St John and St Nicolas Schools Federation | For the good of all through curiosity, creativity and love

Policy Title:	**First Aid & Medicines Procedure for St Nicolas School**
Policy Reference:	**SJN069**
Description:	Procedures for administering of first aid and medicines
Status:	Approved by Governing Board
Category:	Statutory
Review frequency:	Annually
Contact:	governors@stjohnandstnicolasschools.org.uk
Version:	**V1.3**
Other relevant policies:	
Date for Review:	July 2026

Change Record				
Version Number	**Date Approved**	**Governing Board Minute Reference**	**Description of Amendments**	**Review Date**
1.0		*FGB Minutes 11.07.22*	*New federation policy specific to St John's.*	*July 2023*
1.1		*FGB Minutes 17.07.23*	*First paragraph re vision added. Asthma procedures plus asthma and allergy action plans added.*	*July 2024*
1.2	*15.7.24*	*FGB Minutes 15.7.24*	*Update version number/dates, number items*	*July 2025*
1.3	*14.7.25*	*FGB Minutes 14.7.25*	*Update version number/dates, number items*	*July 2025*

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St John and St Nicolas Schools Federation

First Aid and Medicines Procedures for St Nicolas School

At St John and St Nicolas Schools Federation, our vision is 'For the good of all – through curiosity, creativity and love.' This vision inspires everything that the federation does.
It applies equally to all the federation's policies with the intention that our policies impact as fairly and positively as possible to meet the needs of all members of our schools' community.

1: First Aid procedures

- First aid training takes place regularly to ensure adequate cover
- The first aid box is located and clearly marked in an easily accessible location in school. There are also portable first aid kits, which must be taken for any offsite activity
- All injuries must be dealt with according to recommended procedures and the details must be entered on an accident form which is kept with the first aid kit
- For more serious injuries, such as unconsciousness, fractures or injuries which necessitate visits to hospital, a CREST form should be filled in and sent to West Berkshire Council
- A CREST form should be completed for all injuries which require the child to be sent home

2: Medicines procedures

- All medicines must be kept in the school office. The only exception to this is epi-pens, which need to be easily accessible and will be kept in a cupboard in the dining area; and inhalers which are kept in the classroom
- Parents must notify the school if a child suffers from a medical condition for which medication should be given, e.g. asthma
- If a child has been prescribed medication, parents will need to complete a medication request form (Appendix 1) and it will only be administered to the child for whom it is prescribed. St Nic's will also administer non-prescription medication e.g. paracetamol/ ibuprofen for pain relief such as period pain etc.
- Parents are responsible for renewing medicines kept in school (if they become out of date)
- Medication, such as asthma inhalers and epi-pens, must be taken on all offsite visits

3: Allergy needs

We endeavour to work with parents to support allergy and intolerance needs, and make everyone aware of allergies.

Curriculum resourcing will try to take allergy needs of children and staff into account as much as possible, and staff are always available to discuss this.

Where activities are organised by other groups (such as Friends of the Federation) then this may not necessarily take allergies into account, and parents and staff need to be aware of this.

See Appendix 3 for the allergy action plan.

4: Asthma Procedure

St John and St Nicolas Schools Federation recognises that asthma is a widespread, serious but controllable condition affecting many children at the school. The federation positively welcomes all children with asthma.

The schools encourage children with asthma to achieve their potential in all aspects of school life by having a clear policy that is understood by school staff, their employers and pupils. Supply teachers and new staff are also made aware of the policy. All staff who come into contact with pupils with asthma are provided with training on asthma from the school nurse. Training is updated regularly.

Asthma Medicines

- Immediate access to reliever medicines is essential. Asthma inhalers are kept within each child's classroom. When they go off the school site, the school will ensure inhalers are carried so that they are easily accessible when needed
- Parents/carers are asked to ensure that the school is provided with a labelled spare reliever inhaler. The class teacher will hold this separately in case the child's own inhaler runs out, or is lost or forgotten. Parents/carers must ensure all inhalers are prescription labelled with the child's name
- School staff are not required to administer asthma medicines to children (except in an emergency), however many of the staff in our federation are happy to do this. Federation

staff who agree to administer medicines are insured by the local authority when acting in agreement with this policy
- School staff will supervise children to take their own medicines when necessary

Record Keeping
- At the beginning of each school year or when a child joins the school, parents/carers are asked if their child has any medical conditions including asthma on their admissions form
- All parents/carers of children with asthma are consequently sent an asthma action plan (Appendix 3) to give to their child's doctor or asthma nurse to complete. Parents/carers are asked to return them to the school. From this information, the school keeps its asthma register, which is available to all school staff
- Parents/carers are also asked to update or exchange the asthma action plan for a new one if their child's medicines, or how much they take, changes during the year

Exercise and activity: physical education and games
- Taking part in sports, games and activities is an essential part of school life for all children. All teachers know which children in their class have asthma
- Children with asthma are encouraged to participate fully in all physical education lessons. If a child needs to use their inhaler during a lesson they will be encouraged to do so
- There has been a large emphasis in recent years on increasing the number of children and young people involved in exercise and sport in and outside of school. The health benefits of exercise are well documented and this is also true for children with asthma. Asthma should not be a barrier to participation in after school sports activities

Asthma Attacks
All staff who come into contact with children with asthma know what to do in the event of an asthma attack.

In the event of an asthma attack the school follows the procedure outlined in the asthma action plan (Appendix 2).

After a minor asthma attack
- Minor attacks should not interrupt the involvement of a pupil with asthma in school. When the pupil feels better, they can return to school activities
- The parents/carers must always be told if their child has had an asthma attack

Appendix 1: Medication Request Form for St Nicolas C.E. School

This is a voluntary service given by staff on behalf of parents. We request that children report to the office to receive medication at the time indicated on this form.

I request that …… (full name of child)

be given the following medication:

…… (name of medication)

…… (dosage) …… (time to be administered)

The above medication, has been prescribed by the family doctor. It is clearly labeled indicating contents, dosage and child's name.

We accept that this is a service that the school is not obliged to undertake.

Signed …… (Parent/Guardian)

Address ……

Date ……

Medication will not be accepted in the school unless this letter is completed and signed by the parent or legal guardian of the child, and the administration is agreed by the headteacher.

TO BE COMPLETED BY THE OFFICE

Medication	Dosage Administered	Date	Time	Office Signature

Appendix 2 – Asthma action plan

Healthcare from the heart of your community

Berkshire Healthcare NHS Foundation Trust

ASTHMA ACTION PLAN

CHILD'S NAME ..... **SCHOOL**.....

TYPE OF INHALER.....

NHS NUMBER..... **DATE OF BIRTH** _ _/_ _/_ _

PHOTO

CHILD'S TRIGGERS

.....

.....

.....

PARENTAL CONSENTS *(tick boxes)*

☐ *I consent to the administration of the prescribed inhaler by members of staff and will notify school if there are any changes to my child's medication and personal details. I will provide my child's inhaler and spacer in school and will ensure that they are in date.*

☐ *I consent to school staff administering the emergency school inhaler should my child's personal inhaler be unavailable*

☐ *I consent for this plan to be on display in school and I will notify the school of any changes for review*

Signature of Parent/Carer:

.....

Date: .....

EMERGENCY CONTACTS

1.Name.....

Number.....

2.Name.....

Number.....

MANAGING AN ASTHMA ATTACK. IN THE EVENT OF ANY SYMPTOMS:

- **WHEEZE**
- **COUGH**
- **TIGHT or SORE CHEST**
- **SHORTNESS OF BREATH**

- Administer reliever inhaler (usually blue) via Spacer
- Give **1 puff of reliever every 30-60 seconds** (max 10 puffs)
- If reliever is needed more than 4-hourly, medical advice/attention should be sought and parents contacted.

REMEMBER TO SHAKE INHALER BEFORE USE

IF NO IMPROVEMENT

SIGNS OF AN ACUTE ASTHMA ATTACK

If the child's reliever inhaler (usually blue) + spacer are not helping and/or the child presents with ANY of the following:

- They can't talk or walk easily
- They are breathing hard and fast
- Their lips turn blue
- They are coughing or wheezing incessantly

During this time the child should:

- Sit up – DO NOT LIE DOWN
- Be encouraged to stay calm
- Be accompanied by a member of staff
- Give 1 puff of reliever every 30-60 seconds (maximum 10 puffs)

IF NO IMPROVEMENT AFTER 10 PUFFS OR ANY CONCERNS

CALL 999 IMMEDIATELY

- **CONTINUE TO ADMINISTER THE INHALER IN CYCLES OF 10 PUFFS AS ADVISED ABOVE EVERY 15 MINUTES UNTIL THE AMBULANCE ARRIVES**
- Contact parent/carer and accompany child in the ambulance until parent/carer arrives

School Nursing Team – January 2022

Appendix 3 – Allergy action plan

Healthcare from the heart of your community

Berkshire Healthcare NHS Foundation Trust

Allergy Action Plan

CHILD'S NAME _____

EARLY YEARS SETTING / SCHOOL _____

HAS THE FOLLOWING ALLERGIES: _____

Child's date of birth

_____

NHS Number (If known)

_ _ _ /_ _ _ / _ _ _ _

Photo

Emergency contact number

_____

Alternative emergency number if parent / guardian unavailable

_____

CONSENT

☐ *I consent to the administration of prescribed emergency treatment by members of staff in schools and Early Years settings (EYS).*

☐ *I will notify school / EYS staff and the school nursing service if there are any changes to my child's medication and personal details as above.*

☐ *I will ensure that the above medication is kept in date and replaced if used.*

☐ *I consent for my child's action plan and photo to be displayed within EYS / school*

☐ *I consent to the use of the school's generic adrenaline auto injector if available (for those that already have an autoinjector prescribed)*

Your name (Print)

_____

Your signature

_____

Please circle Parent /Guardian

Date _____

EMERGENCY TREATMENT

Name of adrenaline auto injector _____

How many adrenaline auto injector been prescribed for use in school?_____

Name of antihistamine (medicine for allergies)._____
Refer to label for dosage instructions

Name of inhaler (if prescribed) _____

Mild-moderate allergic reaction:

- Swollen lips, face or eyes
- Itchy/tingling mouth
- Hives or itchy skin
- Abdominal pain or vomiting
- Sudden change in behaviour

Action:

- Stay with the child, call for help if necessary
- Give antihistamine according to the child's allergy treatment plan.
- Locate adrenaline auto-injector (s)
- If wheezy, give Salbutamol (blue inhaler) if prescribed; up to a maximum of 10 puffs may be given per reaction.

Watch for signs of ANAPHYLAXIS

(Life-threatening allergic reaction):

Airway:	Persistent cough, hoarse voice, difficulty in swallowing, swollen tongue.
Breathing:	Difficult or noisy breathing, wheeze or persistent cough.
Consciousness:	Persistent dizziness / becoming pale or floppy, suddenly sleepy, collapse, unconscious

If ANY ONE of these signs is present:



1. **Lie child flat.** If breathing is difficult allow to sit.
2. **Use adrenaline auto injector without delay**
3. **Dial 999 to request an ambulance*** and say ANAPHYLAXIS (ANA-FIL-AX-IS)

*****If in doubt give adrenaline auto injector*****

After giving adrenaline auto injector

1 Stay with child until ambulance arrives; do **NOT** stand child up
2. Commence CPR if there are no signs of life
3. Phone parent/emergency contact
4. If no improvement **after 5 minutes, give a further dose of** adrenaline auto injector (if available) in the alternate leg

*you can dial 999 from any phone, even if there is no credit left on a mobile. Medical observation in hospital is recommended after anaphylaxis.

Anaphylaxis may occur without initial mild signs: **ALWAYS** use adrenaline autoinjector **FIRST** in someone with known food allergy who has **SUDDEN BREATHING DIFFICULTY** (persistent cough, hoarse voice, wheeze)

Allergy action plan will be reviewed on notification of any changes

School Nursing Subgroup V7 August 2023