Ladygrove Primary School and Nursery
Asthma Policy

September 2026 review 2027

Ladygrove Primary School is an inclusive community that aims to support and welcome pupils with asthma and ensures that the whole school environment, which includes physical, social, sporting and educational activities, is inclusive and favourable to pupils with asthma.

This policy has been reviewed against the Department for Education's current statutory guidance, *Supporting pupils at school with medical conditions*, the Department of Health and Social Care guidance on emergency salbutamol inhalers in schools, and the statutory *Allergy safety in schools* guidance. The Department for Education consulted on revised medical-conditions guidance in 2026; until replacement guidance is formally issued, the existing statutory guidance remains in force. The school will review this policy promptly when final revised guidance is published.

Ladygrove ensures all staff understand their duty of care to children and young people in the event of an emergency and all staff feel confident in knowing what to do in an emergency.

- All school staff receive asthma awareness training at induction and regular updates thereafter; staff with specific responsibilities receive suitable, role-appropriate training from an appropriately qualified healthcare professional or approved provider.
- The school has clear arrangements for administering medicines, including written parental consent and accurate records.
- The school has clear arrangements for the safe, secure and readily accessible storage of inhalers, spacers and emergency equipment.
- The school maintains an asthma register and up-to-date individual healthcare plans or personalised asthma action plans, where appropriate.
- The school records and reviews asthma incidents and near misses so that lessons are learned and arrangements improved.

Every member of the school and health community knows their role in maintaining and implementing effective arrangements for pupils with asthma. The governing body has oversight of the policy, which is published, accessible to parents and staff, reviewed at least annually and updated sooner following revised guidance, a significant incident or a change in local arrangements.

Policy Guidelines

Pupils with asthma are encouraged to take control of their condition.

Pupils feel confident in the support they receive from the school to help them do this.

Pupils with asthma are included in all school activities.

All staff feel confident in knowing what to do in an emergency.

The school asthma policy is understood and supported by the whole school and local health community.

This school is committed to providing pupils with a physical environment, which is accessible to pupils with asthma with a commitment to an accessible physical environment including out of school visits, the school ensures these visits are accessible to all pupils and we ensure the needs of children with asthma are adequately considered to ensure they have full access to extended school activities such as school productions, after school clubs and residential visits (e.g. Arthog).

All staff at this school are aware of the potential social problems that pupils with asthma 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 asthma amongst pupils and to help create a positive social environment and all staff understand that pupil's with asthma should not be forced to take part in activity if they feel unwell.

Through annual training, Ladygrove will ensure that all staff are aware of the potential triggers for pupil's asthma when exercising and provide tips to minimise these triggers.

All staff are to ensure pupils have the appropriate medicines with them during physical activity and that pupils take them when needed.

Risk assessments must be carried out for any out of school visit and asthma must be considered during this process. Factors to consider include how routine and emergency medicines will be stored and administered and where help could be obtained in an emergency.

There may be additional medicines, equipment or factors to consider when planning residential visits. These may be in addition to any medicines, facilities and healthcare plans that are normally available in school.

All staff understand their duty of care to pupils in an emergency. Staff should act promptly in accordance with the pupil's individual healthcare plan or personalised asthma action plan, their training and the school's emergency procedure. Supporting a pupil in an emergency may include helping them to use their own reliever inhaler or, where the statutory conditions are met, the school's emergency salbutamol inhaler. An ambulance must be called immediately if the pupil is severely breathless, exhausted, has difficulty speaking, has blue or grey lips, is becoming less responsive, deteriorates, or does not improve in line with their emergency plan. A pupil must never be left alone during an asthma attack.

This school has procedures in place for a copy of the pupil's asthma/health care plan to be sent to the emergency care setting with the pupil. On occasions when this is not possible, the form is sent or the information on it is communicated to the hospital as soon as possible and, 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 arrives.

The school maintains an accessible asthma register and ensures that staff who need the information can identify pupils with asthma and understand their individual support arrangements. Photographs may be used only where necessary,

proportionate and supported by an appropriate lawful basis and the school's privacy information. Information is stored securely and is not displayed where it can be seen by pupils, visitors or other unauthorised people. Supply and temporary staff are given the relevant information before taking responsibility for a pupil.

When children attend after-school clubs, the person taking that club will have a list of any children who are asthmatic. This information is contained on the club register. This is so that they know who may be in a need of an inhaler during the club.

All staff attending off site visits should be aware of any pupils on the visit with asthma. They should receive information about what to do in an emergency and any other additional support necessary, including any additional medicines or equipment needed. Additional risk assessments are in place for children who are asthmatic.

The school asthma lead, Mrs Jones is responsible for ensuring that all medication held in school for our asthma sufferers is in date, that the necessary medical forms have been completed and that staff are aware of the children's condition. She also ensures that labelled storage boxes are set up for new asthma sufferers. She also ensures that all documentation held in classrooms on children is up to date.

Use of inhalers/ medicine to control asthma;

All pupils at this school with asthma have easy access to their emergency medicines

Inhalers are kept in a central place in the classrooms that the children are aware of for easy access.
Inhalers are taken onto the playground at playtimes and lunchtimes and during PE lessons in Asthma Bags. This is so no time is lost in getting children's medication from classrooms.

The school keeps emergency salbutamol inhaler kits in clearly identified, secure and readily accessible locations. Each kit contains a metered-dose salbutamol inhaler, compatible single-use or individually allocated spacers, instructions, a register of pupils for whom written consent has been obtained, and a record of use. The emergency inhaler may be used only for a pupil who has been diagnosed with asthma or prescribed a reliever inhaler, has written parental consent, and cannot access their own working inhaler. It is a backup and does not replace the pupil's own prescribed reliever. After use, the school records the incident and informs the parent or carer in writing on the same day.

All staff receive regular asthma awareness training. Staff who may be required to support a pupil or use the emergency inhaler receive practical, role-appropriate instruction and are assessed as competent. Training covers recognising deterioration, following individual plans, correct inhaler and spacer technique, summoning emergency help, recording use and notifying parents. The school maintains a record of training and refresher dates.

Should the medicine change or be discontinued, or the dose or administration method change, parents will notify the school immediately.

If a pupil refuses their medicine/inhaler, staff should record this. Parents or carers should be informed as soon as possible.

If a pupil misuses medicines, either their own or another pupil's, their parents will be informed as soon as possible and they will be subject to the school's usual disciplinary procedures.

Safe Storage - Emergency Medicine

Emergency medicines are readily available to pupils who require them at all times during the school day or at off site activities.

Safe Storage - General

All medicines are supplied and stored, wherever possible, in their original containers. All medicines need to be labelled with the pupil's name, the name of the medicine, expiry date and the prescriber's instructions for administration, including dose and frequency.

Where a child uses a device to deliver the inhaler these are stored according to medical guidance.

All medicines are sent home with pupils at the end of the school year. Medicines are not stored in school over the summer holidays

It is the parent's responsibility to ensure new and in date medicines come into school on the first day of the new academic year.

Safe Disposal

Parents are asked to collect out of date medicines/inhalers from school.

If parents do not pick up out of date medicines/inhalers or at the end of the school year medicines are taken to a local pharmacy for safe disposal.

Enrolment Forms

Parents are asked if their child has any health conditions or health issues on the enrolment form, which is filled out at the start of each school year or for new pupils when starting throughout the year and this information is put into our pupil management system.

Drawing up School Asthma Health Care Plans

An individual healthcare plan or personalised asthma action plan records the pupil's diagnosis or suspected asthma, usual and worsening symptoms, triggers, prescribed medicines and reliever type, dose and method of administration, spacer use, level of self-management, adjustments required, emergency steps, contacts and arrangements for trips, clubs and physical activity. The plan is developed with the pupil, parent or carer, school and relevant healthcare professional and is reviewed at least annually, after an asthma attack or hospital attendance, and whenever needs or treatment change.
The plan and an explanatory letter are sent to parents or carers for completion:

- at the start of the school year,
- at enrolment,
- when a diagnosis is first communicated to the school.

Parents/Carer's are asked to fill out the pupil's school Asthma Health Care Plan and returned to school. Parents may need to liaise with their child's health care professionals to complete the form.

This school ensures that the trained asthma lead member of school staff is available, if required to help complete the health care plan for pupils with particularly complex healthcare needs.

School Asthma Register

The school Asthma Health Care Plans are used to create a centralised register of pupils with asthma.

Information from the asthma register is shared only with staff who need it to keep pupils safe. Any photographs used for identification are kept securely within controlled staff systems or folders and are not displayed publicly.

The school asthma Lead Mrs Jones is responsible for holding the register centrally and following up any of the details on a pupil's Asthma Health Care Plan, or if permission for administration of medicines is unclear or incomplete.

Parents at this school are regularly reminded, via the school newsletter, to update their child's Asthma Health Care Plan if their child has a medical emergency or if there have been changes to their symptoms (getting better or worse) or their medicines and treatments change, or annually in the Autumn Term.

Staff at this school 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.

Every pupil with an individual healthcare plan has it reviewed at least annually and sooner following an asthma attack, hospital attendance, significant change in

symptoms or treatment, transition, or concerns raised by the pupil, family, school or healthcare professional.

Parents and pupils at this school are provided with a copy of the pupil's current agreed health care plan.

Health care plans are kept in the school Asthma file.

All members of staff who work with groups of pupils, have access to the health care plans of pupils in their care 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 health care plans of pupils in their care,

The school ensures that all staff protect pupil confidentiality.

This school seeks permission from parents to allow the health care plan to be sent ahead to emergency care staff should an emergency happen during school hours or at an out of school hours school activity.

This school uses the health care plans to:

- Inform the appropriate staff and supply teachers about the individual needs of a pupil with a medical condition in their care.
- Identify common or important individual pupil triggers at school that bring on symptoms and can cause emergencies.
- Ensure that all medicines stored at school are within the expiry date.
- Ensure this school's local emergency care facilities have a timely and accurate summary of a pupil's current asthma management and healthcare in the event of an emergency.
- Remind parents of pupils with asthma to ensure that any medicines kept at school for their child are within their expiry dates.

Consent to Administer Medicines

If a child requires regular prescribed or non-prescribed medicines at school parents are asked to provide consent giving staff permission to administer medicines on a regular/daily basis, if required. Details of this are contained in our Medicine in School policy.

All parents of pupils with asthma are asked to provide consent on the health care plan giving staff permission to administer medicines in an emergency.

If a child requires regular/daily help in administering their medicines then the school outlines the school's agreement to administer those medicine/s on the health care plan. The school and parents keep a copy of this agreement

Parents or carers and pupils are involved in agreeing the pupil's level of self-management. Where a pupil is competent to carry and use their own reliever inhaler, the school supports this and makes suitable backup arrangements. Reliever inhalers are not always blue: some pupils may use an anti-inflammatory reliever or a

Maintenance and Reliever Therapy inhaler under an individual treatment plan. Staff must follow the pupil's current personalised asthma action plan and medicine label rather than relying on inhaler colour.

Parents are sent a medicines form to be completed and returned to school shortly before their child leaves for an overnight or extended day trip. This form requests up to date information about the pupil's current condition and their overall health. This provides up to date information to relevant staff and school supervisors to help the pupil manage their condition while they are away including information about medicines not normally taken during school hours.

The medicines form is taken by the relevant staff member to the off site trip and for all out of school hours activities along with a copy of the pupil's health care plan.

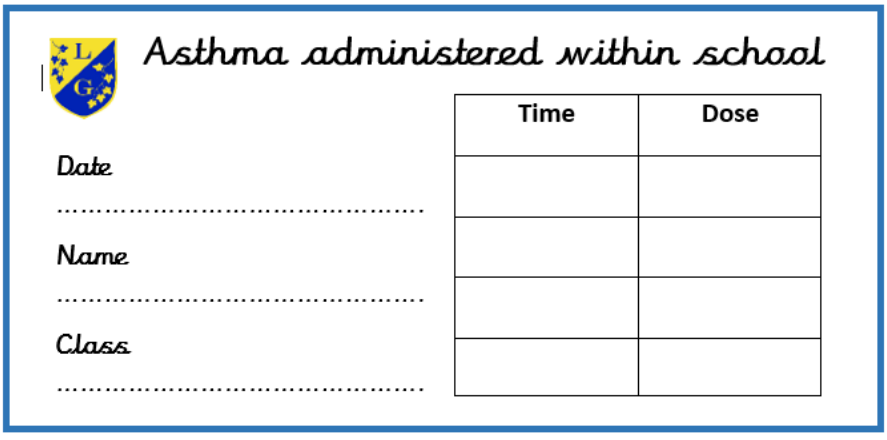
All parents of pupils with asthma attending a school trip or overnight visit are asked to give consent for staff to administer medicines at night or in the morning if required.

The medical form also details what medicines and what dose 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.

Other Record Keeping

The school keeps an accurate record whenever a pupil is given or supervised taking medicine, including the pupil's name, medicine, dose, date, time, outcome and staff member. Refusal, errors, adverse reactions, asthma attacks, emergency inhaler use and relevant near misses are recorded and escalated in accordance with school procedures. Parents or carers are informed as soon as possible and in writing on the same day when an emergency inhaler is used. Significant incidents and near misses are reviewed so that lessons are learned, risk assessments and plans are updated, and any required reporting is completed.

Asthma Administered Slip – Record keeping


Asthma administered within school

Date
.....

Name
.....

Class
.....

Time	Dose

When a child, within school time, has required the administration of their own or school salbutamol inhaler, the Asthma administered within school slip must be completed by the adult tending to the child as well as, being recorded within the class asthma folder.

This slip must be handed over to the parent/guardian at the end of the school day.

Staff Training - Record Keeping

All staff participate in regular asthma training to ensure they can support pupils with asthma effectively.

This school works in partnership with all interested and relevant parties including the school's governing body, all school staff, school nurses, parents, employers of school staff, healthcare professionals and pupils to ensure the policy is planned, implemented and maintained successfully. The following roles and responsibilities are used for the asthma policy at this school. These roles are understood and communicated regularly:

Telford & Wrekin LA has a responsibility to:

- Ensure the health and safety of their employees (all staff) and anyone else on the premises or taking part in school activities (this includes pupils). This responsibility extends to those staff and others leading activities taking place off site, such as visits, outings or field trips.
- Ensure health and safety policies and risk assessments are inclusive of the needs of pupils with asthma.
- Make sure the asthma policy is effectively monitored and regularly updated.
- Provide indemnity for teachers who volunteer to administer medicine to pupils with asthma.

The Headteacher has a responsibility to:

- Ensure the school is inclusive and welcoming and that the asthma policy is in line with local and national guidance and policy frameworks.
- Liaise between interested parties –including pupils, school staff, SEN coordinators, welfare assistants, teaching assistants, school nurses, parents, governors, the school health service the local authority transport service and local emergency care services.
- Ensure that information held by the school is accurate and up to date and that there are good information sharing systems in place using pupils individual health plans.
- Ensure pupil confidentiality.
- Assess the training and development needs of staff and arrange for them to be met.
- Ensure all supply teachers and new staff know the asthma policy.

- Delegate a staff member to check the expiry date of medicines kept at school and maintain the school asthma register.
- Monitor and review the policy, with input from pupils, parents, staff, governors and relevant healthcare professionals, and ensure that lessons from incidents and near misses are acted upon.

All staff have a responsibility to:

- Be aware of the potential triggers, signs and symptoms of asthma and know what to do in an emergency.
- Understand the school's asthma policy.
- Know which pupils have asthma and be familiar with the content of their individual health plan.
- Allow all pupils to have immediate access to their emergency medicines.
- Maintain effective communication with parents including informing them if their child has been unwell at school.
- Ensure pupils who carry their medicines with them, have them when they go on a school trip or out of the classroom.
- Be aware that long term conditions can affect a pupil's learning and provide extra help when pupils need it.
- Be aware of pupils with asthma who may be experiencing bullying or need extra social support.
- Liaise with parents, the child's healthcare professionals, special educational needs coordinator and welfare officers if a child is falling behind with their work because of their condition.
- Use opportunities such as PSHE to raise pupil awareness about asthma.
- Understand asthma and the impact it can have on pupils. (Pupils should not be forced to take part in activity if they feel unwell).
- Ensure all pupils with asthma are not excluded from activities they wish to take part in.
- Ensure pupils have the appropriate medicines with them during activity or exercise and are allowed to take it when needed

The school nurse has a responsibility to:

- Help update the school's asthma policy where applicable.
- Help provide regular training for school staff in managing asthma at school.
- Provide information about where the school can access training in areas that the school nurse has not had specialist training.
- Provide support and information to the identified member of staff responsible for ensuring that parents complete the health care plans.

Special Education Needs Coordinator has a responsibility to:

- Know which pupils have asthma and which have special education needs because of their condition.

- Ensure pupils who have been unwell catch up on missed school work.
- Ensure teachers make the necessary arrangements if a pupil needs special consideration or access arrangement in exams or course work.

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

- Help complete the school health plans provided by parents if appropriate.
- Where possible and without compromising the best interests of the child, to try to prescribe medicines that can be taken outside of school hours.
- Offer the parents of every child a written self-management plan to ensure parents and children know how they self manage at school and at home.
- Ensure the child knows how to take their medicines effectively.
- Ensure children have regular reviews of their condition and the medicines they take.
- Provide the school with information and advice if a child in their care has severe asthma symptoms (with the consent of the pupil and their parents).
- Understand and provide input to the school's medical condition policy.

The parents at this school have a responsibility to:

- Tell the school if their child has asthma.
- Ensure the school has a complete and up-to-date school healthcare plan for their child.
- Inform the school about the medicines their child requires during school hours.
- Inform the school of any medicines the child requires while taking part in visits, outings or field trips and other out-of-school activities such as school team sports.
- Tell the school about any changes to their child's medicines, what they take and how much.
- Inform the school of any changes to their child's condition.
- Asthma inhaler /spacer to be put in a plastic container with the child's name and photo on.
- Ensure their medicines and medical devices are labelled with their full name.
- Ensure that their child's medicines are within their expiry dates.
- Keep their child at home if they are not well enough to attend school.
- Ensure their child catches up on any school work they have missed.
- Ensure their child has regular reviews with their doctor or specialist healthcare professional.
- Ensure their child has a written self-management plan from their doctor or specialist healthcare professional to help them manage their child's condition.

Asthma Policy Annexes

- **Flow Chart for the Management of an Asthma Attack in School**
- **Letter to parent/carer re Health Care Plan**
- **Health Care Plan**
- **Parental Agreement for school to Administer Medicine**
- **Record of Medicine Administered**

- **Record of Medicine Administered to Individual Children**
- **Emergency inhaler consent form**

Flowchart for the Management of an Asthma Attack in School

MILD / MODERATE SYMPTOMS	ACTION
• Short of breath • Wheezy • Coughing • Complaining of chest tightness • Maybe unable to talk in full sentences	1. Give 2 – 4 puffs of pupil's own reliever (blue) inhaler immediately 2. If symptoms improve, the pupil can return to school activities 3. Record administration of medication and inform the parents, in accordance with the school asthma policy **If symptoms do not improve or become worse then follow instructions for severe attack**

The pupil may have one or more of these symptoms in addition to the mild symptoms

- Own normal inhaler is not helping to relieve the asthma symptoms
- Too breathless to talk or drink
- Becoming agitated or exhausted
- Lips and/or fingers are going blue

1. Give 10 puffs of the pupil's own reliever (blue) inhaler via a spacer if available

Call an ambulance

2. Continue to give 1 puff of the reliever (blue) inhaler via the spacer (if available) every minute, until the ambulance arrives or the symptoms begin to improve
3. Record the administration of medication and inform the parents, in accordance with the school asthma policy

How to Use An Inhaler and Spacer



1. Remove the cap from the inhaler and shake	2. Put the inhaler into the flat end of the spacer	3. Press the inhaler once to puff a single dose into the spacer	4. Encourage the child to breath slowly and deeply ten times in and out of the spacer
5. Then repeat the steps 1 to 4 for each puff of the reliever inhaler			

Ladygrove Primary School and Nursery
Old Office Road
Dawley
Telford
Shropshire
TF4 2LF
Tel: 01952 388370
Email: A2168@taw.org.uk
Website:http://ladygroveprimary.co.uk

Headteacher: Joanne Weichlbauer
Bed(Hons)NPQH

Dear Parent / Guardian

Re: The School Asthma Health Care Plan

Thank you for informing us of your child's asthma on his/her registration form.

As part of accepted good practice and with advice from the local PCT, hospital specialists, and the Department for Education & Skills, our school has a School Asthma Policy.

As part of this policy, we now ask all parents / guardians of children with asthma to help us by completing a School Asthma Health Care Plan for their child/children. This is attached to this letter. The completed School Asthma Health Care Plan will store important details about your child's current medicines, triggers, individual symptoms and emergency contact numbers. The Plan will help school staff to better understand your child's individual condition and needs.

Please provide the school with your child's current personalised asthma action plan and their prescribed, in-date reliever inhaler in its original packaging with the dispensing label. If a spacer has been prescribed or recommended, please provide a compatible spacer. Staff will follow the medicine label and action plan. Reliever inhalers are not always blue, and some children may use a combination inhaler as their reliever; please ensure the plan clearly states which inhaler should be used and how.

Please complete this Plan and return it to the school along with your child's normal reliever medication to be stored appropriate to your child's age and ability and an emergency reliever metered dose inhaler by (insert date):

I look forward to receiving your child's completed School Asthma Health Care Plan.

Thank you for your help.

Yours sincerely

Mrs J Weichlbauer
Headteacher

ADVICE FOR PARENTS

Remember:

1. **It is your responsibility to tell the school about any changes in your child's asthma and/or their asthma medication**
2. **It is your responsibility to ensure that your child has their 'relieving' medication with them in school and that it is clearly labelled with their name**
3. **You should confirm this with your child's class teacher**
4. **It is your responsibility to ensure that your child's asthma medication has not expired**
5. **Your child should not be exposed to cigarette smoke**

Ladygrove Primary School and Nursery Asthma Care Plan

Privacy Notice under the General Data Protection Regulations 2018

Ladygrove Primary School and Nursery collects and uses personal and special-category health information to protect the vital interests of pupils, fulfil its legal duties and provide appropriate education and care. Processing is carried out in accordance with the UK General Data Protection Regulation and the Data Protection Act 2018. Further information about the lawful bases, retention, individual rights and information sharing is provided in the school's privacy notice.

The school will not share any of your personal data collected with external organisations unless required/permitted to do so by law. For further details on the schools privacy arrangements please view the privacy page on the schools website (http://www.ladygroveprimary.co.uk/)

Child's Name	
Date of Birth	
Class	
Child's Address	
Date Asthma Diagnosed	

Family Contact Information

Parents/Guardians name	
Phone no. (work)	
(home)	
(mobile)	
Name	
Phone no. (work)	
(home)	
(mobile)	

G.P.

Name	
Phone no.	

Clinic/Hospital Contact

Name	
Phone no.	

Describe how the asthma affects your child including their typical symptoms and asthma 'triggers'

Describe their daily care requirements including the name of their asthma medicine(s), how often it is used and the dose.
(*e.g. once or twice a day, just when they have asthma symptoms, before sport)*

Describe what an asthma attack looks like for your child and the action to be taken if this occurs.

Who is to be contacted in an emergency? Give three contact telephone numbers

Form copied to: (to be completed by the school asthma lead)

ADVICE FOR PARENTS

Remember:

1. **It is your responsibility to tell the school about any changes in your child's asthma and/or their asthma medications.**
2. **It is your responsibility to ensure that your child has their 'relieving' medication with them in school and that it is clearly labelled with their name. You should confirm this with your child's class teacher**
3. **It is your responsibility to ensure that you child's asthma medication has not expired.**
4. **Your child should not be exposed to cigarette smoke**.

Ladygrove Primary School and Nursery Parental Agreement for School to Administer Medicine

The school will not give your child medicine unless you complete and sign this form.

Name of child	
Date of Birth	
Class	
Medical condition or illness	
Name and phone no. of GP	
Name/type of medicine (as described on the container)	
Dosage and method	
Are there any side effects that the school needs to know about?	
Procedures to take in an emergency	

Contact Details

Name	
Daytime telephone no.	
Relationship to child	
Address	

I accept that this is a service that the school is not obliged to undertake.
I understand that I must notify the school of any changes to my child's medication in writing.

Date_____ Signature(s)_____

Please note: It is your responsibility to ensure that the school is kept informed about changes to your child's medicines, including how much they take and when. It is also your responsibility to provide the school with medication that is clearly labelled and in date.

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Template B:

Telford & Wrekin COUNCIL

Form MED1

School: Ladygrove Primary School

Address: Old Office Road, Dawley, Telford , TF4 2LF

PARENTAL AGREEMENT FOR SETTING TO ADMINISTER MEDICATION

DETAILS OF PUPIL (*Capitals please*)						
Name		M/F	Date of Birth	/ /	class/ form:	
Condition or illness (*eg Asthma; Diabetes; Epilepsy, Cystic Fibrosis, Anaphylaxis, Recovery from? Illness, etc):*						
DOCTOR'S DETAILS						
Doctor's Name		Medical Practice		Telephone Number		
MEDICATION AND ADMINISTRATION						
Name of medication (*give full details given on the container label issued by the pharmacist)* Type of Medication (eg tablets, mixture, inhaler, Epipen, other (*please specify*)						
Date Dispensed:	Dosage and method:					
Times to be Taken in School:	Is precise timing critical? Yes/ No					
Time of last dosage?						
For how long will your child need to take this medication?						
For medication that need not be administered at pre-set times please indicate when it should be given: (eg before exercise, onset of asthma attack, onset of migraine etc)						
The medication needs to be administered by a member of staff				Yes	No	
My child is capable of administering the medication him/herself under the supervision of a member of staff				Yes	No	
I would like my child to keep his/her medication on him/ her for use as necessary				Yes	No	
The medication needs to be readily accessible in case of emergency				Yes	No	
ADDITIONAL INFORMATION						
Precautions or Side Effects:						
What to do in an emergency:						

(Please read the notes on the reverse of this form carefully* If you are in doubt about how the medicine is to be given you must seek the advice of your child's doctor before completing this form.*)

The doctor named above has advised that it is necessary for my child to receive his/her medication during school time. I understand that teachers have no *obligation* to give or supervise the administration of medicines at school. However, I request that the medication named above be administered by/taken under supervision of a member staff, who may not have had any first aid or medical training. The school, the Headteacher and staff accept no responsibility for any injury, death or damage suffered by a pupil as a result of the administration of medicine mentioned in this form, other than any injury, death or damage which arises because the school or any members of its staff have been negligent I shall arrange to collect and dispose of any unused, expired medicine at the end of each term.

Signed: Parent/Carer: _____ Date: _____

NOTES

1. The school will consider each request on its merits. Where it is practicable the school may well prefer parents to come into school at appropriate times to administer the medicine themselves or make arrangements at break or lunchtime for the pupil to go home to receive the medication.

2. The school may refuse to undertake administration where this is seen to be the reasonable decision in the best interests of the school. For example where timings of administration are critical and crucial to the health of the pupil and cannot be guaranteed; where specific technical or medical knowledge and/or training is required or where administration would make unacceptable intimate contact with the pupil necessary.

3. The school will not agree to administer any medication in school without a written request using this form, having first been made.

4. The school will not agree to administer any medication in school that is not essential to be administered during the course of the school day. (If it is acceptable for doses to be given before and after school the school should not be being asked to administer during the school day).

5. All requests will need to be discussed fully with the head teacher or other authorised member of staff before any medicines are sent into school.

6. Any prescribed medicine must be supplied to the school in the original container labelled by the pharmacist with the name of the medicine, full instructions for use and the name of the pupil. Any non-prescribed medicine bought by the family should be in the original container bearing the manufacturer's instruction/guidelines. The school may refuse to administer any medicines supplied in inappropriate containers.

7. For pupils on long-term medication the request form should be renewed by the parent/carer when required by the school and in any event at the beginning of each new school year.

8. Parents are responsible for notifying the school immediately in writing of any subsequent changes in medicines or doses.

9. Parents are responsible for notifying the school immediately the doctor has stopped the medication.

10. Parents are responsible for collecting and disposing of any unused or expired medicine at the end of each term.

11. A record will be kept by the school of all medicines administered and when in respect of each pupil for whom it has agreed to administer medicines.

12. Where they feel it to be necessary the school reserves the right to ask parents to supply a doctor's note to support/confirm the information given on the request form.

13. You may find it necessary to seek your Doctor's help in completing this form.

July 2019

Record of Medicine Administered to Individual Children

Fill in the child's details in section 1 and then one form in section 2 each time medicine is given in school

Section 1

Name of school	
Name of Child	
Date medicine provided by parent	
Class	
Quantity received	
Name and strength of medicine	
Expiry date	
Quantity returned	
Dose and frequency of medicine	

Section 2

Date		Date	
Time given		Time given	
Dose given		Dose given	
Name of member of staff		Name of member of staff	
Staff initials		Staff initials	

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Headteacher: Joanne Weichlbauer
Bed(Hons)NPQH

CONSENT FORM FOR USE OF EMERGENCY SALBUTAMOL INHALER

Child showing symptoms of asthma / having asthma attack

☐. I can confirm that my child has been diagnosed with asthma / has been prescribed an inhaler [delete as appropriate]. You will also need to complete and return an asthma care plan.

☐. My child has a working, in-date inhaler in a plastic container clearly labelled with their **name** and **photo**, which they will bring with them into school.

☐. In the event of my child displaying symptoms of asthma, and if their inhaler is not available or is unusable, I consent for my child to receive salbutamol from an emergency inhaler held by the school for such emergencies.

Signed:…… Date:……...

Name(print)……

Child's name: …… Class: ……

Parent's address and contact details:

……

……

Telephone: ……

E-mail: ……..……

I consent to photo ID being used on the asthma register Yes / No [delete as appropriate]

Policy – document status:			
Date of policy creation	September 2019	Named responsibility	Joanne Weichlbauer
Date of review	September 2026	Named responsibility	Kirsty Stewart Kerrie Jones
Inception of new policy	September 2026	Named responsibility	Kirsty Stewart
Date of policy adoption by the governing body			October 2026