2	
Name:		Name:	
Phone no Work:		Phone no Work:	
Home:		Home:	
Mobile:		Mobile:	
Relationship to		Relationship to	
student:		student:	
Clinic/Hosp	ital contact	GP	
Name:		Name:	
Phone No:		Phone No:	
Allergic to:			
Brand of Auto-Injector:			
Does your child need to take an antihistamine? If so, please provide us with the name of the drug, strength of the drug and directions for use:			
Please SIGN each individual box:			
My child carries their own Auto-injector I have explained to my daughter that their Auto-injector(s) should be kept in a bag that is with her at all times and under no circumstances should she give any of her medication to any other student.			
I understand it is my responsibility to ensure the Auto-injector carried by my daughter is in date			
A spare auto-injector has been provided for school use • The Auto-injector(s) is in its original prescribed box with the pharmacy label attached and patient information leaflet inside.			

I am aware I am responsible for supplying the school with in date Auto-injector(s) for school use and that it must be replaced before they reach their expiry date

Symptoms of reaction: please circle as appropriate

- 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 (blood pressure drops)
- Collapse & unconsciousness
- Cold and clammy

•	Other
Any	other information:

Dosage & Method: 1 DOSE INTO UPPER OUTER THIGH

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 injection given

If no improvement give 2nd JEXT Pen 5 minutes later

Give EPIPEN first then call 999 Administer in the upper outer thigh

Remove arev 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 injection given

If no improvement give 2nd EPIPEN <u>5 minutes</u> later

Give EMERADE first then call 999 Administer in the upper outer thigh

Remove cap protecting the needle. Hold Emerade against upper outer thigh and press it against patient's 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

- I give consent for the school to administer my child's auto-injector in accordance with the emergency treatment detailed above YES/NO
- I agree that my child's medical information can be shared with school staff responsible for their care YES/NO
- The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to the school staff administering medicine in accordance with the school policy
- 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.

Signed:	.Print name
Date	

Telephoning for an ambulance

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

Give school details: Davison CE High School, Selborne Road BN11 2JX

Give details: Child has a severe allergy and describe 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