



Huntington School

Learn and succeed

MEDICAL NEEDS POLICY

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Member of Staff Responsible for the Policy:	Warren Lowe
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1.0 Introduction

1.1 Huntington School is committed to reducing the barriers to participation in activities and learning experiences for all students. This policy sets out the steps which Huntington School will take to ensure full access to learning for all students who have medical needs and are able to attend Huntington School.

1.2 Medicines should only be taken to Huntington School when essential; that is where it would be detrimental to a student's health if the medicine were not administered during the school day.

1.3 Statutory Framework

This policy is written in accordance with Section 100 of the *Children and Families Act 2014*, which places a duty on governing bodies to make arrangements for supporting pupils with medical conditions. The school has had regard to the Department for Education's statutory guidance *Supporting pupils at school with medical conditions*.

Huntington School recognises that many medical conditions may constitute a disability under the *Equality Act 2010*. Where this is the case, the school will make reasonable adjustments to ensure that pupils with medical conditions can access education, school activities, trips and enrichment opportunities on the same basis as their peers.

This policy applies to all pupils with medical conditions, whether short-term, long-term, fluctuating or undiagnosed, where supportive arrangements are required to enable safe access to education.

2.0 Responsibilities

2.1 The Governing Body has overall responsibility for ensuring that effective arrangements are in place to support pupils with medical conditions and for ensuring compliance with statutory duties.

The Governing Body will:

Ensure this policy is reviewed at least annually and after any serious medical incident or near miss

Appoint a **named Governor** with strategic responsibility for medical conditions

Ensure sufficient staff are appropriately trained

Ensure the school's arrangements are carried out in practice and monitored for effectiveness



Ensure appropriate insurance and indemnity arrangements are in place

- 2.2 The SENDCO with special responsibility for Medical Needs is to assist the governors in these respects.
- 2.3 Parents of students with medical needs must keep the school informed of their child's needs on the student's entry to the school and when their needs change. They will be given a copy of the Parent/Carer's Guide to Medicines in Schools (Annex A) outlining their responsibilities if they are requesting staff administer medicines to their child whilst in school.
- 2.4 The School medical officer is responsible for drawing up Health Care Plans.
- 2.5 The First Aid Officer is responsible for circulating Health Care Plans and the Serious Medical Needs List to staff. They are also responsible for the administration of all medical forms, logs and registers.
- 2.6 Individual teachers are responsible for noting and implementing measures contained in the Serious Medical Needs List and in Health Care Plans. The Staff Handbook gives details of appropriate treatment for students with diabetes, asthma, epilepsy and anaphylaxis. The Handbook can be found as a quick link on the school desktop.
- 2.7 Student Support Leaders and the wider Attendance team are responsible for liaising with parents and students who are absent on long term sickness.
- 2.8 There is no legal duty which requires school staff to administer medication; this is a voluntary role unless it is in staff's employment contracts. If staff follow documented procedures, they are fully covered by their employer's public liability insurance.
- 2.9 Huntington School will ensure that staff receive proper support and training where necessary. The Premises Manager will agree when and how such training takes place, as part of their responsibility for Health and Safety in school.
- 2.10 All practices and procedures referred to in this document follow statutory guidance and follow City of York Council guidelines and policy.
- 2.11 The day-to-day implementation of this policy is delegated to a **named member of the Senior Leadership Team**, who is responsible for:
 - Ensuring staff are aware of pupils' medical conditions where appropriate
 - Overseeing the development, implementation and review of Individual Healthcare Plans
 - Ensuring training needs are identified and met
 - Ensuring that incident reporting and follow-up actions are complete
 - Liaising with healthcare professionals and parents/carers as required



3.0 Prescribed Medicines

- 3.1 Medicines should only be brought into Huntington School when essential. Where possible, parents/carers are encouraged to ask doctors to prescribe medication in dose frequencies which can be taken outside school hours. It is the responsibility of parents/carers to supply written information about the medication their child needs to take in Huntington School.
- 3.2 The First Aid Officer should check that any details provided by parents/carers are consistent with instructions on the container or on the consent form. Medicines will not be accepted anywhere in Huntington School without prior agreement of the First Aid Officer. Complete written and signed instructions from parent/carer are required whenever accepting medicines on Form M1 (Annex B).
- 3.3 Medicines must always be provided in the original container as dispensed by a pharmacist and handed directly to the First Aid Officer. Each item of medication must include the prescriber's instructions for administration. Medicines that have been taken out of the container as originally dispensed will not be accepted. Parental requests for changes to dosages will not be made without receiving a new supply which is correctly labelled or a written request from the doctor. This will require an amendment to Form M1.
- 3.4 Parents/carers or the student's doctor should provide the following details as a minimum:
- Name of student
 - Name and strength of medication
 - Dosage
 - Time, frequency and method of administration
 - Length of treatment
 - Date of issue
 - Expiry date
 - Possible side-effects
 - Storage details
 - Other treatment

Surplus or out-of-date medication will be returned to parent/carers for safe disposal. If this is not possible the medication will be returned to the pharmacy.



4.0 Controlled Drugs

- 4.1 Huntington School agrees in principle to the administration of controlled drugs (eg Ritalin used for ADHD), provided that the correct procedures are followed, as outlined in this policy and in accordance with the Misuse of Drugs Act. Wherever possible, medicines on the Home Office's Controlled Drug List should be brought in on a daily basis by a parent. If this is not possible the controlled drug will be kept in a locked non-portable container and only named staff will have access to it. A record will be kept of quantity received and quantity handed out for audit and safety purposes.
- 4.2 In line with our Allergens Policy, Huntington School will ensure that adrenaline auto injectors (AAIs) are stored and managed safely, while remaining readily accessible in an emergency.
- 4.3 Misuse of a controlled drug, such as passing it to another student for use, is an offence. If this occurs Huntington School will inform parents and, where necessary, the police.

5.0 Non-prescribed Medicines

- 5.1 Huntington School discourages the use of non-prescribed medication but if medication is required, eg for headache, toothache or period pains, pain relief in the form of paracetamol may be administered by the First Aid Officer or Duty First Aider with specific prior written agreement from parents/carers by completing form M1.
- 5.2 Aspirin and aspirin containing preparations must not be given to students under the age of 16 unless it is on the prescription of a doctor.

6.0 Self-Management/Administration

- 6.1 Students, may with prior written agreement from their parent/carer (Form M2) where appropriate, manage their own medication, under the supervision or with the knowledge of staff and following procedures laid out in their individual health care plan. This may include carrying their medication securely on their person or collecting it from a lockable facility. Current practice shows this to be a rare occurrence. The safety of other students will always be considered.
- 6.2 Parents/carers will be asked to confirm in writing using Form M2 (Annex C) if they wish their child to carry their medication with them in school.
- 6.3 Students are encouraged to carry their own asthma inhalers, if appropriate.



7.0 Short Term Medical Needs

- 7.1 Medicines should only be taken to school when essential; that is where it would be detrimental to a student's health if the medicine were not administered during the school or setting 'day'. In certain circumstances, eg completing a course of antibiotics, parents may apply to the First Aid Officer, using Form M1.

8.0 Individual Healthcare Plans (IHPs)

- 8.1 Huntington School will put an Individual Healthcare Plan in place for any pupil whose medical condition requires supportive arrangements to enable safe and full access to education. This may include, but is not limited to:
- Pupils who require medication to be administered in school
 - Pupils with allergies requiring active management or emergency response
 - Pupils whose medical condition meets the definition of disability under the Equality Act 2010
 - Pupils whose medical condition impacts attendance, participation or wellbeing
 - A formal medical diagnosis is not a prerequisite for an Individual Healthcare Plan where the school identifies that support arrangements are required.
- 8.2 In the case of long-term medication, the School Nurse will agree with parents/carers how often they should jointly review the individual health care plan. This will be at least once a year, or when circumstances change.
- 8.3 In exceptional and/or complex cases, Emergency Treatment Plans will be initiated and written by health care professionals, then shared with the school. The named health professional will be contacted if an Emergency Treatment Plan has been actioned so that appropriate de-briefing can occur.
- 8.4 If there are any special religious and/or cultural beliefs which may affect any medical care that the student needs or receives, particularly in the event of an emergency, this will be by prior written agreement of the parent/carer using Form M4 (Annex E).
- 8.5 Individual Healthcare Plans will be reviewed:
- At least annually
 - When the pupil's medical needs change
 - Following a serious medical incident or near miss
 - When a pupil transfers between education phases or begins a new pattern of attendance
 - Reviews will involve the pupil (where appropriate), parents/carers and relevant professionals.



9.0 Safe Storage of Medicines

- 9.1 Huntington School will ensure that all emergency medicines such as asthma inhalers and adrenaline pens are readily available to students. Parents/carers should provide a labelled spare inhaler and and/or adrenaline pen to be kept by the First Aid Officer. Whenever possible students are encouraged to carry their own inhalers.
- 9.2 Medicines are stored strictly in accordance with the product instructions (paying particular note to temperature) and in the original container in which it was dispensed. Medicines which need to be refrigerated are kept in a refrigerator in the Medical Room.
- 9.3 Students will be told where their own medicines are stored and who holds the key.
- 9.4 Staff should be aware of the implications for safe storage of their own medicines.

10.0 Administration of Medicines

- 10.1 No students can be given medication by staff employed by the school, without their parent/carer's written consent.
- 10.2 Staff giving medicines will routinely check
1. The student's name
 2. Prescribed dose
 3. Expiry date
 4. Written instructions provided by the prescriber the student's parent/carer.
- 10.3 In the rare event that the incorrect dosage was given to a student, staff would follow the guidance on the medication and seek advice from NHS direct if necessary. Parents would always be informed.

11.0 Record Keeping

- 11.1 Huntington School will keep a record of medicines given to students and the staff involved in the Medical Log. This will also apply to off-site activities eg residential trips etc. Trip organisers will provide the First Aid Officer with a list of students attending a school trip or visit and copies of Health Care Plans for any students planning to go on the trip will be given to the trip organiser by the First Aid Officer.
- 11.2 A record will be kept of all medicines received, including quantity, even if they are not subsequently administered. If medicines are given to students whilst on off-site activities the trip organiser will complete Form M5 (Annex F) and pass it to the First Aid Officer on their return to school.



12.0 Refusing Medication

- 12.1 If a student refuses their medication, Huntington School will not force them to take it but will note it in the records. The school will provide parents/carers with details of when medication has been refused or has not been administered for any other reason, on the same day. If a refusal to take medicines results in an emergency, the school's emergency procedures will be followed.

13.0 School Emergency Procedures

- 13.1 If an emergency occurs where a student, member of staff or visitor to school requires medical attention it should be reported to a member of staff immediately. The member of staff should then call Extn 229 for the Duty First Aider. The Duty First Aider will administer first aid treatment and decide whether an ambulance needs to be called.
- 13.2 If the Duty First Aider calls an ambulance they will send another member of staff/student to inform Reception. Reception will need to be informed of the student's name, form number and brief details of the medical incident so they can inform the parent/carer of the nature and seriousness of the incident.
- 13.3 Reception will print off a copy of any health records and pass in an envelope to the member of staff/student returning to the incident. This should be given to the Duty First Aider to refer to whilst administering first aid and then passed to the ambulance crew when they arrive. Reception will then contact a parent/carer to notify them of the incident, providing brief details of what has happened and asking them to meet their child at the hospital.

The only exception to this is if the Duty First Aider decides and informs Reception that it is more appropriate for the Duty First Aider to speak to the parent/carer themselves.

- 13.4 The Duty First Aider will arrange for a member of staff to accompany a student to hospital until a parent/carer is available.
- 13.5 **Recording, Reporting and Learning from Incidents**
All medical incidents requiring emergency action will be recorded in accordance with school procedures.

A serious medical incident includes any event that results in hospital treatment, administration of emergency medication or could reasonably have resulted in serious harm.

A near miss is an event that did not result in harm but had the potential to do so. Serious incidents and near misses will be reviewed to identify learning points, and



where appropriate will result in updates to Individual Healthcare Plans, risk assessments, training or this policy.

14.0 Sporting Activities

- 14.1 Huntington School will ensure staff are aware if a student requires medication as a precautionary measure before taking part in PE or other physical activity, along with any emergency procedures. Inhalers will routinely be taken to PE or other physical activity. Risk assessments will be carried out if considered necessary.
- 14.2 If a student wears a MedicAlert[®] (eg a bracelet or necklace to alert others to a specific medical condition in case of an emergency) it may be necessary to consider removing it temporarily in certain circumstances, if there is a risk that it could cause injury in games or practical activities. Temporary removal can only take place if this is agreed in the Health Care Plan, staff will be aware of the significance of the MedicAlert[®] and will keep it safe.

15.0 Educational Visits

- 15.1 Huntington School is aware of its responsibilities under the Equality Act and will make every effort to continue the administration of medication to a student whilst on trips away from the school, even if additional arrangements are required.
- 15.2 In line with the school's School Trips and Visits Policy, appropriate risk assessments will be undertaken and agreed with the parent/carer. Arrangements for taking any necessary medicines will be considered. Staff will be made aware of students' medical needs, procedures for the administration of medication and relevant emergency procedures.
- 15.3 Concerns about a student's safety or the safety of others will be discussed with parents/carers and advice sought from the health visitor, school nurse or the student's GP.

16.0 Journeys abroad and exchange visits

- 16.1 If students are involved in journeys abroad, arrangements will be made to ensure that all receiving parties have a clear understanding of the student's medical needs. In some circumstances it may be necessary to provide translated documentation.

17.0 Home/school transport

- 17.1 If supervision is necessary whilst travelling on Local Authority transport, this will usually be identified in the student's EHCP (for high need SEND) or Individual Health Care Plan. Where appropriate and with parental agreement, individual health care plans will be shared with home-school transport escorts and respite care providers.



18.0 Disposal of Medicines

- 18.1 Parents/carers are responsible for disposing of medicines safely, including ensuring that date expired medicines are returned to a pharmacy for safe disposal. The First Aid Officer will do this if it is not possible for the parent/carer to return to school.

19.0 Hygiene/Infection Control

- 19.1 First Aid Staff have been made aware of basic hygiene precautions for avoiding infection, such as washing and drying hands before and after the administration of medicines.
- 19.2 First Aid Staff will have access to protective, disposable gloves. Extra care will be taken when dealing with spillages of blood or other bodily fluids and when disposing of dressings or equipment. A sharps container will be used for needles. Parents are responsible for its provision, collection and disposal.

20.0 Training

- 20.1 Huntington School will ensure that staff receive proper support and training where necessary. The Business Manager will agree when and how such training takes place, as part of their responsibility for Health and Safety issues in school.
- 20.2 The First Aid Officer will use the Self Audit Checklist (Annex G) on an annual basis to identify any issues with School Medical Needs and bring these to the attention of the SENDCO with special responsibility for Medical Needs and the Business Manager with responsibility for dealing with Health and Safety issues in school.
- 20.3 Huntington School will work within the CYC policy '*Managing Medicines in York Schools Early Years and Out of School Settings*' when responding to the needs of children with the following common conditions, guidance is in Annex H:
- Asthma**
 - Epilepsy**
 - Diabetes**
 - Anaphylaxis**

20.4 Huntington School will work in line with the current Statutory guidance for 'Supporting pupils at school with medical conditions'.

- 20.5 The Business Manager, SENDCO and First Aid Officer will coordinate support and training, according to needs.



20.5 Staff should always treat medical information confidentially. The First Aid Officer will agree with the student where appropriate and parent/carer who else will have access to records and other information about the student.

21.0 Allergy Safety

Huntington School recognises the increasing prevalence and seriousness of allergies and the specific risks they present in education settings.

The school maintains a separate, published Allergens Policy, which should be read alongside this policy. The Allergens Policy sets out the school's arrangements for:

- Identifying pupils with allergies
- Risk assessment and allergen management
- Staff training and awareness
- Emergency response, including use of adrenaline auto-injectors
- Recording and reviewing incidents and near misses
- This policy will be reviewed annually and following any serious allergy-related incident.



Annex A

Medicines In Schools: A Parent/Carer's Guide

A copy of the Managing Medicines in School Policy, which outlines Huntington School's practices and procedures relating to administering medicines, is available on the school website - [www.huntingtonschool.co.uk/Our School/ Policies](http://www.huntingtonschool.co.uk/Our%20School/Policies).

This handout aims to inform you of your responsibilities with regard to supporting this policy in school.

1. Medication will not be accepted without complete written and signed instructions from the parent/carer.
2. Medicines should only be brought into school when essential ie where it would be detrimental to your child's health if the medicine were not administered during the school day.
3. Medicines should be handed to the First Aid Officer in the containers in which they were supplied. Only a reasonable amount of medicine should be handed in at any one time.
4. Medicines containers should be clearly labelled with:
 - The student's name
 - The name of the medicine
 - Dosage and frequency
 - Date of dispensing
 - Storage instructions
 - Expiry date
5. School will not accept unlabelled items of medication
6. School can only follow the instructions on the bottle/packet. Changes to dosage can only be made in accordance with instructions on a dispensed container or written instruction from a doctor.
7. Unused medicine must be collected and taken home when requested.

Other ways in which you can support school are:

- Make sure your child is fit and well enough to attend school
- Provide full details, in writing, of any health problems he/she may have. Keep the school informed of any changes.
- Provide full written details of any special religious and/or cultural beliefs which may affect any medical care that the child receives, particularly in the event of an emergency.
- All information should be provided as soon as possible, to allow the school sufficient opportunity to plan and prepare how they can meet your child's needs.
- Make every effort to attend meetings requested by the school and co-operate in drawing up an Individual Health Care Plan (if applicable).
- Ensure the school has a telephone number where you can be contacted in an emergency.

Thank you in anticipation for noting your responsibilities and helping us maintain the health and safety of all students in our care.



Annex B FORM M1

FORM FOR A PARENTAL REQUEST FOR THE SCHOOL TO ADMINISTER MEDICATION

Please note the school will not give your child medicine unless you complete and sign this form. The Headteacher has agreed that school staff can administer medication in accordance with the school's Medical Needs Policy.

DETAILS OF STUDENT

Surname: _____ Forename(s): _____ Form: _____

Address: _____

Condition or illness: _____

MEDICATION

Name and strength of medication (as described on the container): _____

Amount handed to school:	tablets/ml	date:	initials:
	tablets/ml	date:	initials:
	tablets/ml	date:	initials:

For how long will your child take this medication: _____

Date dispensed: _____ Expiry date: _____

Full Directions for use: _____

Dosage, method and timing: _____

Special Precautions: _____

Side Effects: _____

Procedures to take in an Emergency: _____

CONTACT DETAILS:

Name: _____ Daytime Telephone No: _____

Relationship to Student: _____

Address: _____

I understand that I must deliver the medicine personally to the First Aid Officer and accept that this is a service which the school is not obliged to undertake.

Date: _____ Signature(s): _____



Annex C

FORM M2

FORM FOR PARENTAL REQUEST FOR A STUDENT TO CARRY AND ADMINISTER THEIR OWN MEDICATION

Student's Name: _____ Form: _____

Address: _____

Condition or illness: _____

Name of Medicine and Dosage: _____

Procedures to be taken in an Emergency: _____

CONTACT INFORMATION

Name: _____

Daytime Phone No: _____

Relationship to child: _____

I would like my child to keep their medication on them for use as necessary.

Signed: _____ Date: _____



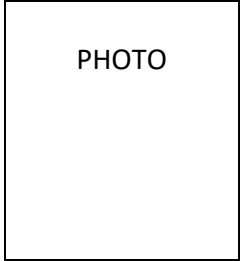
**Annex D
Form M3**

HUNTINGTON SCHOOL HEALTH CARE PLAN FOR A STUDENT WITH CHRONIC HEALTH NEEDS

Name -----

Date of Birth -----

School -----



Medical Background

----- has an allergy to nuts, nut oils and food containing nut products. If he inadvertently eats any trace of nuts he may very rapidly develop the severe allergic reaction known as anaphylaxis, which can be fatal.

Describe what constitutes an emergency for the student

Milder Reactions

- Nettle rash, Wheals, itching
- Swelling of lips & eyes, no breathing problems
- Nausea or Vomiting

Severe reaction

Allergic (anaphylactic) reaction

- Swelling of the tongue, throat
- Shortness of breath (airway obstruction) or severe wheeze (tightness of chest).
- If the symptoms progress he may become unconscious or collapse

Action to be taken

To prevent a reaction:

- ----- parents will educate him and provide him with lunch
- An Epipen must accompany ----- if he leaves the school premises
- Staff must be aware of ----- condition and trained in the use of the Epipen
- Care must be taken in science experiments and food technology classes involving nuts.

In an emergency:

- **Administration of Adrenaline (Epipen) intramuscularly**
 1. Pull off **grey** safety cap
 2. Hold Epipen approx 10cm from outer thigh at right angle with **black** tip pointing towards thigh and jab firmly (can be given through clothing). You should hear a click and hold in place for 10secs and massage for 10secs after removing needle.
 3. Call Ambulance(999)Message to be given: ****name** anaphylactic shock !**
 4. If no obvious signs of recovery after 10 minutes, administer a second Epipen



• **Milder reactions**

1. Only require antihistamines as soon as possible (eg:- Piriton, Zirteck, Clarityn etc)

Location of Medication

In the school medical room

Care plan completed by

(please print name).....

Title.....Date...>.....

Contact telephone numbers

Family contact 1 Telephone Number

Family contact 2 Telephone Number

General Practitioner Telephone Number

Copies of healthcare plan held by

School Health
Huntington School
Parents

Medication to be administered

Please note, it is parents' responsibility to keep the school up to date with medical information and to provide medication, which is within its expiry date.

Epipen 150mcgm/300mcgm IM Weight=
Prescribed by
Piriton Syrup 5mls (2mg)

Signed:

Parent	Date
Head Teacher/Named Teacher	Date
First Aid Officer	Date
Name and tel:no	

The plan will be reviewed on transfer to secondary school.



**Annex E Health Care Plan For A Student With
Form M4 Religious And/Or Cultural Beliefs Which May Affect The Medical Care
They Receive**

Student's Name -----

Date of Birth -----



Religious and/or Cultural Beliefs of the Student

_____ is a Jehovah's Witness.

Instructions regarding action not to be taken

As a member of the religious body of Jehovah's Witnesses and parent/carer for _____, I categorically refuse the use of foreign blood or blood components in the treatment of my child.

I understand this form will be handed to the Ambulance Crew if an ambulance is called to school in the case of an emergency.

Instructions completed by

Signature: Date:.....

Print Name:..... Relationship to Student:.....

Contact telephone numbers

Family contact 1 Telephone Number

Family contact 2 Telephone Number

General Practitioner _____ Telephone Number _____

Copies of healthcare plan held by

Huntington School
Parents

Signed:

Parent Date

SENCO Date

First Aid Officer Date



Annex F FORM M5

RECORD OF MEDICATION ADMINISTERED TO STUDENT OFF-SITE

Please note the school will not give any student medicine unless we have signed authorisation (Form M1) from the parent/carer.

The Headteacher has agreed that school staff can administer medication in accordance with the school's Medical Needs Policy.

DETAILS OF STUDENT

Surname: _____ Forename(s): _____ Form: _____

Address: _____

Condition or illness: _____

MEDICATION

Name and strength of medication (as described on the container):

Amount handed to trip organiser: _____ tablets/ml date: _____ initials: _____

Date dispensed: _____ Dosage: _____ Method: _____

Date dispensed: _____ Dosage: _____ Method: _____

Date dispensed: _____ Dosage: _____ Method: _____

Date dispensed: _____ Dosage: _____ Method: _____

Date dispensed: _____ Dosage: _____ Method: _____

Date dispensed: _____ Dosage: _____ Method: _____

Date dispensed: _____ Dosage: _____ Method: _____

Date dispensed: _____ Dosage: _____ Method: _____

Date dispensed: _____ Dosage: _____ Method: _____

NB Please continue overleaf if necessary

Signature of staff administering medicine: _____ Date: _____

Staff Name: _____ Job Title: _____



Annex G

Self Audit Checklist For Huntington School

Question	Yes/No/Not Applicable	Comments/Actions
Are you familiar with the school's Medical Needs Policy and CYC Managing Medicines in York schools, Early Years and Out of School Settings?		
Do you have a record of all students who require medication in school?		
Are you aware of how to access support and training in managing medicines and medical conditions?		
Is your insurance cover adequate?		
Do you have a secure storage area for drugs and medicines?		
Do you have a drugs misuse policy?		
Do you have a clear recording/reporting system for administering medication?		
Are your systems reviewed regularly?		
Are your communication systems for advising staff or students with medical needs adequate?		
Are students with medical needs considered in your emergency planning?		
Have you identified procedure for including all students in trips and work experience safely?		
Have you a clear record of any students whose special religious or cultural beliefs affect their medical care?		

Signed:

Job Title:

Date:



Annex H

Dealing with Diabetes, Asthma, Epilepsy and Anaphylaxis

Diabetes

Hypoglycaemia

When the blood-sugar level falls below normal (hypoglycaemia), brain function is affected rapidly.

Recognition

There may be:

- a history of diabetes; the casualty will sometimes, but not always, recognise the onset of a “hypo” attack
- weakness, faintness, or hunger
- palpitations and muscle tremors
- strange actions or behaviour; the casualty may seem confused, belligerent or may even be violent
- sweating
- pallor
- cold, clammy skin
- a strong, bounding pulse
- a deteriorating level of response
- shallow breathing
- a diabetic’s warning card (medic-alert) or bracelet, sugar lumps, tablets or an insulin syringe (which may look like a pen) among the casualty’s possessions.

Treatment

1. Help the casualty to sit or lie down and give them something to eat if you can. They should all carry supplies.

NB If the casualty is losing consciousness do not attempt to get them to eat, call an ambulance immediately.

2. Inform the Duty First Aider by calling extn 240 – they have supplies of drinks/snacks too.

Diabetics have permission to eat a snack in class as and when they need it. PE staff should note that diabetics need to eat a snack or drink a sugary drink before taking exercise.

Asthma or panic attacks

If a student has either of these types of attack in your lesson, move them outside the classroom, sit them on the floor and call extn 240 for the Duty First Aider. **Do not** sit them on a chair (in case they fall off or faint) **or** send them anywhere.

NB In the case of an asthma attack it is important to act quickly and follow the attached asthma flow chart.

Epilepsy

If a student has an epileptic seizure they should be made comfortable on the floor and teachers should make sure they do not bang themselves against furniture. Other students in the class should be asked to leave the room. Colleagues should then call extn 240 for the Duty First Aider.

NB In the case of a seizure it is important to act quickly and follow the guidance on how to deal with a seizure at the end of this section.



RESPONDING TO AN ALLERGIC REACTION/ANAPHYLAXIS

The school will respond promptly and effectively to any allergic reaction, with particular urgency where **anaphylaxis is suspected**, as this is a medical emergency.

If a pupil experiences an allergic reaction, staff must take the following actions:

- **If anaphylaxis is suspected, administer adrenaline immediately.**
Adrenaline should not be delayed while awaiting further symptoms or confirmation.
- **Treat the pupil where they are**, unless they are in immediate danger.
The pupil should be:
 - laid flat with their legs raised to improve blood flow; and
 - medication should be brought to them.
Do not make the pupil stand or walk.
- **Use the pupil's own prescribed adrenaline auto injector if it is immediately available.**
- **The pupil may self-administer their adrenaline auto injector**, if they are able to do so. Alternatively, a member of staff may administer the device.
While trained staff should administer adrenaline wherever possible, in an emergency, any person is permitted to administer adrenaline to save life.
- **If the pupil's own adrenaline auto injector is unavailable, misfires or cannot be used, a spare adrenaline auto injector must be used**, in accordance with school procedures.
- **If anaphylaxis is suspected in a pupil who does not have a known allergy or prescribed adrenaline:**
 - lay the pupil flat with their legs raised;
 - call **999 immediately** and state that anaphylaxis is suspected;
 - inform the emergency call handler that the school holds **spare adrenaline auto injectors**; and
 - follow the instructions given by the call handler.
In exceptional circumstances, a **spare adrenaline auto injector may be administered to any person for the purpose of saving life**, in line with MHRA advice.
- **If there is no improvement after 5 minutes**, administer a **second adrenaline auto injector**, if available, and **call the emergency services again**, informing them that a second dose has been given.
- **Do not move the pupil** once adrenaline has been administered, even if symptoms appear to improve, **until assessed by a medical professional or paramedic.**
- **Any pupil who has received adrenaline for suspected anaphylaxis must be transferred to hospital**, even if they appear to have fully recovered.
A member of school staff will accompany the pupil in the ambulance and remain with them until a parent or carer arrives



WHAT TO DO IF A STUDENT IS HAVING AN ASTHMA ATTACK

Stay calm, sit the student upright, and help them use their reliever inhaler. Administer one puff via a spacer every 30 to 60 seconds, up to a maximum of 10 puffs. Call 999 immediately if symptoms get worse, they cannot speak, or they do not improve after 10 puffs.

1. immediate First Aid Actions

- Keep them upright: Sit the student down comfortably on a chair. Do not let them lie down.
- Loosen constraints: Help them loosen school ties, uniform collars, or heavy school bags.
- Reduce social panic: Clear away crowds of peers to reduce the student's embarrassment and anxiety, which worsens breathing.
- Stay with them: Never leave the student alone or send them to the medical room unescorted.

2. . Administering Medication

- Locate their inhaler: Ask them for their own reliever inhaler. (Secondary students are usually responsible for carrying their own).
- Apply the 10-Puff Rule: Give 1 puff every 30 to 60 seconds, up to a maximum of 10 puffs.
- Use a spacer: If available, as it ensures the medicine reaches the lungs rather than hitting the back of the throat.
- Emergency spare kit: If their personal inhaler is missing, empty, or expired, fetch the school's emergency asthma kit.

3. Escalating to a 999 Call Dial 999 for an ambulance immediately if:

- They are too breathless to speak a full sentence.
- Their symptoms worsen rapidly, or they show no improvement after 10 puffs.
- They look pale, sweaty, or have blue/grey tinting around their lips or fingernails.
- They appear confused, exhausted, or are slipping out of consciousness. Note: If the ambulance takes longer than 10 minutes to arrive, repeat the 10-puff cycle

4. School Considerations

- Log the incident: Document exactly how many puffs were given and at what times.
- Contact parents: Notify the parents immediately so they can arrange a same-day NHS GP review.
- Exams and physical activity: If the attack occurs during PE or an exam, ensure the student does not return to the activity, even if they feel better.



WHAT TO DO IF A STUDENT IS HAVING A SEIZURE

If a student is having a seizure, clear the area of furniture and peers, protect their head with something soft, and time the seizure immediately. Do not restrain them or place anything in their mouth.

Follow these standard first aid protocols:

1. Immediate Safety Actions (Tonic-Clonic Seizures)

- **Time the seizure:** Note the exact time the shaking starts. This is the most critical piece of information for medical staff.
- **Protect their head:** Place a rolled-up school jumper, jacket, or soft bag under their head to prevent injury from the floor.
- **Clear the room:** Move hard desks, chairs, or sharp objects out of the way. Send peers out of the room to preserve the student's dignity and reduce post-seizure embarrassment.
- **Do NOT restrain them:** Let the seizure take its course. Holding them down can cause muscle or joint injuries.
- **Do NOT put anything in their mouth:** It is a myth that people can swallow their tongue. Objects can cause choking or dental damage.

2. Once the Shaking Stops (The Recovery Phase)

- **Roll into the recovery position:** Once the shaking ceases, gently roll the student onto their side to keep their airway clear and allow saliva to drain.
- **Check breathing:** Ensure their airway is open. Their breathing may be shallow or noisy immediately after a seizure.
- **Stay with them:** Wipe away any saliva. Speak softly and reassure them as they regain consciousness, as they will likely be highly confused, exhausted, or disoriented.

3. When to Call 999 Immediately

Dial 999 for an ambulance straight away if:

- The shaking lasts for more than 5 minutes.
- The student has a second seizure immediately after the first without regaining consciousness.
- It is the student's first ever seizure (check the school medical register).
- They have injured themselves badly during the fit, or stopped breathing.

4. Secondary School Context & Care Plans

- **Check the Medical Register:** Have a colleague check the student's Individual Healthcare Plan (IHP).
- **Administer Rescue Medication:** If the student has diagnosed epilepsy, their IHP may authorise specific staff to administer emergency rescue medication.
- **Absence Seizures:** Be aware that not all seizures involve shaking. If a teenager suddenly stares blankly, stops talking, or becomes unresponsive for a few seconds/minutes, they may be having an absence seizure. Guide them away from danger, stay with them, and log it.
- **Contact Parents:** Inform the parents or emergency contacts immediately after securing the student's safety.