



Holly Park School

First Aid, Accidents, Medicines & Asthma Policy

Introduction

The staff and governors of Holly Park are wholly committed to pursuing a policy of Inclusive education that welcomes and supports pupils with medical conditions. This policy is designed to support the management of medication and medical care in school and to support individual pupils with medical needs.

The policy complies with:

- Equality Act 2010
- Children and Families Act 2014
- DfE (2015) 'Supporting pupils at school with medical conditions'
- DfE (2017) 'Using emergency adrenaline auto-injectors in schools'

First Aid is emergency care given to an injured person (in order to minimise injury and future disability) before professional medical care is available. Teachers and other staff are expected to use their best endeavours at all times, particularly in emergencies, to secure the welfare of pupils in the same way that parents might be expected to act towards their children. In general, consequences of taking no action are likely to be more serious than those of trying to assist in an emergency.

This policy links with the UN Rights of the Child

Article 3

The best interests of the child must be a top priority in all things that affect children.

Article 24

Every child has the right to the best possible health. Governments must work to provide good quality health care, clean water, nutritious food and a clean environment so that children can stay healthy. Richer countries must help poorer countries achieve this.

Article 27

Every child has the right to a standard of living that is good enough to meet their physical, social and mental needs. Governments must help families who cannot afford to provide this.

I Principles/Aims

To provide a clear policy that is understood and accepted by all staff, parents and children, providing a sound basis for ensuring that children with medical needs receive proper care and support in school, and that for such children attendance is as regular as possible.

The policy includes:

- A clear statement of parental responsibilities in respect of medicines
- Roles and responsibilities of staff administering medicines
- Procedures for managing prescription medicines which need to be taken in the school day
- Procedures for managing prescription medicines on outings and trips
- Written permissions from parents for medicines
- Circumstances in which children may take non-prescription medicines
- Assisting children with long term medical needs
- Staff training
- Record keeping
- Safe storage of medicines
- The school's emergency procedures
- Risk assessment and management procedures
- Management of medical conditions

2 Risks

2.1 A risk assessment of First Aid needs is necessary to ensure adequate provision is available. This should include:

- The identification of pupils with specific conditions e.g. asthma, allergies
- The identification of specific hazards in school.
- When to call for further help
- The documentation of necessary treatment given

3 Responsibilities

The responsibility for Health and Safety, which includes First Aid, rests with the Governing Body.

The Head Teacher is responsible for putting the policy in place, including informing staff and parents.

Parents or guardians have prime responsibility for their child's health should provide the school with up to date information about their child's medical conditions, treatment and/or any special care needed.

If their child has a more complex medical condition, they should work with the school nurse or other health professionals to develop an individual healthcare plan, which will include an agreement on the role of the school in managing any medical needs and potential emergencies. It is the parent/carers responsibility to make sure that their child is well enough to attend school.

All staff, and those parents with responsibility for children in school, should be aware of available First Aid personnel, facilities, and the location of First Aid boxes and information. First Aid provision must be available at all times, including out of school trips, during PE

and other times the school facilities are used e.g. Parent Consultations, concerts and meetings.

Adequate First Aid resources will be provided in all school buildings, and a designated First Aider (the Pupil Support Officer) is on site throughout lesson times as well as during break times.

Designated First Aiders must have attended a recognised First Aid Course approved by the Health and Safety Executive (HSE) and attend refresher courses every 3 years. They will be reliable, have good communication skills, an ability to cope with stress and able to absorb new knowledge.

The HSE states that First Aid does not include the administration of medicines, although there is no legal bar to doing so. The administration of prescription medicines is covered by the Barnet Local Code of Practice. There is no legal duty which requires school staff to administer medication; this is a voluntary role. While teachers have a general professional duty to safeguard the health and safety of their pupils and to act in 'loco parentis', that is, to act as any reasonable parent would, this does not imply a duty or obligation to administer medication. Staff will have access to information on pupils' medical conditions and actions to take in an emergency. Staff managing the administration of medicines and those who administer medicines will receive appropriate training and support from health professionals. The policy of this school is not to administer medication or medical care unless the pupil has a medical condition, which if not managed, could prove detrimental to their health or limit access to education. The head teacher accepts responsibility, in principle, for school staff administering or supervising the taking of prescribed medication or medical care during the school day only where it is absolutely necessary. Non-prescription medicines are not administered by school staff.

It is the responsibility of the Head Teacher, to ensure good First Aid practice is being carried out within the school and at events and activities organised by the school.

All relevant staff should have First Aid training. Lists of staff with First Aid responsibilities and/or appropriate training are displayed in the Welfare Room and around the school buildings.

The school has a duty to ensure that at all times there is a member of staff on site with current Paediatric First Aid Training. A list of trained staff is displayed in the Welfare Room

First Aid Cabinets are situated in the kitchen area of the school's buildings. First Aid Kits are available during P.E. lessons and educational visits.

The contents of the First Aid Kits are to be regularly checked and maintained by the Welfare Assistant. Kit checks are also included in the Annual Health & Safety Inspection.

Epipens can only be administered by trained personnel. A list of these personnel is displayed in the school's Welfare Room. All epipens are stored in an airtight box, labelled with the child's name and photograph.

On trips and visits, a nominated First Aider must be planned into the trip's staffing. This person is not required to have full First Aid training, but must have a working knowledge of basic First Aid, and is responsible for ensuring that all relevant medications are taken on

the trip, and where relevant are held for identified children (e.g. epi-pens, inhalers) by the adult designated to lead their group.

4 Procedures for dealing with accidents

At Holly Park Primary School we make every effort to minimise the risk of accidents but we recognise that accidents may still occur.

All accidents to pupils, staff, parents and visitors, no matter how small will be reported to the responsible person, or to the Head Teacher as soon as possible after the accident took place.

The First Aider present will deal with the accident and treat any injuries as required. Once the individuals have been treated, all details regarding the accident, will be recorded in the Accident Book by a member of staff. An investigation into the accident should be undertaken immediately or at least on the same day. Judgements should be made as to what can be done to reduce the risk of similar accidents occurring again.

The maintenance of the First Aid Kits is the responsibility of the school's Pupil Support Officer

5 Reporting & Recording of Accidents

Holly Park Primary School staff have a duty to report all serious and significant accidents to a child's parent. This can be by telephone. – children will have normal playground injuries during their time at school. Not all bumps and **scrapes** require reporting. Small scrapes, falls and tumbles are a natural part of growing up. With a school of approx. 400 children we cannot possibly inform parents of all small bumps and bruises. Time and personnel are limited and this is put to best use caring for the children rather than making unnecessary administrative phone calls. We report what we believe to be appropriate and proportionate. Administering first aid as necessary, and logging the injury in an accident book if it is reported is what is required when it comes to dealing with minor accidents and injuries.

An accident book is kept in the welfare room. A trained First Aider should complete the details of the accident with date, what happened and how it was treated. Records should be stored until the child concerned has reached 21 years.

At Holly Park we do not fill in accident report slips to give to parents. Serious accidents will be reported to parents. We cannot report every small bump, scratch and graze. If necessary a phone call will be made to the parent if there is an injury/accident causing concern.

Not everything recorded in the accident book is required to be reported to parents. Staff make an informed judgement of whether an accident should be reported to a parent. Small cuts, falls, bangs and grazes and minor injuries cannot be reported.

Accident numbers will be reported to the Governors in the termly HT report. Accidents in the accident book will be analysed for the number of accidents type of accidents. The governors Staffing & pupil welfare committee will have accident books made available to them.

The Head Teacher will ensure that serious accidents are reported as necessary to Barnet. All *reportable* accidents and incidents occurring at Community Schools must be reported to the SHaW team via the on-line Health and Safety Management System.

The types of incidents/accidents that **should** be reported are:

- Any accident or incident where a member of staff, volunteer, visitor or contractor is injured
- Any accident or incident which is RIDDOR-
- Any accident or incident resulting from malfunction, improper use or poor maintenance of equipment or facilities

Incidents that **do not** require reporting, but should be recorded locally include

- Playground collisions (unless resulting in a RIDDOR-reportable injury)
- Sporting injuries during organised events and lessons (unless resulting in a RIDDOR-reportable injury)
- Non-injury trips and falls resulting from poor physical co-ordination/balance
- Ill health from pre-existing medical conditions
- Thefts/lost property issues

RIDDOR – Incidents to be reported

- Accidents resulting in death or major injury
- Accidents which prevent normal duties for more than 3 days
- Loss of consciousness due to asphyxia or absorption of harmful substances
- Fractures / Dislocations
- Amputation
- Loss of sight – temporary or permanent
- Chemicals or hot metal burn to eye
- Penetrating eye injury
- Electric Shock
- Injury leading to hypothermia
- Unconsciousness needing resuscitation / hospital admission for over 24hrs.

6. Prescribed medicines

a) Prescribed medicines should only be brought to school when essential; that is, where it would be detrimental to a child's health if the medicine were not administered during the school day. Medicines prescribed 'three times a day' should be administered "before school, after school and at night". This school recognises in extreme cases (as stipulated by a doctor in writing), and agreed by the head teacher, that staff may administer medication following completion of the school's medical form. However, parents and carers are allowed into school to administer medication if they so desire.

b) Exceptions to this are pupils on health care plans who have individual medical needs requiring emergency medication to treat specific conditions, such as anaphylaxis.

c) This school will only accept medicines that have been prescribed by a doctor, dentist, nurse prescriber or pharmacist prescriber and are presented in the original container dispensed by a pharmacist and include the pupil's name, prescriber's instructions for administration and dosage.

7. Non – Prescribed medicines

Non-prescribed medicines will only be administered with prior written permission from parents in extreme circumstances such as residential trips. Staff will check the medicine has previously been administered without adverse effect and the school's medical form must be completed. Staff will never administer medicines containing aspirin unless prescribed by a doctor.

8. Administering medicines

a) This school recognises that no child under 16 should be given medicines without their parent's written consent.

Following written consent using the school's medical form, any member of staff administering medicines to a pupil should check:

- The child's name
 - Name of medication
 - The prescribed dose
 - Expiry date
 - Written instructions provided by the prescriber on the label or container
- If in doubt about any procedure, staff will not administer the medicine before checking with parents or a health professional before taking further action.

b) A written record must be kept following administration of medicines to pupils on the school's record form.

c) If a child refuses to take a medicine, staff will not force them to do so, but will record this on the school's record form and parents/carers will be notified of the refusal.

9. Record Keeping

a) Parents should tell the school about the medicines their child needs to take and provide details of any changes to the prescription or the support required. Medicines should always be provided in the original container as dispensed by the pharmacist and include the prescriber's instructions. Requests for staff to administer medication should be written on the school's medical form.

These should include:

- Name of child
- Name of medicine
- Dose
- Method of administration
- Time/frequency of medication
- Any side effects
- Expiry date

Completed forms should be kept in the medical room and referred to when administering medication. The record folder must be completed by staff following administration.

b) Requests for updated medical conditions including asthma, are distributed to parents at the beginning of each school year. These are collated by the Pupil support Officer. All staff have access to this information and actions to take in an emergency.

d) Updated medical conditions and reviews of policies and practice are monitored and disseminated by the pupil support officer.

10. Storing medicines

a) Staff will only store, supervise and administer medicine that has been prescribed for an individual child. Medicines must be stored safely in the pharmacist's original container and clearly labelled with the child's name, the dosage and instructions for administration.

b) Non-emergency prescribed medication is stored with the school's medical form in the medical room. Medication requiring refrigeration is stored in the medical room fridge.

c) Emergency medications such as Epi-pens and asthma inhalers should be readily available in a clearly labelled container in the medical room. Children should know where their medicines are stored;

d) Parents are ultimately responsible for checking expiry dates on their children's medicines and replacing as necessary. The pupil support officer will also check medication expiry dates twice a year.

11. Disposal of medicines

a) Staff should not dispose of medicines. Parents are responsible for ensuring that date-expired medicines are returned to a pharmacy for safe disposal. They should also collect medicines held at the end of each year. Any medicines that have not been collected should be taken to a local pharmacy for safe disposal.

b) Sharps boxes should always be used for the safe disposal of needles. Parents should obtain these from their child's GP and return to a pharmacy for safe disposal.

12. Emergency Procedures

a) All staff are aware of procedures when dealing with a medical emergency. These should be supervised by a trained First Aider.

b) All staff are aware of pupils on a health care plan and understand the need to follow agreed emergency support.

c) All staff know how to call the emergency services;

d) In the event of an emergency, every effort will be made to contact a parent so that they may accompany their child to hospital. If this is not possible, a member of staff will accompany the child to hospital by ambulance and stay until the parent arrives. Health care professionals are responsible for any decisions on medical treatment when parents are not available.

13. Head Injuries

- a) Pupils who sustain a head injury **MUST** be reviewed by a First Aider in school. If a pupil has a visible wound, swelling or adverse reaction, parents will be informed by telephone and are welcome to assess their child personally.
- b) If necessary due to a severe head injury, the parent will be notified and an ambulance will be called.
- c) Where there are no residual effects, the pupil can remain in school whilst being observed. A head injury sticker will be put on the child for staff information only – for staff to be aware and keep an eye. Because stickers can fall off jumpers easily, we send a text message to parents to inform them that the child has had a bump to the head

14 First Aid resources

Contents of First Aid kits

- Leaflet for First Aid advice
- Accident / Injury Record book
- assorted plasters
- sterile eye pads
- triangular bandages
- safety pins
- Medium wound dressings
- Large wound dressings
- disposable gloves
- Antiseptic Cleansing wipes

Contents of travel / PE first aid kits

- Leaflet for 1st Aid advice
- assorted plasters
- triangular bandages
- safety pins
- Large wound dressings
- pair of disposable gloves
- packet of wipes

First Aid room equipment / supplies

- Washbasin, drinking water, cups
- 1st Aid Manual
- Phone
- Accident / Injury Record book
- Bed, Pillow & Blanket
- Yellow clinical bag

15. Health Care Plans

Where a pupil has a chronic illness, medical or potentially life threatening condition, the school will initiate a health care plan to meet individual needs and support the pupil. Care plans are written for children with epi – pens or children with specific medical needs generally referred to us by parents, the school nurse or a hospital. Care plans are drawn up by health care professionals in consultation with the child's parents or guardians and will contain the following information:

- Definition and details of the condition

- Special requirements e.g. dietary needs, pre-activity precautions
- Treatment and medication
- What action to take/not to take in an emergency
- Who to contact in an emergency
- Staff training where required
- The role the staff can play
- Consent and agreement

Care plans are signed by all three parties. Care plans are private and confidential. Each class teacher, the parents, the school Pupil Support Officer and the school nurse all keep a copy. Care plans are reviewed and updated as necessary.

16. Educational Visits

- a) This school actively encourages children with medical needs to participate in trips and visits. Staff will aim to facilitate reasonable adjustments to enable pupils with medical needs to participate fully and safely on visits. Risk assessments will be used to highlight any potential difficulties and ensure procedures are in place to support pupils. Additional staff/adults will be considered for this purpose.
- b) Prior to an overnight school trip, parents must complete an up-to-date medical questionnaire about pupil's current general health and medication. Prescribed medication will be administered, providing parents have completed the school's medical form.
- c) Accompanying staff will be aware of any medical needs and relevant emergency procedures. A copy of health care plans will be taken on all visits as well as emergency medication that may be required.

17. Staff training

- a) Holly Park holds training on common medical conditions e.g asthma & use of epi-pen once a year; this is delivered by the school nurse or relevant health care professionals.
- b) Staff training is provided to support the administration of emergency medications such as Epi-pens or insulin. The school keeps a register of staff who have undertaken the relevant training. Only staff who have received this training should administer such medications.
- c) Holly Park has several appointed First Aiders and Paediatric First Aiders. Training is reviewed regularly and updated annually

18. Asthma

This school recognises that asthma is a widespread, potentially serious, but controllable condition and encourages pupils with asthma to achieve their potential in all aspects of school life.

This policy has been created with regard to Asthma UK and advice from DfE guidance and Healthy London Partnership – My health London

Holly Park is an asthma friendly school. In accordance with the guidelines for asthma friendly schools: all pupils who need it have an asthma plan, records are kept of usage, parents are called if there is an exceptional incident, Asthma medication is clearly labelled and stored in a cool location, expiry dates are checked regularly and replacements requested, inhalers are administered via a spacer, all spacers are single person use, asthma training is taken up by all staff.

The governing body has a responsibility to ensure there is an asthma policy and that it is effectively monitored and updated

The Headteacher has a responsibility to Ensure this policy is effectively implemented and communicated to all members of the school community. Ensure all aspects of this policy are effectively carried out. Arrange for all members of staff to receive training. Ensure all new members of staff are made aware of the Asthma Policy, Monitor the effectiveness of the Asthma Policy and delegate the responsibility to check the expiry date of all inhalers.

Members of school staff have a responsibility to: Read and understand the Asthma Policy.

Know which pupils they come into contact with have asthma. Know what to do in the event of an asthma attack (training) Allow pupils with asthma immediate access to their reliever inhaler. Ensure pupils with asthma have their medication with them on school trips and during activities outside of the classroom.

Pupils with asthma have a responsibility to: Tell their teacher or parent/carer if they are feeling unwell. Treat asthma medicines with respect. Know how to take their asthma medicine.

Parents have a duty to inform staff if their child is asthmatic. Preventative inhalers should be provided and labelled with the pupil and class name. These are kept in an assigned container within the medical room and accompany the child if they are educated outside the school premises. Inform the school if their child has asthma. Parents should Ensure the school has a complete and up-to-date HCP or asthma action plan for their child. Inform the school of any medication their child requires during school trips, team sports events and other out-of-school activities. Inform the school of any changes to their child's medicinal requirements. Inform the school of any changes to their child's asthmatic condition. For example, if their child is currently experiencing sleep problems due to their condition. Ensure that their child's reliever inhaler and spare inhaler are within their expiry dates. Ensure their child has regular asthma reviews with medical professionals.

Children with asthma must have quick access to inhalers when they need them and know where they are kept. A spacer device is required for all pupils with asthma and the pupil may need support to use this. Reliever inhalers kept in the school's charge are held in the medical room. Staff members will let pupils take their own medicines when they need to.

A record sheet to record the frequency of an inhaler use can be found in

the medical room. This should be completed for all KS1 pupils and for KS2 children where usage exceeds normal daily administration.

Parents will be notified when a child has used an inhaler excessively or is particularly wheezy

We ensure that pupils/adults with asthma can and do participate fully in all aspects of school life including physical exercise, visits, field trips and other out-of-school activities.

Ensures that all members of school staff (including support staff) who come into contact with pupils with asthma know what to do in the event of an asthma attack.(Training)

Holly Park keeps a supply of Ventolin inhalers for use in emergencies when a pupil's own inhaler is not available. These are kept in 'emergency asthma kits'. Emergency asthma kits contain the following: A Ventolin metered dose inhaler, Instructions on constructing the disposable spacer, the manufacturer's information, the box with expiry date. The emergency inhaler should only be used by pupils, for whom written parental consent has been received and who have been either diagnosed with asthma or prescribed an inhaler as reliever medication. When not in use, emergency inhalers are stored in the medical room and in the staffroom in the temperate conditions specified in the manufacturer's instructions, out of reach and sight of pupils, but not locked away. Whenever the emergency inhaler is used, the incident must be recorded.

The Pupil Support officer is responsible for overseeing the protocol for the use of the emergency inhaler, monitoring its implementation, and maintaining the Asthma Register.

The Pupil Support welfare officer will: Check that inhalers are present and in working order, ensure replacement inhalers are obtained when expiry dates are approaching.

At the beginning of each school year, or when a child joins Holly Park School, parents/carers are asked to inform the school if their child has any medical conditions, including asthma, on their enrolment form

19. Epilepsy, Anaphylaxis and Diabetes

Parents have a duty and responsibility to notify the school if their child has any of these conditions and should provide details of any treatment and support they may require in school. Relevant health care professionals will liaise between parents/guardians and school personnel to ensure staff are aware of, and trained to provide, any relevant or emergency support or treatment. An individual health care plan will usually be compiled, detailing the course of action to be taken.

20. Mental health First Aid

We have several Mental health first aiders. Mrs Puzey is the designated Mental health First Aider that children are made aware of. Mental health first aid is the help provided to a person who is developing a mental health problem, experiencing a worsening of a mental health problem, or in a mental health crisis. The first aid is given until appropriate professional help is received or to crisis resolves. A Mental Health First Aider in the school is the go-to person for anyone who is going through some form of mental health issue. The first aider will be able to help guide the person in distress to the help that they need. The Mental health First Aider is there for staff and children.

21. Toothbrushing

The school cannot facilitate the lunchtime brushing of teeth for children as we do not have the sink facility or the staffing levels to supervise this. The recommended amount of brushing for children is twice a day which can be done at home.

A school generally cannot facilitate tooth brushing for pupils at lunchtime because it raises several practical, hygiene, and safeguarding concerns. Managing large numbers of children brushing their teeth requires strict supervision to ensure proper hygiene practices, prevent cross-contamination, and maintain clean facilities—something most schools are not staffed or equipped to handle during a busy lunch period. There are also logistical issues, such as limited sink space, insufficient time within the lunch break, and the need to store toothbrushes hygienically to meet health standards. Additionally, schools must prioritise core educational and care responsibilities, and introducing tooth brushing routines would place significant extra demands on staff and resources.

The school will occasionally facilitate lunchtime toothbrushing in particular situations for a particular dental need e.g braces and for a limited period of time accompanied by a dentist letter. The school might allow toothbrushing for an individual child when it is clearly supported by a medical, developmental, or care-related need and can be managed safely without disrupting wider routines. For example, a child with a diagnosed medical condition that requires toothbrushing after meals (such as severe reflux, certain dental conditions, or advice from a dentist or specialist) may need a personalised arrangement. Similarly, pupils with additional needs—such as those following an Education, Health and Care Plan (EHCP) or individual healthcare plan—might require toothbrushing as part of their sensory or self-care routines. In these cases, the school would usually require professional advice (e.g., from a dentist, paediatrician, or therapist), parental agreement, and a clear plan for hygiene, supervision, and storage of equipment. These arrangements are typically made on an individual basis to ensure the child's wellbeing while maintaining safe and manageable practices for staff.

22. Monitoring and review

This policy is monitored on a day-to-day basis by the Headteacher, who reports to governors about the effectiveness of the policy on request.


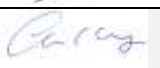
This first aid policy is the governors' responsibility and they review its effectiveness annually. They do this by examining the school's first aid records, and by discussion with the Headteacher. Governors analyse information with regard to gender, age and ethnic background of all children involved in reported incidents. This duty has been delegated to the Staff and Pupil Welfare Committee

Document Control

Revision History

Version	Revision Date	Revised By	Revision
1.0	Autumn 2014	Ann Pelham & Lisa Flaherty	Updated in light of current advice and to include medicines into policy not just first aid
1.1	Autumn 2014	Govs S&PW	Updated
1.2	October 2015	Govs S&PW	Updated
1.3	September 2016	Govs S&PW	Updated
1.4	Autumn 2017	Govs S&PW	Updated
1.5	Autumn 2018	Govs S&PW	Updated
1.6	Autumn 2019	Govs S&PW	Updated
1.7	Autumn 2020	Govs S&PW	Ratified
1.8	Autumn 2021	Govs S&PW	Ratified
1.9	Autumn 2022	Govs S&PW	Ratified
2.0	Autumn 2023	Govs S&PW	Ratified
2.1	Autumn 2024	Govs S&PW	Ratified
2.2	Autumn 2025	Govs S&PW	Ratified

Signed by


	Name	Signature	Date
Headteacher	Ann Pelham		Autumn 2025
Chair of Governors	Clare Hegarty		Autumn 2025

Distribution

Shared with
<ul style="list-style-type: none"> Staff via school server Parents via Website Governors via committee meetings

Date for next review
Autumn 2026

Appendix I

 HOLLY PARK PRIMARY SCHOOL	Holly Park Primary School Bellevue Road Friern Barnet London N11 3HG t: 020 8368 1434 f: 020 8361 6329 e: office@hollypark.barnetmail.net
Headteacher: Mrs A. Pelham Deputy Headteacher: Miss M. Michael	

Dear Parent/Carer

We are pleased to inform you that schools are now permitted to hold emergency Ventolin inhalers.

We have reviewed our asthma procedures and will now have an emergency inhaler on site. This is purely a precautionary measure.

You must still provide your child with their own inhaler and spacer as prescribed.

We would like to notify you that if you have previously informed us that your child has asthma or has been prescribed a blue inhaler we will use the school's emergency inhaler in the unlikely event their regular inhaler fails to work or is missing.

If you **do not** wish for us to use the schools inhaler in an emergency please fill in the details below and return it to school as soon as possible.

Yours sincerely

Mrs A Pelham
Headteacher


.....

Child's Name:

Date:

I DO NOT consent to my child using the school's emergency inhaler.

Signed

 HOLLY PARK PRIMARY SCHOOL	Holly Park Primary School Bellevue Road Friern Barnet London N11 3HG t: 020 8368 1434 f: 020 8361 6329 e: office@hollypark.barnetmail.net
Headteacher: Mrs A. Pelham Deputy Headteacher: Miss M. Michael	

Dear Parent/Carer

All children who have a blue inhaler kept at school are now required to have an Asthma Plan kept on file at school.

The plan must be completed by your Asthma Nurse, GP or Practice Nurse.

We have attached a pro forma plan which may be completed or your Doctor's surgery may have a plan they prefer to use, which is perfectly acceptable.

Please arrange to have an asthma plan completed for your child and return it to school (to Mrs Needham) by 6th January 2020.

Yours sincerely

Mrs A Pelham
Headteacher

