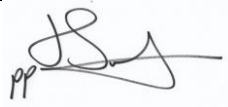




## **Campsbourne School**

### **First Aid and Administration of Medicine Policy**

Policy Originator	Campsbourne School
Committee Responsible	Resources and Premises
Status	Approved
Last reviewed	Spring 2023
Ratified on	28/03/2023
Review period	Annually
Signed by Governor responsible for Health and Safety	

## 1. Statement of Intent

The Governing Body believe that ensuring the health and welfare of staff, students and visitors is essential to the success of the school.

We are committed to:

- Complete first aid needs risk assessments for every significant activity carried out.
- Providing adequate provision for first aid for children, staff and visitors.
- Ensuring that students and staff with medical needs are fully supported at school and suitable records of assistance required and provided are kept.
- First-aid materials, equipment and facilities are available, according to the findings of the risk assessment.
- Procedures for administering medicines and providing first aid are in place and are reviewed regularly.

We will ensure all staff (including supply staff) are aware of this policy and that sufficient trained staff are available to implement the policy and deliver against all individual healthcare plans, including in contingency and emergency situations.

We will also make sure that the school is appropriately insured and that staff are aware that they are insured to support students in this way.

In the event of illness, a staff member will accompany the child to the school office/medical room. In order to manage their medical condition effectively, the school will not prevent children from eating, drinking or taking breaks whenever they need to.

The school also has a Control of Infections Policy which may also be relevant and all staff should be aware of.

This policy has safety as its highest priority: safety for the children and adults receiving first aid or medicines and safety for the adults who administer them

This policy applies to all relevant school activities and is written in compliance with all current UK health and safety legislation and has been consulted with staff and their safety representatives (Trade Union and Health and Safety Representatives).

**Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**(Chair of Governors)**

**Date:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**(Headteacher)**

**Date:** \_\_\_\_\_

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## **2. Roles and Responsibilities**

### **2.1 The Governing Board**

- 2.1.1 The Governing Board has ultimate responsibility for health and safety matters - including First Aid in the school.
- 2.1.2 Ensure the first aid risk assessment and provisions are reviewed annually and/or after any operational changes, to ensure that the provisions remain appropriate for the activities undertaken.
- 2.1.3 Provide first aid materials, equipment and facilities according to the findings of the risk assessment.

### **2.2 The Headteacher**

- 2.2.1 Carry out an assessment of first aid needs appropriate to the circumstances of the workplace, review annually and/or after any significant changes.
- 2.2.2 Ensuring that an appropriate number of appointed persons and/or trained first aid personnel are present in the school at all times and that their names are prominently displayed throughout the school.
- 2.2.3 Ensuring that first aiders have an appropriate qualification, keep training up to date and remain competent to perform their role.
- 2.2.4 Ensuring all staff are aware of first aid procedures.
- 2.2.5 Ensuring appropriate risk assessments are completed and appropriate measures are put in place.
- 2.2.6 Undertaking, or ensuring that managers undertake, risk assessments, as appropriate, and that appropriate measures are put in place.
- 2.2.7 Ensuring that adequate space is available for catering to the medical needs of students.
- 2.2.8 Reporting specified incidents to the Health and Safety Executive (HSE), when necessary.

### **2.3 The Senior First Aider/Nurse/Healthcare Professional**

- 2.3.1 Ensure that children with medical conditions are identified and properly supported in the school, including supporting staff on implementing a child's Healthcare Plan.
- 2.3.2 Work with the Headteacher to determine the training needs of school staff.
- 2.3.3 Administer first aid and medicines in line with current training and the requirements of this policy.
- 2.3.4. Periodically check the contents of each first aid box and any associated first aid equipment (e.g. Defibrillators) and ensure these meet the minimum requirements, quantity and use by dates and arrange for replacement of any first aid supplies or equipment which has been used or are out of date.
- 2.3.5. Assist with completing an accident report forms and investigations.
- 2.3.6 Notify manager when going on leave to ensure continual cover is provided during absence.

### **2.4 Appointed person(s) and first aiders**

- 2.4.1 The appointed persons are responsible for:

- a) Taking charge when someone is injured or becomes ill
- b) Ensuring there is an adequate supply of medical materials in first aid kits, and replenishing the contents of these kits
- c) Ensuring that an ambulance or other professional medical help is summoned, when appropriate

2.4.2 First aiders are trained and qualified to carry out the role and are responsible for:

- a) Acting as first responders to any incidents; they will assess the situation where there is an injured or ill person, and provide immediate and appropriate treatment.
- b) Sending students home to recover, where necessary
- c) Filling in an accident report on the same day, or as soon as is reasonably practicable, after an incident.
- d) Keeping their contact details up to date.

## **2.5 Staff Trained to Administer Medicines**

2.5.1 Members of staff in the school who have been trained to administer medicines must ensure that:

- a) There is written parental permission outlining the type of medicine, dosage and the time the medicine needs to be given.
- b) Wherever possible, the student will administer their own medicine, under the supervision of a trained member of staff. In cases where this is not possible, the trained staff member will administer the medicine.
- c) If a child refuses to take their medication, staff will accept their decision and inform the parents accordingly.
- d) Records are kept of any medication given.

## **2.6 Other Staff**

2.6.1 Ensuring they follow first aid procedures.

2.6.2 Ensuring they know who the first aiders in school are and contact them straight away.

2.6.3 Completing accident reports for all incidents they attend to where a first aider is not called.

2.6.4 Informing the Headteacher or their manager of any specific health conditions or first aid needs.

# **3. Arrangements**

## **3.1 First Aid Boxes**

3.1.1 The first aid posts are located in:

- Medical Room
- The School Office
- All classrooms

## **3.2 Medication**

3.2.1. Students' medication is stored in:

- The Medical Room
- Classrooms (Auto-injectors only)

### **3.3 First Aid**

3.3.1. In the case of a student accident, the procedures are as follows:

- a) The member of staff on duty calls for a first aider; or if the child can walk, takes him/her to a first aid post and calls for a first aider.
- b) The first aider administers first aid and records details on Medical Tracker.
- c) If the child has had a bump on the head, they must be given a "bump on the head" note and the parents called.
- d) Full details of the accident are recorded on Medical Tracker.
- e) If the child has to be taken to hospital or the injury is 'work' related then the accident is reported to the Governing Body.
- f) If the incident is reportable under RIDDOR (Reporting of Injuries, Diseases & Dangerous Occurrences Regulations 2013), then as the employer the Governing Body will arrange for this to be done.

### **3.4 Insurance Arrangements**

3.4.1. Zurich Municipal Policy QLA-01E213-O133

### **3.5 Educational Visits**

3.5.1. In the case of a **residential visit**, the residential first aider will administer First Aid. Reports will be completed in accordance with procedures at the Residential Centre.

3.5.2. In the case of **day visits** a trained First Aider will carry a travel kit in case of need.

### **3.6 Administering Medicines**

3.6.1. Both Prescribed and Non-Prescribed / Over the Counter (OTC) medicines may be administered in school by a staff member. Before either medication can be administered the following actions must be completed.

#### **3.6.2. Prescribed Medicines**

- Parent / Carers must complete a Short-Term Individual Healthcare Plan for Prescribed medicines.
- A staff member will go through the procedures with both parents and children present.
- Where necessary appropriate training must be delivered by a healthcare professional.
- Wherever possible, the student will administer their own medicine, under the supervision of a member of staff. In cases where this is not possible, the staff member will administer the medicine.
- Staff will ensure that records are kept of any medication given.
- If a child refuses to take their medication, staff will accept their decision and inform the parents accordingly.

### **3.6.3. Non-Prescribed or Over the Counter (OTC) medicines**

- A Parental Consent Form for non-prescribed or Over the Counter (OTC) medicines must be completed.
- Non-Prescribed or Over the Counter (OTC) medicines cannot be administered for a maximum of 5 days.
- If the child needs to be given this medication for longer than 5 days then they will need to get the medication prescribed by a doctor.
- A staff member will go through the procedures with both parents and children present.
- Wherever possible, the student will administer their own medicine, under the supervision of a member of staff. In cases where this is not possible, the staff member will administer the medicine.
- Staff will ensure that records are kept of any medication given.
- If a child refuses to take their medication, staff will accept their decision and inform the parents accordingly.

### **3.6.4. Unlabelled Medication**

- If a parent comes in requesting for school to administer unlabelled medication to their child, then the parents will need to sign the school's consent form.
- The parent is required to get labelled medication for day 2 onwards.

NB: It is often possible to get a pharmacist to provide a label.

## **3.7 Storage/Disposal of Medicines**

- 3.7.1. Wherever possible, children will be allowed to carry their own medicines/ relevant devices or will be able to access their medicines in the school office for self-medication, quickly and easily. Children's medicine will not be locked away out of the child's access; this is especially important on school trips. It is the responsibility of the school to return medicines that are no longer required, to the parent for safe disposal.
- 3.7.2. Asthma inhalers will be held by the school for emergency use.

## **3.8 Accidents/Illnesses requiring Hospital Treatment**

- 3.8.1. If a student has an incident, which requires urgent or non-urgent hospital treatment, the school will be responsible for calling an ambulance in order for the child to receive treatment. When an ambulance has been arranged, a staff member will stay with the student until the parent arrives, or accompany a child taken to hospital by ambulance if required.
- 3.8.2. Parents will then be informed and arrangements made regarding where they should meet their child. It is vital therefore, that parents provide the school with up-to-date contact names and telephone numbers.

## **3.9 Defibrillators**

- 3.9.1. Defibrillators are available within the school as part of the first aid equipment. First aiders are trained in the use of defibrillators.



### **3.10 Students with Special Medical Needs – Individual Healthcare Plans**

3.10.1. Some children have medical conditions that, if not properly managed, could limit their access to education. These children may be:

- a) Epileptic
- b) Asthmatic
- c) Have severe allergies, which may result in anaphylactic shock
- d) Diabetic

Such children are regarded as having medical needs. Most children with medical needs are able to attend school regularly and, with support from the school, can take part in most school activities, unless evidence from a clinician/GP states that this is not possible.

3.10.2. The school will consider what reasonable adjustments they might make to enable children with medical needs to participate fully and safely on school visits. A risk assessment will be used to take account of any steps needed to ensure that children with medical conditions are included.

3.10.3. The school will not send children with medical needs home frequently or create unnecessary barriers to children participating in any aspect of school life. However, school staff may need to take extra care in supervising some activities to make sure that these children, and others, are not put at risk.

3.10.4. An individual long-term health care plan will help the school to identify the necessary safety measures to support children with medical needs and ensure that they are not put at risk. The school appreciates that children with the same medical condition do not necessarily require the same treatment.

3.10.5. Parents/carers have prime responsibility for their child's health and should provide the school with information about their child's medical condition. Parents, and the student if they are mature enough, should give details in conjunction with their child's GP and Paediatrician. The Senior First Aider/Nurse/Healthcare Professional may also provide additional background information and practical training for school staff.

3.10.6. Procedure that will be followed when the school is first notified of a student's medical condition:

- Parent / Carer meets with lead first aider
- Complete Health Care Plan
- Inform relevant staff
- Update Medical class list and display poster in relevant rooms.

This will be in place in time for the start of the relevant term for a new student starting at the school or no longer than two weeks after a new diagnosis or in the case of a new student moving to the school mid-term.

### **3.11 Accident Recording and Reporting**

3.11.1 First aid and accident record book

- a) An accident form will be completed, using Medical Tracker, by the relevant member of staff on the same day or as soon as possible after an incident resulting in an injury. A copy will be emailed to parents.
- b) As much detail as possible should be supplied when completing the accident form – which must be completed fully.
- c) A copy of the accident report form will also be added to the student's educational record, in Medical Tracker, by the relevant member of staff.

- d) Records held in the first aid and accident book will be retained by the school for a minimum of 3 years, in accordance with regulation 25 of the Social Security (Claims and Payments) Regulations 1979, and then securely disposed of.

#### 3.11.2 Reporting to the HSE

- a) The school will keep a record of any accident which results in a reportable injury, disease, or dangerous occurrence as defined in the RIDDOR 2013 legislation (regulations 4, 5, 6 and 7).
- b) The Headteacher will report these to the Health and Safety Executive as soon as is reasonably practicable and in any event within 15 days of the incident. Reportable injuries, diseases or dangerous occurrences include:
  - Death
  - Specified injuries, which are:
    - Fractures, other than to fingers, thumbs and toes
    - Amputations
    - Any injury likely to lead to permanent loss of sight or reduction in sight
    - Any crush injury to the head or torso causing damage to the brain or internal organs
    - Serious burns (including scalding)
    - Any scalping requiring hospital treatment
    - Any loss of consciousness caused by head injury or asphyxia
    - Any other injury arising from working in an enclosed space which leads to hypothermia or heat-induced illness, or requires resuscitation or admittance to hospital for more than 24 hours
    - Injuries where an employee is away from work or unable to perform their normal work duties for more than 7 consecutive days (not including the day of the incident).
  - Where an accident leads to someone being taken to hospital
  - Near-miss events that do not result in an injury, but could have done. Examples of near-miss events include, but are not limited to:
    - The collapse or failure of load-bearing parts of lifts and lifting equipment.
    - The accidental release of a biological agent likely to cause severe human illness.
    - The accidental release or escape of any substance that may cause a serious injury or damage to health.
    - An electrical short circuit or overload causing a fire or explosion.
- c) Information on how to make a RIDDOR report is available here:  
<http://www.hse.gov.uk/riddor/report.htm>

#### 3.11.3 Notifying parents

The first aider who has administered the first aid check will inform parent/carer of any accident or injury sustained by the student, and any first aid treatment given, on the same day.

#### 3.11.4 Reporting to Ofsted and child protection agencies

- a) The Headteacher will notify Ofsted of any serious accident, illness or injury to, or death of, a student while in the school care. This will happen as soon as is reasonably practicable, and no later than 14 days after the incident.
- b) The Headteacher will also notify the relevant Local Authority of any serious accident or injury to, or the death of, a student while in the school care.

#### **4. Conclusions**

- 4.1 This First Aid and Medicine policy reflects the school's serious intent to accept its responsibilities in all matters relating to management of first aid and the administration of medicines. The clear lines of responsibility and organisation describe the arrangements which are in place to implement all aspects of this policy.
- 4.2 The storage, organisation and administration of first aid and medicines provision is taken very seriously. The school carries out regular reviews to check the systems in place meet the objectives of this policy.

## Appendix 1 - Contacting Emergency Services

### Request for an Ambulance

Dial 999, ask for ambulance and be ready with the following information:

1. Your telephone number:

---

2. Give your location as follows (*insert **school** address*)

---

---

---

3. State that the postcode is:

---

4. Give exact location in the **school** (insert brief description)

---

---

---

5. Give your name: 

---

6. Give name of child and a brief description of child's symptoms

---

---

---

7. Inform Ambulance Control of the best entrance and state that the crew will be met and taken to the casualty

**Speak clearly and slowly and be ready to repeat information if asked**

Put a completed copy of this form by the telephone.

## Appendix 2

# Long Term Care Plan Form

Student's name

Medical condition

Is this an ongoing condition?

- ☐ Yes  
☐ No

Medication name(s)

Dosage of medication(s)

1. Medication use time (if applicable)

2. Medication use time (if applicable)

3. Medication use time (if applicable)

Self administration

- ☐ Yes  
☐ No

Date medication(s) dispensed by pharmacy

Medication expiry date(s)

Special precautions

*EXAMPLE: Medication should be taken  
before/ after lunch.*

Student's condition and individual symptoms

Daily care requirements

Procedures to take in an emergency

Follow up care (if applicable)

GP Details/ medical professionals working with your child

--

Additional information (if needed)

--

Using the information provided we will create a long term care plan for your child. We will let you know when this is ready to be reviewed and authorised by you.

DETAILS OF PERSON COMPLETING THIS FORM:

Name

--

Date

--

Email address

--

Signed

--

---

OFFICE USE ONLY: RECORDED ON MEDICAL TRACKER: ☐

## Appendix 3

### Short Term Medication Administration Form

Student's Name

Medical condition

Medication name

Last date medication needs to be taken

Dosage of medication

1. Medication use time

2. Medication use time (if applicable)

3. Medication use time (if applicable)

Self administration

☐ Yes

☐ No

Date medication dispensed by pharmacy

Special precautions

EXAMPLE: Medication should be taken  
before/ after lunch.

Procedures to take in an emergency  
(if applicable)

DETAILS OF PERSON COMPLETING THIS FORM:

Name

Date

Email address

Signed

---

OFFICE USE ONLY: RECORDED ON MEDICAL TRACKER: ☐

## Appendix 4 Parental Consent for Administration of Over the Counter Medication

1. Name of School

2. Details of pupil

Name		Date of birth		Boy / Girl	
------	--	---------------	--	------------	--

### 1. Medical Information

1.1. Any conditions requiring medical treatment including medication

Please give brief details. Include asthma, diabetes, heart trouble, travel sickness, epilepsy, migraine or other information which may help those who will be caring for your child.

1.2. Details of any medication known to be required during the visit

Medicine				
Dosage		Frequency		

1.3. Details of any allergies

To medicines	
To foodstuffs	
Others	

1.4. Other relevant information

Please give details of recent illnesses or injuries which you consider relevant or information which could be useful to those caring for your child.

--

1.5. Doctors contact details

This is only for emergency and your family doctor will not normally be contacted without your knowledge.

--

### 2. Other information

Please give any other information which you think might be helpful to those who will be caring for your child.

--



### 3. Declaration

I hereby give consent for ..... (name of child) to be in receipt of the medication detailed above, for the maximum of five days only.

Signed ..... Date .....

Print Name ..... (Parent / Carer)

#### CONTACT DETAILS:

Daytime Telephone Number:	
Address:	

Thank you

Child's Name .....

Date	Time	Name of Medication	Dosage	Staff Administering

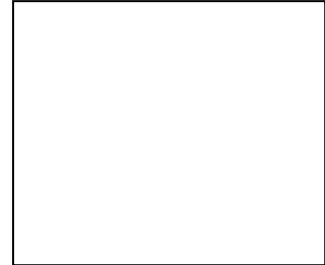
## Appendix 5 - EpiPen®: Emergency Instructions

### EpiPen®: EMERGENCY INSTRUCTIONS FOR AN ALLERGIC REACTION

Child's Name: \_\_\_\_\_

DOB: \_\_\_\_\_

Allergic to: \_\_\_\_\_



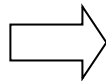
#### ASSESS THE SITUATION

Send someone to get the emergency kit, which is kept in:

**IT IS IMPORTANT TO REALISE THAT THE STAGES DESCRIBED BELOW MAY MERGE INTO EACH OTHER RAPIDLY AS A REACTION DEVELOPS**

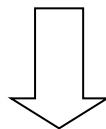
#### **MILD REACTION**

- Generalised itching
- Mild swelling of lips or face
- Feeling unwell/Nausea
- Vomiting



#### **SEVERE REACTION**

- Difficulty breathing/choking/coughing
- Severe swelling of lips/eyes/face
- Pale/floppy
- Collapsed/unconscious



#### **ACTION**

- Give \_\_\_\_\_ (Antihistamine) immediately
- Monitor child until you are happy he/she has returned to normal.
- If symptoms worsen see –

## **ACTIONS**

1. Get \_\_\_\_\_ EpiPen® out and send someone to telephone 999 and tell the operator that the child is having an

### **'ANAPHYLACTIC REACTION'**

2. Sit or lay child on floor.
3. Take EpiPen® and remove grey safety cap.
4. Hold EpiPen® approximately 10cm away from outer thigh.
5. Swing and jab black tip of EpiPen® firmly into outer thigh. MAKE SURE A CLICK IS HEARD AND HOLD IN PLACE FOR 10 SECONDS.
6. Remain with the child until ambulance arrives.
7. Place used EpiPen® into container without touching the needle.
8. Contact parent/carer as overleaf.

## Appendix 6 - STAFF TRAINING RECORD

Name	Job Title	Location	Name of Training Course	Date Undertaken	Date Refresher Required
Sukhdeep Bains	Teaching Assistant	Upper School	Emergency First Aid at Work	2 Nov 2020	2 Nov 2023
Amber Boggust	Teaching Assistant	Lower School	Emergency First Aid at Work	7 Mar 2022	7 Mar 2025
Jazz Bonaparte	Playworker	Lower School	Paediatric	27 January 2023	27 January 2026
Barbara Bolli	Nursery Nurse	Nursery	Paediatric First Aid	15 Oct 2021	15 Oct 2024
Samantha Bowden	Teaching Assistant	Upper School	Emergency First Aid at Work Level 3	18 June 2021	18 June 2024
Dominic Glyn Burgess	Head of Kitchen	Kitchen	Emergency First Aid at Work	6 Oct 2022	6 Oct 2024
Fiona Beaumont	Class Teacher	Nursery	Forest School First Aid	12 March 2020	12 March 2023
Rose Bwogi	Teaching Assistant	Lower School	First Aid at Work	4 Sept 2020	4 Sept 2023
Natasha Crabbe	Class Teacher	Lower School	Forest School First Aid	12 March 2020	12 March 2023
Michelle Brooms	Teaching Assistant	Lower School	First Aid at Work	20 Sep 2021	20 Sep 2024
Siobhan Donoghue	HLTA	Lower School	Emergency First Aid	04 Sept 2020	04 Sept 2023
Eleanor Dunn	Teaching Assistant	Nursery	Emergency First Aid	04 Sept 2020	04 Sept 2023
Milagros Dominguez	SMSA	Nursery	Emergency First Aid	04 Sept 2020	04 Sept 2023
Wendy Fitt	Pastoral Manager	Lower School	Emergency First Aid at Work	14 July 2022	14 July 2025
Claddy Eagles	Teaching Assistant	Upper School	First Aid at Work	4 Sept 2020	4 Sept 2023
Sharon Hodson	Forest School Lead	Eco Room	Forest School First Aid	12 Mar 2020	12 Mar 2023

			Paediatric First Aid	22 Nov 2023	22 Nov 2023
Amanda Hodson	SMSA	Canteen	Paediatric First Aid	27 Jan 2023	27 Jan 2025
Deborah Jones	HLTA	Upper School	Paediatric First Aid	18 June 2021	18 June 2024
Helen Lynch	Teaching Assistant / Learning Mentor	Lower School	Emergency First Aid	23 May 2022	23 May 2025
Michael Lovell	Site Manager	Upper School	Emergency First Aid at Work	12 May 2021	12 May 2024
Luiza Pereira	Teaching Assistant	Upper School	First Aid at Work	4 May 2021	4 May 2024
Rani Khanom	Teaching Assistant	Lower School	Emergency First Aid	4 Sept 2020	4 Sept 2023
Pinkal Limbochia	Teaching Assistant	Lower School	Emergency First Aid	26 Sept 2022	26 Sept 2025
Deborah Lamizdin	Nursery Nurse	Lower School	Paediatric	28 Feb 2020	28 Feb 2023
Ekaterina Shirokova	Teaching Assistant	Lower School	Emergency First Aid	4 Sep 2020	4 Sept 2023
Kata Torma	Teaching Assistant	Upper School	Emergency First Aid	10 Oct 2022	10 Oct 2025
Kaur Bains Pawandeep	Teaching Assistant	Lower School	Emergency First Aid	4 Sep 2020	4 Sept 2023
Jeannie McTavish	Music Teacher	Upper School	Emergency First Aid	4 Sept 2020	4 Sept 2023
Grace O'Donovan	SMSA	Playgrounds	Emergency First Aid	02 Nov 2020	02 Nov 2023
Cathie Neal	Teaching Assistant	Lower School	Paediatric	27 Jan 2023	27 Jan 2025
Deepmala Singh	Kitchen Assistant/ASC	Kitchen	Paediatric First Aid	8 Oct 2022	8 Oct 2024
Daniella Scott	Kitchen Assistant/ASC	Kitchen	Emergency First Aid	11 Nov 2022	11 Nov 2024

Ippolyti Soultani	Teaching Assistant / ASC Manager	Lower School	Emergency First Aid	14 May 2021	14 May 2024
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## Further Guidance

Further guidance can be obtained from organisations such as the Health and Safety Executive (HSE) or Judicium Education. The H&S lead in the school will keep under review to ensure links are current.

- HSE  
<https://www.hse.gov.uk/>
- The Health and Safety (First-Aid) Regulations 1981  
<https://www.legislation.gov.uk/ukxi/1981/917/regulation/3/made>
- Department for Education and Skills  
[www.dfes.gov.uk](http://www.dfes.gov.uk)
- Department of Health  
[www.dh.gov.uk](http://www.dh.gov.uk)
- Disability Rights Commission (DRC)  
[www.drc.org.uk](http://www.drc.org.uk)
- Health Education Trust  
<https://healtheducationtrust.org.uk/>
- Council for Disabled Children  
[www.ncb.org.uk/cdc](http://www.ncb.org.uk/cdc)
- Contact a Family  
[www.cafamily.org.uk](http://www.cafamily.org.uk)

## Resources for Specific Conditions

- Allergy UK  
<https://www.allergyuk.org/>  
<https://www.allergyuk.org/information-and-advice/for-schools>
- The Anaphylaxis Campaign  
[www.anaphylaxis.org.uk](http://www.anaphylaxis.org.uk)
- SHINE - Spina Bifida and Hydrocephalus  
[www.shinecharity.org.uk](http://www.shinecharity.org.uk)
- Asthma UK (formerly the National Asthma Campaign)  
[www.asthma.org.uk](http://www.asthma.org.uk)
- Cystic Fibrosis Trust  
[www.cftrust.org.uk](http://www.cftrust.org.uk)
- Diabetes UK  
[www.diabetes.org.uk](http://www.diabetes.org.uk)
- Epilepsy Action  
[www.epilepsy.org.uk](http://www.epilepsy.org.uk)
- National Society for Epilepsy  
[www.epilepsysociety.org.uk](http://www.epilepsysociety.org.uk)
- Hyperactive Children's Support Group  
[www.hacsg.org.uk](http://www.hacsg.org.uk)

- MENCAP  
[www.mencap.org.uk](http://www.mencap.org.uk)
- National Eczema Society  
[www.eczema.org](http://www.eczema.org)
- Psoriasis Association  
[www.psoriasis-association.org.uk/](http://www.psoriasis-association.org.uk/)