Honeywell Schools
INFANT AND JUNIOR

Supporting Children with Medical Needs Policy 2025-26

Infant and Junior Schools

Policy reviewed by Curriculum Committee December 2025

Supporting Children with Medical Needs Policy

Honeywell Schools
INFANT AND JUNIOR

All our policies are written to reflect, support and develop our ethos statement

"A community that cares about excellence, wonder and learning for life"

We provide a safe and exciting space where:

There is community

- There is a strong, friendly and respectful spirit within the immediate and extended communities, supporting learning and progress of and for all pupils
- There is a sense of belonging

There is care

- Everyone focusses on valuing and developing the whole child, nurturing a happy and kind atmosphere where asking for help and listening is what we expect of each other
- We understand our actions and nurture respect for each other and the environment

There is excellence

- There is a strong sense of ambition and high academic achievement along with excellent personal progress built around quality first teaching and research informed learning
- There is enrichment and high expectations beyond the curriculum

There is wonder

- Every experience is more memorable than the last
- Learning powers are nurtured and grow and grow
- The implementation of the curriculum is rich, vibrant and creative

There is learning for life

- There is an unstinting dedication to diversity and equality
- There is motivation for the preservation of our environment and a thirst to become a conscientious contributor to making the world a better place
- Pupils leave us with a thirst for knowledge and love of learning, autonomous and self-motivated, ready for their next stage and beyond

Legislation and Guidance

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.

Honeywell Schools are inclusive communities, which aim to support and welcome all pupils with medical conditions.

- The schools understand they have a responsibility to be as welcoming and supportive as possible to pupils with medical conditions who currently attend and to those who may enrol in the future.
- We aim to provide all children with all medical conditions the same opportunities as others at school. We will help to ensure they can be healthy, stay safe, enjoy and achieve and make a positive contribution. We aim to include all pupils with medical conditions in all school activities.
- Pupils with medical conditions are encouraged to take control of their condition. Our aim is for pupils to feel confident in the support they receive from the school to help them do this.

- Parents and Carers of pupils with medical conditions feel secure in the care their children receive at this school.
- All adults will be aware of issues of privacy and dignity for children with particular needs.
- We ensure that all staff understand their duty of care to children and young people in the event of an emergency and feel confident in knowing what to do in an emergency.
- We understand that certain medical conditions are serious and can be potentially life-threatening, particularly if ill managed or misunderstood.
- Most children with medical needs are able to attend school regularly and can take part in normal activities, sometimes with some support. However, staff may need to take extra care in supervising some activities to make sure that these children, and others, are not put at risk.

This policy will be implemented in conjunction with the following school policies and procedures:
Educational Visits Policy / School Journey Policy
First Aid Policy
Equality, Diversity and Inclusion Policy

Overall Responsibility

The people with overall responsibility for pupils with medical needs are:
Infant School – Kathryn Jessett (School Inclusion Manager)
Junior School – Katie Hill (School Inclusion Manager)
Supported by the Headteachers

Person responsible for storage of medication:
Jennie Appleby

Roles and Responsibilities

This school works in partnership with all interested and relevant parties including the school's governing body, all school staff, parents and carers, employers, community healthcare professionals and pupils to ensure the policy is planned, implemented and maintained successfully.

Honeywell School Governors will ensure that arrangements are in place to support pupils with medical conditions and that they are enabled to access the fullest possible participation in all aspects of school life. Governors will ensure all staff have received the appropriate level of training and are competent to support pupils. Governors will receive annual updates as to the effective working of the policy, will review this carefully and ensure implementation of any changes or recommendations arising from the review.

The **Headteacher and the Lead for children with medical conditions** have lead responsibility for the implementation and review of the policy and will ensure that

- the school is inclusive and welcoming
- the policy is in line with national guidance and expectations, is put into action and maintained
- liaise with other interested and relevant parties (including parents and pupils, school health, community and acute health services, the local authority services etc.)
- ensure information held by the school is accurate and up to date and good communication and information sharing systems are in place
- ensure pupil confidentiality is respected
- assess the training and development needs of staff and arrange for them to be met
- ensure all staff are aware of the policy, including supply teachers and new staff
- delegate tasks appropriately to named members of staff

- monitor and review the policy at least once a year, with input from pupils, parents, staff and external stakeholders and update it as and when necessary
- report back to governors and to all key stakeholders about the implementation of this policy

All staff at the school have a responsibility to

- be aware of and understand the policy
- be aware of the potential triggers, signs and symptoms of common medical conditions and know what to do in an emergency
- know which pupils in their care have a medical condition and be familiar with the content of the pupil's Healthcare Plan
- allow all pupils to have immediate access to their emergency medication when necessary
- maintain effective communication with parents including informing them if their child has been unwell at school
- ensure pupils who carry their medication with them have it when they go on a school visit or out of the classroom
- be aware of pupils with medical conditions who may be experiencing bullying or need extra social support
- ensure all pupils with medical conditions are not excluded unnecessarily from activities they wish to take part in, and understand the impact a medical condition may have on a pupil and make any reasonable adjustments to accommodate this (e.g. that pupils have the appropriate medication or food with them during any exercise and are allowed to take it when needed, and are not forced to take part in an activity if they are unwell)
- be aware that medical conditions can affect a pupil's learning and provide extra help when pupils need it, including help to catch up with work when the pupil has been unwell
- use opportunities such as PSHE and other areas of the curriculum to raise pupil awareness about medical conditions

Specific responsibilities of key staff

- the **Inclusion Lead** for the school will keep an overview of any pupils whose medical needs impact on their learning, will advise staff working directly with them and ensure appropriate strategies are put in place to support them
- **staff with first aid training** will give immediate help to casualties with common injuries or illnesses and those arising from specific hazards with the school and when necessary, ensure that an ambulance or other professional medical help is called.
- **designated lead for medication** will ensure all medication is correctly stored and labelled, regularly reviewed, in date and that parents and carers provide new medication as needed.

School nurse / school health team will be involved in the healthcare planning for pupils with medical needs as appropriate. This may include

- informing the school of pupils in need of a health care plan
- initiating healthcare plans when relevant
- contributing to healthcare plans and their review
- ensuring parental consent is obtained and recorded
- help in providing regular training for school staff in managing the most common medical conditions at school
- advising on training on less common conditions, including providing information about where the school can access other specialist training
- collating relevant health information to support pupil, family and school to inform the healthcare plan
- supporting pupils and parents as appropriate

Individual doctors and specialist healthcare professionals caring for pupils who attend this school have a responsibility to:

- complete the pupil's Healthcare Plans provided by parents
- where possible, and without compromising the best interests of the child, try to prescribe medication that can be taken outside of school hours
- offer every child or young person (and their parents and carers) a written care/self-management plan to ensure children and young people know how to self-manage their condition
- ensure the child or young person knows how to take their medication effectively
- ensure children and young people have regular reviews of their condition and their medication
- provide the school with information and advice regarding individual children and young people with medical conditions (with the consent of the pupil and their parents / carers)
- understand and provide input into this policy

Acute health care service personnel have a responsibility to:

- have an agreed system for receiving information held by the school about children and young people's medical conditions, to ensure best possible care
- understand and provide input into this policy

The pupils at this school have a responsibility to**:**

- treat other pupils with and without a medical condition equally
- tell their parents, teacher or nearest staff member when they are not feeling well
- let a member of staff know if another pupil is feeling unwell
- let any pupil take their medication when they need it, and ensure a member of staff is called
- treat all medication with respect
- know how to gain access to their medication in an emergency
- if mature and old enough, know how to take their own medication and to take it when they need it
- ensure a member of staff is called in an emergency situation.

The parents / carers of a child at this school have a responsibility to:

- tell the school if their child has a medical condition
- ensure the school has a complete and up-to-date Healthcare Plan / Medical Conditions Form for their child
- inform the school about the medication their child requires during school hours
- inform the school of any medication their child will require while taking part in visits, outings, field trips or other out-of-school activities
- tell the school about any changes to their child's medication, including what they take, when, and how much
- inform the school of any changes to their child's condition
- provide the school with appropriate medication (including spares), labelled with their child's full name, and ensure all medication is within its expiry date
- ensure that date-expired medicines are removed from school and disposed of safely
- provide four passport-sized photographs where required for medical records
- ensure their child's medication and medical devices are correctly labelled
- keep their child at home if they are not well enough to attend school
- ensure their child catches up on any schoolwork they have missed
- ensure their child has regular reviews about their condition with their doctor or specialist healthcare professional
- ensure their child has a written care / self-management plan from their doctor or specialist healthcare professional to support management of their condition

Health Care Plans and EHCPs

When a pupil is starting at our school at the usual transition points, and has an identified medical condition, we will ensure that arrangements are in place in time for the start of the relevant school term. In other cases, such as a new diagnosis or children moving mid-term, we would expect to have arrangements in place within two weeks of notification or admission.

The usual process for supporting a pupil with medical needs will be by establishing an Individual Healthcare plan. Individual Healthcare plans help to ensure that pupils with medical needs are effectively supported. The plan provides clarity about what needs to be done, when and by whom. The plan is helpful in the majority of cases and especially for long-term and complex medical conditions, although not all children will require one. The level of detail within the Individual Healthcare plan will depend on the complexity of the child's condition and the degree of support needed. The school recognizes that different children with the same health condition may require very different support.

Individual Healthcare plans may be initiated by a member of school staff or a healthcare professional involved in providing care to the child. Where the child has SEN the Individual Healthcare plan will be linked to the child's EHC plan.

Individual Healthcare Plans will include the following information:

- The medical condition, its triggers, signs, symptoms and treatments
- The pupil's resulting needs, including medication (its side-effects and its storage) and other treatments, dose, time, facilities, equipment, testing, dietary requirements and environmental issues e.g. crowded corridors, travel time between lessons
- Specific support for the pupil's educational, social and emotional needs, including how absences will be managed, support to catch up with work missed, additional time for exams, counselling etc
- Who will provide this support, their training needs and cover arrangements in their absence
- Who in the school needs to be aware of the child's condition and the support required
- Written permission for medication to be administered by a member of staff, or self-administered by individual pupils during school hours
- Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the child can participate e.g. risk assessments
- Where confidentiality issues are raised by the parent/child, the designated individuals to be entrusted with information about the child's condition
- What to do in an emergency, including who to contact, and contingency arrangements

Responsibility for the wellbeing of the pupil will not be left to one person; a team of people will be identified to ensure that the pupil's health, safety and emotional well-being are supported. Close liaison between the school and the relevant healthcare providers will be developed to ensure that the needs of the pupil are fully catered for, and reasonable adjustments made to ensure inclusion.

Support for Children with Medical Needs

Parents / Carers have the prime responsibility for their child's health and should provide schools and settings with information about their child's medical condition. Parents / Carers, and the child if appropriate, should obtain details from their child's General Practitioner (GP) or paediatrician, if needed. The school doctor or nurse or a health visitor and specialist voluntary bodies may also be able to provide additional background information for staff.

Where required pupils with medical needs will have a personalised risk assessment and safety plan in place reflecting their individual needs. There is no legal duty that requires school or setting staff to administer medicines. Honeywell will ensure that they have sufficient members of support staff who are appropriately trained to manage medicines as part of their duties.

Staff managing the administration of medicines and those who administer medicines should receive appropriate training and support from health professionals. Honeywell Schools will ensure that there are robust systems in place to ensure that medicines are managed safely. There will be an assessment of the risks to the health and safety of staff and others and measures put in place to manage any identified risk.

All staff understand and are trained in what to do in an emergency for the most common serious medical conditions at Honeywell Schools. All staff at Honeywell Schools are aware of the most common serious medical conditions at this school which are **anaphylaxis** and **asthma.** (See Appendix A and B). Additional training will occur for specific medical conditions such as Diabetes 1 and Diabetes 2 if required.

Information relating to children with serious medical conditions can be found in appropriate locations around the school. Specific information about individual children with a serious medical condition or severe food allergy is circulated to staff on a regular basis. Such information is kept in secure areas as such information is sensitive and confidential under GDPR regulations.

If a pupil needs to be taken to hospital, a member of staff will always accompany them and will stay with them until a parent / carer arrives. The schools try to ensure that the staff member will be one the pupil knows. Staff are prohibited from taking ill or injured pupils unaccompanied in a taxi or in their personal vehicles – two staff MUST accompany the child due to safeguarding considerations.

Outside providers running clubs after school are given a register, which gives a brief description of any medical condition that parents note on the clubs' application form. The providers are told that any necessary medication should be in the school office and shown where and how to identify which is the relevant medication. They are also made aware of the on-site first aid options during club times.

Storage and Administration of Medication at School

- All pupils at Honeywell Schools with medical conditions have easy access to their emergency medication.
- Parents / Carers provide two sets of medication: one set is kept by the class teacher in the pupil's classroom in an appropriate box; the other set is kept in an easily accessible place in the school office. Both boxes will be easily identifiable with the child's name, photograph and class clearly displayed.
- The boxes are kept out of reach of all children.
- Pupils know where their medication is stored and how to access it.
- There is an identified member of staff who oversees the correct storage of medication at school. This includes all medication that older pupils carry themselves, such as an asthma inhaler.
- Medication is stored in accordance with instructions, paying particular note to temperature. Some medication for pupils at this school may need to be refrigerated.
- All medication is supplied and stored in its original containers. All medication is labelled with the pupil's name, the name of the medication, expiry date and the prescriber's instructions for administration, including dose and frequency.
- All refrigerated medication is stored in an airtight container and is clearly labelled. Refrigerators used for the storage of medication are in a secure area that is inaccessible to unsupervised pupils.

Administration

- All use of medication defined as a controlled drug takes place under the supervision of a named member of staff at this school, even if the pupil can administer the medication themselves.
- We understand the importance of medication being taken as prescribed.
- Parents / Carers at this school understand that if their child's medication changes or is discontinued, or the dose or administration method changes, that they should notify the school immediately.
- In cases of off-site visits, the staff responsible for organising the visit and attending off-site visits will be aware of any pupils with an underlying or ongoing illness or medical conditions on the visit. They will receive information about the type of condition, what to do in an emergency and any other additional support necessary, including any additional medication or equipment needed. (See Educational Visits & School Journey Policies).

Disposal of Medicines

- Parents / Carers are responsible for ensuring that date-expired medicines are returned to a pharmacy for safe disposal.
- They will also be responsible for the collection medicines at the end of each school year.
- Sharps boxes will always be used for the disposal of needles.
- Parents / Carers are responsible for obtaining sharps boxes on prescription from the child's GP or paediatrician. Collection and disposal of the boxes will be arranged with the school's environmental services.
- All medication will be sent home at the end of each school year. This will enable parents / carers to ensure that the medication has not expired and to obtain new medication.
- The school will inform parents / carers by text and in the newsletter that medications must be removed from the schools.
- Medication will be handed to the parent / carer collecting the child from **Honeywell Infant School** on the last day of term. The medication will be sealed in envelope, clearly marked with the child's name and class.
- Medication will be given to the children at **Honeywell Junior School** to take home on the last day of term. The medication will be sealed in an envelope clearly marked with the child's name and class.

Record Keeping

- The school keeps an accurate record of each occasion an individual pupil is given or supervised taking medication. Details of the supervising staff member, pupil, dose, date and time are recorded. If a pupil refuses to have medication administered, this is also recorded and parents / carers are informed as soon as possible.

- If a pupil requires regular prescribed or non-prescribed medication at school, parents / carers are asked to provide consent on their child's Medical Conditions Form giving the pupil or staff permission to administer medication on a regular/daily basis, if required. A separate form is sent to parents / carers for pupils taking short courses of medication.
- All parents / carers of pupils with a medical condition who may require medication in an emergency are asked to provide consent on the Form for staff to administer medication.

Medical Conditions Form

- The Medical Conditions Form, accompanied by an explanation of why and how it is used, is sent to all parents of pupils with a long-term medical condition identified through the enrolment form. This is sent at enrolment, at the start of each school year or when a diagnosis is first communicated to the school.
- Parents / Carers of new pupils starting at other times during the year are also asked to provide this information on enrolment forms.
- The Medical Conditions Form records important details about individual children's medical needs at school, their triggers, signs, symptoms, medication and other treatments. Further documentation can be attached to the Form if required.
- If a pupil has a short-term medical condition that requires medication during school hours, a medication form can be downloaded from the school website pupil's parents / carers to complete.

School Medical Conditions Register

- Medical Conditions Forms are used to create a centralised register of pupils with medical needs. An identified member of staff has responsibility for the register at this school. The responsible member of staff follows up with the parents any further details required on a pupil's Form or if permission for administration of medication is unclear or incomplete.
- Forms are kept in a secure central location at school. Apart from the central copy, relevant class teachers also hold copies of pupils' Forms, and a set of emergency medication, so that they, and any other member of staff working in the classroom, are aware of medication and emergency procedures.
- When a member of staff is new to a pupil group, for example due to staff absence, the school makes sure that they are made aware of (and have access to) the Form and emergency medication of pupils in their care. This school ensures that all staff protects pupil confidentiality and seeks permission from the pupil and parents / carers before sharing any medical information with any other party.

Ongoing communication and review of Forms

- Parents / Carers at the schools are regularly reminded to update their child's form if their child has a medical emergency, if there have been changes to their symptoms, or their medication and treatments change.
- Staff at the schools use opportunities such as teacher–parent interviews to check that information held by the school on a pupil's condition is accurate and up to date.

Training for administering medication

- Training for administering medicine, such as an EpiPen is overseen by the Heads and occurs on a regular basis.
- The school keeps an up-to-date list of members of staff who have agreed to administer medication and have received the relevant training.

Educational Visits

Out of school visits

- Honeywell schools will encourage children with medical needs to participate in safely managed visits.
- The schools will make reasonable adjustments to enable children with medical needs to participate fully and safely on visits.
- Prior to any out-of-school visit, the schools carry out risk assessments and medical conditions are considered during this process. Factors considered include:
    - how all pupils will be able to access the activities proposed
    - how routine and emergency medication will be stored and administered
    - where help can be obtained in an emergency.

- An additional supervisor, a parent or another volunteer will accompany a particular child if required.
- Arrangements for taking any necessary medicines will also need to be taken into consideration. Staff supervising excursions should always be aware of any medical needs, and relevant emergency procedures. A copy of any health care plans should be taken on visits in the event of the information being needed in an emergency.
- If staff are concerned about whether they can provide for a child's safety or the safety of other children on a visit, they should seek parental views and medical advice from the school health service or the child's GP.

Residential visits

- Parents / Carers are sent a residential visit form to be completed and returned to school shortly before their child leaves for an overnight or extended day visit. This form requests up-to-date information about the pupil's current condition and their overall health. This provides essential and up-to-date information to relevant staff and school supervisors to help the pupil manage their condition while they are away. This includes information about medication not normally taken during school hours. (See Educational Visits policy).
- The relevant staff member takes all residential visit forms on visits and for all out-of-school hours activities where medication is required. A copy of the pupil's Medical Conditions Form accompanies these.
- All parents / carers of pupils with a medical condition attending a school trip or overnight visit are asked for consent, giving staff permission to administer medication at night or in the morning if required. The residential visit form also details what medication and what dosage the pupil is currently taking at different times of the day. It helps to provide up-to-date information to relevant staff and supervisors to help the pupil manage their condition while they are away.

Physical Environment and Social Activities

- Honeywell Schools are committed to providing a physical environment that is accessible to pupils with medical conditions. (See Disability & Equalities policy).
- The school ensures the needs of pupils with medical conditions are adequately considered to ensure their involvement in structured and unstructured social activities, including during breaks and before and after school. This also applies to extended school activities such as school discos, breakfast club, school productions, after school clubs and residential visits.
- All staff are aware of the potential social problems that pupils with medical conditions may experience. Staff use this knowledge to try to prevent and deal with problems in accordance with the school's anti-bullying and behaviour policies.
- Staff use opportunities such as personal, social and health education (PSHE) lessons to raise awareness of medical conditions amongst pupils and to help create a positive social environment.

Sporting Activities

- This school understands the importance of all pupils taking part in sports, games and activities. For many, physical activity can benefit their overall social, mental and physical health and well-being.
- Most children with medical conditions can participate in physical activities and extra-curricular sport. This school ensures all classroom teachers; PE teachers and sports coaches make appropriate adjustments to sports, games and other activities to make physical activity accessible to all pupils.
- Some children may need to take precautionary measures before or during exercise and may also need to be allowed immediate access to their medicines such as asthma inhalers. We ensure that all pupils have the appropriate medication or food with them during physical activity and that pupils take them when needed.

Self-Management

- It is good practice to support and encourage children, who are able, to take responsibility to manage their own medicines from a relatively early age and schools should encourage this. The age at which children are ready to take care of, and be responsible for, their own medicines, varies. As children grow and develop, they should be encouraged to participate in decisions about their medicines and to take responsibility.
- Older children with a long-term illness should, whenever possible, assume complete responsibility under the supervision of their parent / carer. Children develop at different rates and so the ability to take responsibility for their own medicines varies. This should be borne in mind when making a decision about transferring responsibility to a child or young person. There is no set age when this transition should be made. There may be circumstances where it is not appropriate for a child of any age to self-manage. Health professionals need to assess, with parents / carers and children, the appropriate time to make this transition.
- If children can take their medicines themselves, staff may only need to supervise. The appropriate parental consent form will be signed by the parents.

Where children have been prescribed controlled drugs, staff need to be aware that these should be kept in safe custody. However, children could access them for self-medication if it is agreed that it is appropriate.

Refusing Medicines

- If a child refuses to take medicine, staff should not force them to do so, but should note this in the records.
- Parents should be informed of the refusal on the same day.
- If a refusal to take medicines results in an emergency, the school or setting's emergency procedures should be followed.

Unacceptable Practices

The DfE guidance 2014 lists the following unacceptable practices. This policy is designed to ensure that these issues are avoided and that there is an ongoing dialogue between school, pupils and parents so that all pupils and parents feel confident in the processes in place in the school.

"Unacceptable practice:

- to prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary
- to assume that every child with the same condition requires the same treatment
- to ignore the views of the child or their parents / carers; or ignore medical evidence or opinion, (although this may be challenged)
- to send children with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plans
- if the child becomes ill, to send them to the school office or medical room unaccompanied or with someone unsuitable
- to penalise children for their attendance record if their absences are related to their medical condition e.g. hospital appointments
- to prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively
- to require parents / carers, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their child, including with toileting issues. No parent should have to give up working because the school is failing to support their child's medical needs
- to prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips, e.g. by requiring parents / carers to accompany the child.

Policy Review

This policy will be reviewed and adopted on an annual basis by the Pupil Welfare and Community Committee with a detailed review every two years, or earlier if necessary. All members of staff are required to familiarise themselves with this policy as part of their induction programme.

Record Keeping

All information collected in relation to this policy will be stored in accordance with our Privacy Policy and will not be shared with third parties.

Appendix A - Asthma

Asthma is a common condition affecting approximately over a million children in the UK and thousands of children in Wandsworth. We encourage and help children with asthma to participate fully in all aspects of school life and we will do all we can to make sure that the school environment is favourable to children with asthma. We educate other children to understand asthma so that they can support their friends and so those children with asthma can avoid the stigma sometimes attached to this chronic condition. Through training we ensure that all staff have a clear understanding of what to do in the event of a child having an asthma attack.

Aims

- We recognise that asthma is a potentially serious condition affecting many school children
- We welcome all pupils with asthma
- We recognise that immediate access to inhalers is vital
- We recognise that certain school pets can trigger a child's asthma and may need to be removed from the classroom if they are causing a reaction in children
- We are a non-smoking environment

Implementation

In order to ensure the successful implementation of this policy we will work in partnership with parents / carers, school governors, health professionals, school staff and children. We will:

- make a copy of this policy available to all staff, supply staff, governors, and parents of children with asthma
- ensure that all staff (teaching and non-teaching) are able to attend a training session arranged in co-operation with the School Health Service
- ensure that guidelines on the management of an acute asthmatic attack are prominently displayed in the staff room and available to all staff
- have a member of staff in each school who will oversee the implementation of this policy.

Practice

We realise that children with asthma may require medication during the school day and to enable this to take place safely. We:

- maintain a written record of each child's medication
- ask parents / carers to ensure that younger children have two reliever inhalers - one for the school office and one for their classroom - clearly marked with the child's name and class and to check periodically that these have not passed their sell-by date (the school will not administer out-of-date medications)
- ask parents / carers to inform the school office if they decide that their child is now old enough to be responsible for an inhaler, in which case we only require one inhaler for the school office or the classroom
- keep younger children's inhalers readily available throughout the day, including break times, stored in a labelled plastic box in their classroom
- make sure that inhaler pouches are **always** taken on trips outside school (e.g. library, swimming, other outings)
- liaise with the school nurse if concerns arise about a child's asthma management and/or medication
- ensure that everyone involved in physical education is aware of the needs of children with asthma.

Further help

Further help and advice is available from:

- School nurse
- National Asthma Campaign Helpline: 0300 222 5800 (Monday – Friday 9am-5pm)

Appendix B – Severe Allergies / Anaphylaxis

Severe allergy (anaphylactic shock) is increasingly evident in the general population and several children at Honeywell are known to be at risk. At its most extreme and without quick treatment such a reaction can be fatal, therefore it is crucial that the school is fully informed and prepared for anaphylaxis. The most common allergens are nuts (especially peanuts) eggs and wasp and bee stings. The treatment is the same for all, i.e. adrenalin injection (epipen).

Aims

The child / parents / carers / guardians

1. To identify all children with a known severe allergy.
2. To have an individual agreed plan for each child.
3. To ensure that adrenalin is available for each child with a known allergy.
4. For children and parents to be confident that anaphylaxis will be handled sensitively and competently in school.
5. That parents / carers are aware of their responsibilities to keep the school informed of any change in medication and to keep medicines in school up to date and in good supply.

The school

1. To raise awareness of anaphylaxis in the school community.
2. To develop confidence in dealing with anaphylaxis amongst teachers and support staff and for staff to be trained.
3. To understand and communicate the policy within the school and to parents.

Implementation/Training

1. To offer further training to as many staff members as possible and to have two named members of staff in each school who are responsible for implementing this policy.
2. To advise staff on the types of foods that may contain nuts or nut products and, where appropriate, other allergens, such as eggs, in order to be sensitive to children with severe allergies when birthday treats are brought into school, class parties are held, cooking is undertaken etc.
3. To ensure that all staff, including supply staff, are aware of children with known allergies and understand the emergency procedure and location of medication. A named individual will be responsible for giving supply staff details of each child when applicable. With parental consent, a photo of each child will be displayed prominently in the classroom with their medication.

Insurance

All staff members are covered by insurance to administer adrenalin in an emergency. If adrenalin is used the emergency services must be called on 999.

Storage

Safe and secure but accessible places will be provided to store each child's emergency medication in their classroom and in the school office in boxes labelled and with each child's photograph.

Accessibility of medication in and out of school

1. To ensure that emergency medication is taken by teaching staff on school trips, including trips to the common, library etc. and that an adrenalin prescription is held in the school first aid boxes.

2. To ensure that medication is easily accessible to staff when supervising in the school garden and to be particularly aware of the potential danger of wasp and bee stings.

Communications

1. To include a section on the emergency contact forms whereby, if relevant, parents can state their child's existing medical conditions and any prescribed medication.

2. To invite appropriate speakers to school assemblies etc. to inform pupils and staff about anaphylaxis.

3. To share the basis of this policy with parents / carers by publishing it in the school website, school newsletter, and school prospectus.

4. To draw up individual plans for managing each child's anaphylaxis in cooperation with the child (where appropriate) and the parents.

5. To develop a standard form setting out emergency procedures which will be kept in the child's file, another copy will be kept with the medication.

6. To have a copy of this policy, a list of symptoms of anaphylaxis and the names of known sufferers in the staffroom and office. These will also be displayed in the dining hall and classrooms.

Nut free zone

1. To aim to ensure that parents / carers and staff (including administrative, premises and catering staff) know that Honeywell is a NUT FREE ZONE and that opening a packet of nuts next to a sensitive child can be sufficient to trigger a full-blown reaction.

2. To liaise with catering staff to ensure that school meals are nut free and that if oil containing peanut proteins has to be used it is clearly labelled.

3. To request that packed lunches are not shared and to remind parents / carers at regular intervals that packed lunches should also be nut free.

4. To aim, via lunchtime supervision, to discourage children from trading food.

Evaluation

1. To communicate with parents / carers and children with severe allergies to address any problems and review individual plans.

2. To raise anaphylaxis at staff meetings annually so that staff remain confident in implementing this policy.

3. This policy will be reviewed and updated regularly by the school in conjunction with the School Nursing Service of the local Health Authority. The responsibility for monitoring this policy and for reviewing it, rests with the Pupil Welfare subcommittee.

Appendix C – Diabetes

Where possible children with diabetes should attend school as normal. Depending on the age of the child they should be able to manage their own diabetes, but staff will be on hand to support throughout the school day. Managing Diabetes in School Pack link here.

- **Individual Healthcare Plan (IHP):**
  Every student with diabetes should have a detailed IHP provided by their healthcare provider outlining their specific needs, including insulin dosage, blood sugar monitoring schedule, dietary requirements, and emergency procedures.

- **Staff Training:**
  Designated staff members should be adequately trained in diabetes management, including how to recognize signs of hypoglycemia and hyperglycemia, how to administer insulin (if necessary), and how to use blood glucose meters.

- **Medication Storage and Access:**
  Insulin and other diabetes supplies should be stored securely and readily accessible to trained staff, with clear protocols for accessing and administering medication.

- **Blood Sugar Monitoring:**
  Students with diabetes should be allowed to check their blood sugar levels regularly throughout the school day, with access to necessary supplies like lancets and test strips.

- **Meal and Snack Management:**
  Flexibility should be provided for students to adjust meal and snack times to manage blood sugar levels, including access to healthy snacks if needed.

- **Emergency Procedures:**
  Clear protocols should be established for managing diabetic emergencies like severe hypoglycemia or hyperglycemia, including immediate access to emergency supplies and communication with parents/guardians.

- **Communication and Collaboration:**
  Regular communication between the school nurse, teachers, parents, and the student's healthcare provider is crucial to ensure coordinated care and address any concerns.

- **Student Self-Management:**
  Depending on age and maturity, students should be encouraged to manage their own diabetes as much as possible, with appropriate supervision.

- **Physical Activity:**
  Adaptations to physical activities may be necessary to manage blood sugar levels, including monitoring before, during, and after exercise.

- **Field Trips and School Events:**
  Ensure adequate planning and support for students with diabetes during field trips and school events, including access to necessary supplies and designated staff oversight.