Medicine Management, Allergies

and PSHE Education

Professionals' Pack

2025

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Introduction

This pack aims to support education providers to deliver quality PSHE education around Medicine Management and Allergies through identifying the curriculum links within the PSHE Associations' Spiral Curriculum and the Department for Education's statutory guidance and developing staff's confidence and competence on the subject matter to support them to facilitate PSHE education on this topic within their own setting.

The Department for Education's statutory guidance states that:

- Pupils can also put knowledge into practice as they develop the capacity to make sound decisions when facing risks, challenges and complex contexts.
- Schools should show flexibility to respond to local public health and community issues to meet the needs of pupils
- Should be addressed sensitively and clearly

Children and young people need to be taught to make safe and informed choices, identify and manage risks and consider strategies for keeping themselves and others safe and well.

Local Quality Framework

We believe that for PSHE education to be effective it must:

- Be delivered in a safe learning environment based on the principles that prejudice, discrimination and bullying are harmful and unacceptable.
- Have clear learning objectives and outcomes and ensure sessions and programmes are well planned, resourced and appropriately underpinned by solid research and evidence.
- Be relevant, accurate and factual, including using the correct terminology.
- Be positively inclusive in terms of:
  - Age
  - Gender Identity
  - Race
  - Sex
  - Disability
  - Pregnancy and Maternity
  - Religion or Belief
  - Sexual Orientation
- Designed to include the development of knowledge, skills and values to support positive life choices.
- Use positive messaging, that does not cause shame or victim blaming.
- Challenge attitudes and values within society, such as perceived social norms and those portrayed in the media.
- Be reflective of the age and stage of the children and young people and be tailored to the environment and group.
- Utilise active skill-based learning techniques to encourage active participation.
- Ensure that children and young people are aware of their rights, including their right to access confidential advice and support services within the boundaries of safeguarding.
- Be delivered by trained, confident and competent professionals.
- Empower and involve children and young people as participants, advocates and evaluators in the development of PSHE education.

Safe Learning Environment

A safe learning environment enables children and young people to feel comfortable to share their ideas without attracting negative feedback. It avoids possible distress and prevents disclosures in a public setting and enables professionals to manage conversations on sensitive issues confidently.

We have created a guidance document to support professionals to create this safe in their own setting.

No. 01 — Ground Rules

Create in collaboration with the group . As the facilitator role model the agreed ground rules.

No. 02 — Collaborate with DSL

Let them know when the session is being delivered to ensure the correct support is in place should any disclosures be made.

No. 03 — Staff Confidence

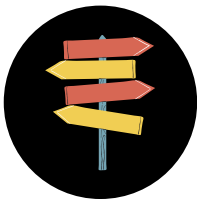
Check Staff confidence levels. If anyone is in panic zone it is not safe or appropriate for them or the participants to teach on the topic. This pack should help professionals to move from panic zone to learning or comfort zone

No. 04 Learning Techniques

~~Us~~e scenarios and stories to help participants engage with the topic. Refer to the third person rather than you e.g. what could this character do?, or people of about your age....

No. 05 — Difficult Questions

Questions are an important part of learning. Sometimes a child or young person will ask a difficult question. As with all questions the first thing is to value the question whilst either allowing time to consider an appropriate answer or to deflect an inappropriate question.



No. 06 — Signposting

It is absolutely essential, that included in the lesson, is information about different organisations and people that can provide support both within the organisation and outside of it.

A more detailed version of this page is available by emailing either Natalie or Ellie

Best Practice Principles

Do not use scare/fear or guilt tactics

It is a common misconception that if a child or young person is shocked or scared by what they see in images, videos used in sessions, they will avoid the behaviour in the future.

Whilst young people will often say that they like 'hard-hitting' material and that it engages them more effectively, in fact when experienced in a safe setting (in this case a classroom or youth space), shocking images become exciting (in a similar way to watching a horror film or riding a rollercoaster) and this excitement response can block the desired learning. Equally, for anyone who has previously been affected by something similar, it can re-traumatise them or they can block the message as it is too close for comfort, which again prevents the intended learning. It also presents a scenario which is more likely to make young people think 'that won't ever happen to me' than the desired 'that could be me' response.

The adolescent brain is still developing which means that the perception of messaging and how they react to them is different to our experiences as adults. Furthermore, because their brains are still developing, they often live "in the moment;" when an unhealthy situation arises, they'll make decisions based on what they're feeling then and there, instead of making a reasoned, logical decision.
The pre-frontal cortex or critical thinking/reasoning part of the brain is the last section to develop.

You can find out more about the teenage brain here.

Young people should be informed of risks in a balance and measured way through an approach that supports them to make informed, healthy, safe decisions and empower them to believe they can act on "good choices.

Top Tips:

- Evidence shows that shock and scare tactics just don't work.
- Check resources (including external agencies) for images or scenes that might be shocking, harrowing or scary for the age group – remember that children and young people will have a much lower threshold for what might worry them.
- Remember the purpose of the session is to educate not entertain. Just because young people might watch scary films in their own time, does not mean using similar films within PSHE Education will promote learning.
- Make sure there is a range of examples, case studies and consequences, most of which do not focus on the most dramatic or extreme outcomes.

Best Practice Principles

Knowledge, Skills and Values

Topics explored in PSHE education, relate directly to a child's or young person's life, when they might find themselves in a tricky situation or "crunch" moment – and need to make a quick decision; for example, a child who is dared to run across the road by their friends, or a teenager who is being pressured to start a fire. They will need to recall learning from PSHE education at that moment to help them make a decision.

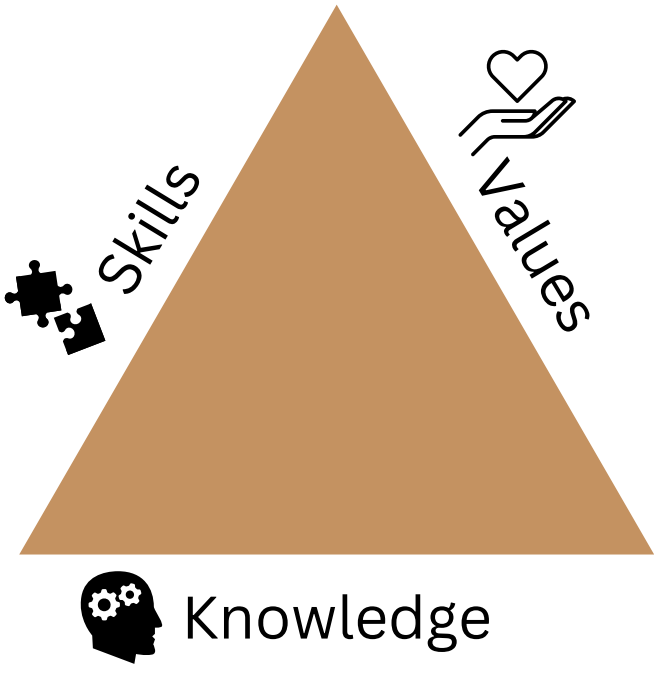
They will, of course, require knowledge e.g., of the legality (or not) of their actions. However, in order to make a safe decision in the moment, they will also need skills to negotiate with their peers to resist pressure from others, to exit the situation (if they choose to) and access appropriate help or support if necessary. They will need a strong sense of their own values, to make the right decision and the confidence to stick to it.

Knowledge on its own won't necessarily stop someone from trying things. In many cases young people end up in situations where they know what they are doing is "wrong", but they do it anyway, as they lack the essential skills or attributes to help them effectively manage the situation.

To ensure that sessions are balanced it is important to know the purpose of the activity and create a balanced session that increases or enables reflection on knowledge, skills and values.

The definition of each of these is:

Knowledge: gaining new information on a topic
Skills: gaining new skills on a topic
Values: reflecting on, and potentially altering, your own values in relation to a topic



Trauma Informed Approach

Being Trauma-Informed

It is important to be aware of the risks of educative interventions, if not delivered carefully. PSHE resources - when used with children and young people who have been affected by the topic being covered - can re-traumatise children and young people or induce vicarious trauma - this is defined as the feelings of trauma experienced by a third party when witnessing or engaging with the harm or trauma of another (Eaton, 2017).

The National Youth Agency provides a free e-learning course to help professionals gain a greater understanding of trauma and how it affects mental and emotional wellbeing. The module provides tools and reflection space for professionals to enable them to better support young people in this area.

You can access the course here - you will need to create a Youth Work One account to be able to access the course.

Top Tips

- Do not use resources that include graphic images, victim blaming or scenes of abuse.
- Ensure that the work is part of a planned, sequential curriculum that builds on prior knowledge.
- Work with your pastoral team to understand if there is anyone who could be affected by this scheme of work. Ask the individuals if they want to be included in the class or if they would prefer to do some other work - explain there will be no explanation given to their absence.
- Use resources only within class-sized groups and not within assemblies.
- Ensure that a trigger/content warning is given beforehand.
- Ensure there is plenty of time for class-based discussions and signposting and that children/young people do not move onto a different topic/lesson before having time to debrief.
- When exploring themes with the participants do not ask “what could x have done to not be a victim of...” or “what signs should they have spotted” this encourages victim-blaming and abuse is never the fault of the child or young person.
- Use distancing techniques - Avoid questions or activities which encourage students to consider their personal experiences, or ask them to put themselves in a particular situation. It it more appropriate to ask “how do you think x is feeling?” or “how would you feel if x was your friend?” . This help to develop skills of emotional literacy and empathy. You could also ask young people to imagine the response of “a young person, about your age who goes to school around here”
- How can you make it easy for participants to leave the room and communicate this in advance?
- How will you ensure parents/carers have information about this scheme of work to support it within the home?
- You might want to consider a Disassociation Game to close the session. This is a quick, light-hearted, unrelated activity following the plenary on learning from the session. The purpose of this is to help students emotionally detach themselves from the content of the session before they leave.

Tips for Communication

Communication difficulties

Special provision should be put in place to support conversations with children, young people or adult learners who:

- have communication difficulties
- are too young
- are unable to communicate
- cannot or will not explain

You should refer to the child, young person or adult learner's behaviour plan and the information available from any assessments. This may include visual cues to help facilitate discussion, such as picture exchange communication cards.

Mencap has published further information on communicating with people with learning difficulties.

The National Autistic Society has also published tips to communicate more effectively with an autistic person.

Links to PSHE Curriculum

The table below shows the learning opportunities from the relevant PSHE Association core themes which can be linked to Medicine Management and Allergies.

Primary

PSHE Association

Key Stage 1

H1	About what keeping healthy means; different ways to keep healthy
H6	That medicines (including vaccinations and immunisations and those that support allergic reactions) can help people to stay healthy
H31	That household products (including medicines) can be harmful if not used correctly

Key Stage 2

H10	How medicines, when used responsibly, contribute to health; that some diseases can be prevented by vaccinations and immunisations; how allergies can be managed

DfE Statutory Guidance:

By the end of Primary pupils will know:

HP5	About personal hygiene and germs including bacteria, viruses, how they are spread and treated, and the importance of handwashing.
HP6	The facts and science relating to allergies, immunisation and vaccination.
FA1	How to make a clear and efficient call to emergency services if necessary.

SEND

PSHE Association

HL3 - Keeping Well

Foundation	Recognise that we may be given medicines to help us get better and that these will be given to us by a nurse or doctor (or by our parent/carer looking after us)
Core	• Identify medication that can help people to keep well; give examples of when this might be used. • Identify the difference between things that go on our body (creams, lotions) and things that go in our bodies (injections, tablets, liquid medicine). • Identify some substances or chemicals around the home that we should never taste or swallow; and where we might come across them
Development	• Recognise that people sometimes need to take medicines in different forms, including tablets, injections, inhalers • Explain why it is important not to touch, taste or take medicines without a trusted adult being with us. • Explain why we should never take someone else's medication
Enrichment	• Recognise and give examples of the difference between someone who can give us medicines/ drugs (e.g. doctors, nurses, pharmacists) and someone who cannot (e.g. our friends). • Describe that sometimes we may be given an injection by a doctor or nurse to help to prevent us from catching a disease (vaccination). • Explain why we should not accept medicines/ drugs from anyone (unless a responsible/ qualified person has given it to them for us, e.g. our parents/carers/trusted adults)
Enhancement	• Give reasons why there are rules about what we can and should not put inside our bodies; and explain what these are. • Identify some possible side effects of substances that are not meant for children to consume (e.g. alcohol). • Explain that no-one should ever make us, or try and persuade us to drink alcohol, smoke, taste or swallow anything we are not sure is safe or that is against our wishes, and that we have a right to say no

Secondary

PSHE Association

Key Stage 3

H23	The positive and negative uses of drugs in society including the safe use of prescribed and over the counter medicines; responsible use of antibiotics
H26	Information about alcohol, nicotine and other legal and illegal substances, including the short-term and long-term health risks associated with their use
H28	The law relating to the supply, use and misuse of legal and illegal substances
H29	About the concepts of dependence and addiction including awareness of help to overcome addictions

Key Stage 5

H9	To consistently access reliable sources of information and evaluate media messages about health

DfE Statutory Guidance:

By the end of Secondary pupils will know:

HP1	about personal hygiene, germs including bacteria, viruses, how they are spread, treatment and prevention of infection, and about antibiotics.

PSHE Association

HL6 - Medicinal Drugs

Foundation	Recognise what is meant by a ‘medicine’.
Core	Identify the difference between over the counter medicines and those prescribed by a doctor.
Development	• Identify some examples of over the counter medicines. • Describe how medicines, when used responsibly can help us to take care of our health (e.g. painkillers when we have a headache).
Enrichment	Recognise the importance of taking over the counter and prescribed medicines correctly.
Enhancement	Explain that all drugs can have risks to health, even if they are legal or have been prescribed

NYA Youth Work Curriculum:

HW4	Making appropriate support and services accessible when necessary
HW5	Providing appropriate, accurate information and guidance

Useful Resources

Please check all resources are suitable for your settings and children before use

Medicine Management & Allergies

Videos:

BBC Bitesize - What are Medicines and Drugs?
To understand how vaccines work, it helps to look first at how the immune system works. This short animation explains how vaccines enable the body to make the right sort of antibodies to fight a particular disease.

Lesson Plans:

UK Health Security Agency - ages 3-16
Resources to support children and young people to learn about microbes, infections prevention and control, antibiotics and vaccinations. e-Learning is also available to improve knowledge and confidence around teaching e-Bug topics.

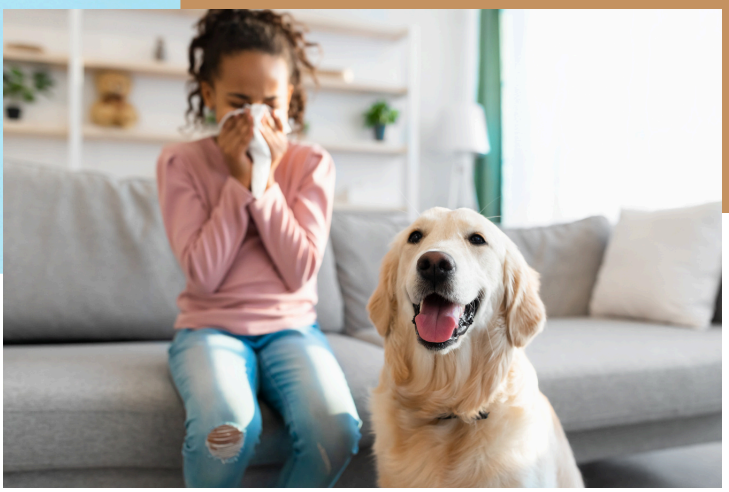
PSHE Hub- Connex Academy - Dog, Duck and Cat - ages 6-8
Help! - Using the characters of Dog, Duck and Cat lesson two of a five part series helps children to explore how they would know if they were getting ill, what germs, bacteria and allergies are, how to prevent illness and about what immunisation is through the use of an electronic storybook for you to read or a story video for you to play.

PSHE Hub - Connex Academy - Ant & Us - ages 10-11
How Can Humans Stay Healthy and Well? - Lesson two of six that helps children to understand how they would know if they were getting ill, what germs, bacteria and allergies are, how to prevent illnesses and what immunisation is. Uses 'Ant Asks' questions, in the form of animations, to direct children to carry out research as part of a series of lessons on a particular subject. They can then answer Ant's question, but also they learn the information for them.

Training:

Department for Education - for professionals
Practical training materials for primary and secondary schools to use to train staff to teach about health and prevention including immunisation and vaccination.

DEVELOPING SUBJECT KNOWLEDGE



MEDICINE MANAGEMENT & ALLERGIES

What is Medicine?

Medicine refers to a substance that helps people to feel better when they are sick or hurt or is used to prevent someone from becoming sick. It can be a pill, a liquid or cream that someone puts on their skin. Some medicine is given by a health professional through a prescription, other can be bought over the counter at a shop.

Over the Counter Medicine is medicine that someone can buy at a shop without the need for a prescription from a health professional. These medicines help people to feel better and are safe to use when the instructions on the package are followed.

Prescription-only Medicine is a special medicine that can only be obtained from a prescription from a health professional, this could be a doctor, nurse, paramedic, or pharmacist. The prescriber will ensure it is the right medicine to help a person get better when they are sick. Medicine that is prescribed for children and young people is free.

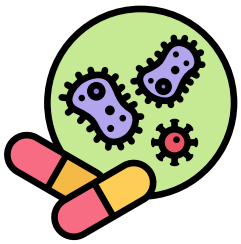
Legal Medications are approved and regulated by government agencies, in the UK this is by the Medicines & Healthcare Products Regulatory Agency (MHRA). They undergo rigorous testing for safety, efficacy and quality (see page 22 for more details).

Illegal Medications are not approved for medical use and are banned for their high potential for abuse, addiction, and harm. They are often used recreationally or illicitly, without medical supervision. Examples of illegal medications would be heroin, cocaine and methamphetamine.

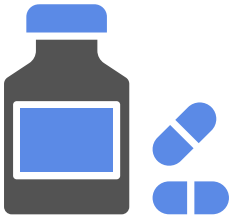
The legality of certain substances can vary by region. For instance, cannabis is legal for medicinal or recreational use in some places, for example, some states in the USA, but remains illegal in others for example the UK.

Types of Medicines

Here are some common types of medications that are used to either help people to feel better or to prevent them from becoming poorly:



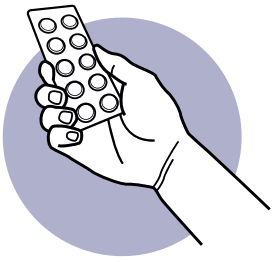
Antibiotics are used to treat bacterial infections such as meningitis, tuberculosis, and pneumonia. They do not work on viruses, so antibiotics cannot treat viral infections such as colds and flu. Antibiotics work by targeting structures unique to bacteria; thereby they do not cause damage to human cells, and they do not kill viruses. They are usually only available with a prescription.



Antiviral treatment stops the virus multiplying in cells and therefore stops the virus multiplying in the body, this helps the person with the virus to fight the infection, ease the symptoms and shorten the length of a viral infection. Antivirals also lower the risk of spreading viruses that cause herpes and HIV. Only available with a prescription.

Antifungal medicals are used to treat fungal infections, which most commonly affect the skin, hair and nails. Some antifungal medicines can be bought from a pharmacy without a prescription.

Antifungal medicines work by either killing the fungus or preventing the fungus from growing.



Analgesics are used to relieve pain, examples include paracetamol and ibuprofen. These are available over the counter for short-term use. For longer term use they are usually prescribed. Non-steroidal anti-inflammatory drugs (NSAIDs) are a type of analgesic that are widely used to relieve pain, reduce inflammation, and bring down a high temperature.

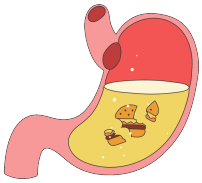
Steroids are a type of anti-inflammatory medicines used to treat a range of conditions. Different from anabolic steroids, which are often used illegally by some people to increase their muscle mass.

Antihistamines are used to relieve allergy symptoms, examples include loratadine and cetirizine. Most antihistamines can be bought from pharmacies and shops, but some are only available on prescription.

Antacids are used to relieve indigestion and heartburn by neutralising stomach acid. Examples include calcium carbonate and magnesium hydroxide. They come as a liquid or chewable tablets and can be bought from pharmacies and shops without a prescription. If people need to take antacids regularly they should speak with a health professional.

Beta-blockers are used to reduce blood pressure by blocking the effects of adrenaline. Examples include metroprolol and atenolol. They are prescription-only medicines, which means they can only be prescribed by a GP or another suitably qualified healthcare professional.

ACE Inhibitors are used to lower blood pressure by relaxing blood vessels. Examples include lininopril and enalapil. They are a prescription-only medicine.

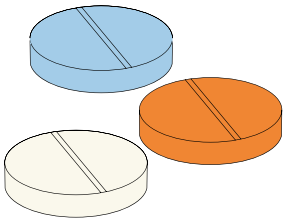


Proton Pump Inhibitors (PPIs) reduce stomach acid production. Examples include omeprazole and esomeprazole.

Benzodiazepines are used to treat anxiety and insomnia. Examples include diazepam and lorazepam.

Forms of Medicines

There are many different ways medicine can get into the body.



Tablets - these are solid forum that are swallowed. Some are dissolved in water (soluble tablets). They may need to be taken before, after or with food so it is important to read the instructions,

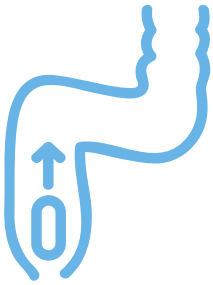
Capsules- these contain medicine in a plastic shell that dissolves in the stomach. They may need to be taken before, after or with food so it is important to read the instructions.

Liquids- medicine combined with a liquid to make it easier to swallow, often called syrups or solutions. They may need to be taken before, after or with food so it is important to read the instructions.

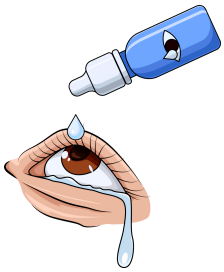
Topical Medicine - Creams, lotions, or ointments applied directly to the skin.

Inhalers - Delivers medicines directly to the lungs, commonly used for asthma.

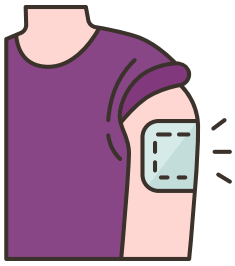
Injections- Administered with a needle, can be subcutaneous (under the skin), intramuscular (into a muscle), or intravenous (into a vein).



Suppositories are medicine that is combined with another substance and pressed into a "bullet shape" so it can be inserted into the bottom. Suppositories must not be swallowed.



Drops are often used when the active part of the medicine works best if it reaches the affected area directly. They tend to be used for eye, ear or nose.



Implants or Patches enable the medicine to be absorbed through the skin, such as nicotine patches for help in giving up smoking or contraception patches or the contraceptive implant.

Tablets you don't swallow (known as buccal or sublingal tablets or liquids. These look like other tablets or liquids, but they are not swallowed. Buccal medicines are held in the cheek so the mouth lining absorbs the active ingredient. Subligual medicines work in the same way but are put underneath the tongue. Buccal and sublingual medicines tend only to be given in very specific circumstances.

Safety of Medicines

No medicine is completely risk free, but the Medicines & Healthcare products Regulatory Agency (MHRA) tries to ensure any medicine approved for treating people in the UK is as safe as possible.

Medicines continue to be carefully regulated after they've been licensed. This involves checking for problems and previously unknown side effects.

In rare cases, medicines may be withdrawn if there are serious safety concerns or the risks of the medicines outweigh the benefits.

People can help the MHRA monitor the safety of medicines by reporting any suspected side effects to the Yellow Card Scheme.

To help ensure medicines are safe there are different ways they can be obtained.

Some medicines for minor illnesses can be purchased over the counter without a prescription, allowing people to treat themselves without needing to see a GP. For example, simple painkillers and cough remedies can be bought directly from supermarkets and other stores.

Other types of medicine, such as eyedrops or emergency contraception, are available without a prescription but require a pharmacist's supervision. These are only available from behind the pharmacy counter, and the pharmacist may ask questions to ensure the medicine is suitable.

Prescription-only medicines, such as antibiotics, must be prescribed by a qualified health professional. This could be a GP, hospital doctor, dentist, nurse, pharmacist, optometrist, physiotherapist, podiatrist, paramedic, or therapeutic radiographer.

Buying Medicine Online

Medicines can also be bought online. If people choose to do this they should be very careful, as many websites sell fake medicine. Many websites selling medicines are not registered as pharmacies, so buying from them is potentially unsafe. Medicine from an unregistered website could be dangerous to your health because it might be out of date, diluted or fake, or may not be suitable for you.

It's best for someone to see their GP before buying medicines online as they know the person's medical history and can advise whether the medicine would be suitable.

If someone chooses to buy medicines online, ensure that:

- any online pharmacy is registered with the General Pharmaceutical Council (GPhC)
- any online doctor service is registered with the Care Quality Commission (CQC) and the General Medical Council (GMC).

Brand names vs Generics

Many medicines have at least 2 different names:

- The brand name - created by the pharmaceutical company that made the medicine.
- The generic name - the name of the active ingredient in the medicine.

For example, sildenafil is the generic name of a medicine used to treat erectile dysfunction. But the company that makes sildenafil, Pfizer, sells it under the brand name Viagra.

Companies take out exclusive rights called patents on each new medicine they discover. If a company has a patent on a medicine, only that company can market it under their brand name once it's been granted a licence.

Once the patent expires, other manufacturers can market generic versions. The generic versions will be the same as the branded medicine because they contain the same active ingredients.

They are used more often by the NHS because they're just as effective but cost far less. It's similar to buying branded goods or a supermarket's own label – the supermarket's version is usually cheaper.

Creating a New Medicine

Licensed medicines

Before any new medicine can be used to treat people in the UK, it goes through a strictly monitored development process.

This involves researching the medicine in the lab and testing it in clinical trials. After passing the clinical trials, a licence will be granted before it can be made available for wider use.

Read more about clinical trials.

Licences are only granted if strict safety and quality standards are met. In the UK, licences are granted by the Medicines and Healthcare products Regulatory Agency (MHRA).

Licences confirm the health condition the medicine should be used for and the recommended dosage.

This can be found in the information leaflet that comes with the medicine. The dosage instructions are usually on the label of the medicine packet.
Unlicensed medicines

Unlicensed Medicines

Sometimes a healthcare professional may recommend that you take an off-label or unlicensed medicine.

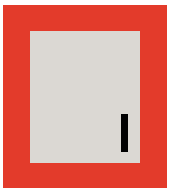
Off-label use means that the medicine isn't licensed for treatment of your condition. But the medicine will have a licence to treat another condition and will have undergone clinical trials for this.
Your doctor may recommend an unlicensed medication if they think it will treat your condition effectively and the benefits are greater than any risks.

Although medicines can make people feel better, sometimes they can make people very ill. If someone takes too much medicine, takes the wrong kind of medicine or takes it when they do not need it, they might get sick. Swallowing medicines, like everyday painkillers, is the most common way for a child to be poisoned (Child Accident Prevention Trust)

There are lots of ways to make sure people are safe around medicine.

Grown Ups

Children should never take, or touch medicines by themselves. A grown-up will know if a child needs medicines and they should decide what medicine is needed, how much is needed and when it should be taken.



Out of Reach

Medicines should be kept in a cupboard out of reach of children.

Medicine Bottles

Lots of medicine bottles have lids that are difficult to open. It is important that the lid is closed tightly after use and the medicine in put back out of reach.

Medicine should be kept in the bottle it comes in. This way people will always know waht they medicine is.

Side Effects

People might experience side effects from medication for several reasons. Not everyone will experience side effects, and they can vary depending on the individual and the medication.

- Sometimes, the way a medicine works can cause side effects. For example, blood thinners reduce the risk of heart attacks by preventing clots, but they can also cause increased bleeding and bruising.
- Genetic variations can affect how a person metabolizes a drug, leading to different side effects.
- Age, weight, and overall health condition can influence how a medication affects someone.
- Taking multiple medications can lead to interactions that cause side effects.
- Certain foods and supplements can interact with medications, altering their effects.
- Higher doses of medications are more likely to cause side effects.
- Not following the prescribed dosage or instructions can increase the risk of side effects.
- Some people may have an allergic reaction to certain ingredients leading to side effects like rashes, itching, or more severe reactions.
- If a person expects to experience side effects, they are more likely to notice them. This is known as the nocebo effect.
- Conditions like liver or kidney disease can affect how a medication is processed in the body, leading to side effects.

Understanding these factors can help people to manage and mitigate side effects. If people do have a concern about side effects it is always better to discuss them with their healthcare provider.

Common Side Effects

- **Gastrointestinal Issues**
  - **Nausea and Vomiting**: Many medications can cause an upset stomach, leading to nausea or vomiting.
  - **Diarrhoea**: Some medicines can disrupt the normal balance of bacteria in the gut, leading to diarrhoea.
  - **Constipation**: Certain pain relievers and iron supplements can cause constipation.
- **Allergic Reactions**
  - **Rashes and Itching**: Allergic reactions can cause skin rashes, itching, and hives.
  - **Swelling**: Swelling of the face, lips, or throat can occur in more severe allergic reaction.
  - **Anaphylaxis:** A severe, life-threatening allergic reaction that requires immediate medical attention
- **Central Nervous System Effects**
  - **Drowsiness**: Some medications, like antihistamines and certain pain relievers, can make people feel sleepy.
  - **Dizziness**: Feeling lightheaded or dizzy is a common side effect of many medications.
  - **Headaches**: Some medicines can cause headaches as a side effect.
- **Cardiovascular Effects**
  - **High Blood Pressure**: Some medications can raise blood pressure.
  - **Low Blood Pressure**: Others can cause blood pressure to drop, leading to dizziness or fainting.
  - **Heart Palpitations**: Some medicines can cause an irregular or fast heartbeat.
- **Respiratory Issues**
  - **Shortness of Breath**: Some medications can cause breathing difficulties.
  - **Cough**: Certain drugs, like ACE inhibitors used for high blood pressure, can cause a persistent cough.
- **Skin Reactions**
  - **Dry Skin**: Some medications can cause dryness or peeling of the skin.
  - Photosensitivity: Increased sensitivity to sunlight, leading to easy sunburn.
- **Other Common Side Effects**
  - **Dry Mouth**: Many medications can reduce saliva production, leading to a dry mouth.
  - **Weight Gain or Loss**: Some medicines can affect your appetite and metabolism.
  - **Insomnia**: Difficulty sleeping can be a side effect of certain medications.

Taking Medicine Correctly

Medication should only be taken as per the prescribed dosage or instructions. Sometimes medication can contain abbreviations, these abbreviations help healthcare professionals quickly communicate how and when medication should be taken.

Here are some common prescription abbreviations and their meanings:

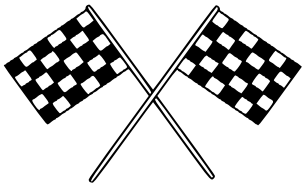
Abbreviation	Meaning	Origin
ac	Before meals	from Latin “ante cibum”
bid/bd	Twice a day	from Latin “bis in die”
hs	At bedtime	from Latin “hora somni”
pc	After meals	from Latin (post cibum)
prn	As needed	from Latin “pro re nata”
qd	Every day	From the Latin “quaque die”
qid	4 times a day	From Latin “quarter in die”
tid	3 times a day	From Latin “ter in die”
stat	Immediately	From Latin “Statim”

Antibiotic Resistance

Antibiotic resistance is when the bacteria change in some way and become resistant to the drug. There are strains of bacteria that have developed resistance to many different types of antibiotics.

Antibiotic resistance can be slowed by:

Only using **prescribed antibiotics** by a health professionals.



Always **finish the course**, even if feeling better.

Not using antibiotics on infections for which there is **no benefit** (e.g. viral infections)

Asthma

When someone is asthmastic the airways which carry air to and from the lungs are naturally narrower than those of someone who does not have asthma. During an asthma attack, the airways constrict even further, making it increasingly difficult to take air into the lungs.

Asthma can be triggered by different things. like

- Exercise,
- Allergies, e.g. animal fur, feathers, dust
- Stress
- Cold air
- Smoke
- Common illnesses such as cold and flu can also affect asthma, which may be worse at night.

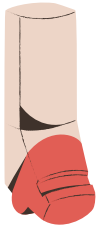
Treatments and medications help manage asthma and keep it under control.

There are 2 common types of medication for somebody with asthma, both delivered by an inhaler. Here you can find some useful videos on how to use an inhaler correctly.

Reliever Inhaler

This is usually blue or with a blue cap and is used immediately to relieve the symptoms of asthma. This inhaler should be given when someone is having an asthma attack.

Preventer Inhaler



Usually brown or with a brown cap and is used daily to help prevent an asthma attack from occuring.

Children, and some adults, may use a plastic diffuser or spacer fitted to their inhaler to help them breathe in the medication more effectively.

People who have asthma should follow the advice of their health professional and have an asthma action plan.

Recognising an Asthma Attack

If someone is having an asthma attach they may present with one or more of the following signs or symptoms:

Difficulty breathing and/or talking

Wheezing

Distress and anxiety

Coughing

Grey-blue skin

Click on the picture above to watch a short video from the ICB.

> In the most severe cases, the person may become exhausted, unresponsive and stop breathing

Treating an Asthma Attack

Asthma attacks kill 3 people in the UK each day. But many of these deaths could be avoided. The aim of treatment for someone having an asthma attack is to ease breathing and get medical help, if necessary,

Remain calm and reassure the person having the asthma attack. Get them to **take a dose of their inhaler**, using a space if necessary. This should relieve the asthmas attack within a few minutes.

Encourage them to keep taking **slow and deep breaths**.

Allow them to get into a **comfortable position**. Commonly this is a seated position. Do not force them to lie down.

A mild asthma attack should ease within a few minutes. IF not, then assist the person having an asthma attack in taking another dose of their inhaler (1 or 2 puffs) and **continue to use their inhaler every 2 minutes** until they have taken 10 puffs.

If their condition worsens, they become exhausted and struggle to talk, or their inhaler has no effect **dial 999 or 112** for emergency help.

Continue to help the person to take 1 or 2 puffs on their inhaler ever 2 minutes, until emergency help arrives.

If the person becomes unresponsive at any point, open their airway, and check for breathing:

- If ther person is breathing normally **place them in the recovery position** and continue to monitor breathing.
- If the person is not breating **perform CPR**.

Asthma Friendly Schools

The Asthma Friendly Schools (AFS) Programme is a national initiative, bringing together Health, Education and Local Authorities in order to better manage children and young people (CYP) with asthma in schools.

The national ambition is to provide safer environments for CYP with asthma and to reduce school absences due to asthma.

Asthma Friendly Schools have the following to support them:

- Asthma policy
- Asthma register
- Personal health & care plans
- Process for recording/monitoring asthma
- Asthma inhaler kits in school
- Staff/parent/carer asthma education.

All schools that achieve AFS accreditation will receive a certificate, AFS logos, up-to-date resources/guidelines and ongoing NHS support.

Becoming an Asthma Friendly School means that there is increased confidence from parents and carers that their child's asthma-related needs will be met, improved school attendance by ensuring children are in school more often and increased partnership working between health and education.

To register your interest or to find out more information about the programme please contact Gemma Hall, CYP Service Improvement Manager at NHS Staffordshire and Stoke on Trent ICB.

gemma.hall@staffsstoke.icb.nhs.uk

Staffordshire and Stoke-on-Trent Integrated Care System

Allergies

Allergies are a response by the body's immune system to a particular food or substance. Allergies are very common and can occur at any age.

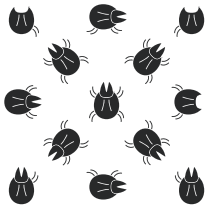
Most allergic reactions are mild, for example, hayfever, and can be treated with antihisitimes ((medicine which relieves the symptoms of allergies).

A small number of people can have a severe reaction which can be fatal.

The most effective way of avoiding an allergic reaction is to avoid the allergen that causes it.

Common non-food allergens which can cause a mild allergic reaction include:

Grass and tree pollen (hay fever)



Dust mites

Different animals

Common non-food allergens which sometimes may cause a severe reaction include:

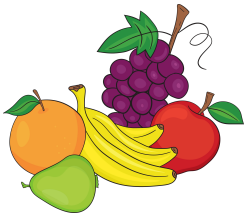
Insect Bites and Stings

Medicines (drugs)

Latex

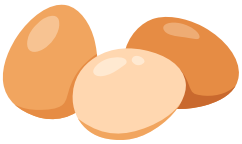
There are many food allergens, the most common ones are:

Nuts



Fruit

Shellfish



Eggs

Cows' Milk

*The **only** effective way of preventing an allergic reaction to food is to **avoid** the allergen.*

Common Allergic Symptoms

Sneezing and an itchy, runny or blocked nose (allergic rhinitis)

Itchy, red, watering eyes (conjunctivitis)

A raised, itchy, red rash (hives)

Wheezing, chest tightness, shortness of breath and a cough

Stomach ache, feeling sick, vomiting or diarrhoea

Swollen lips, tongue, eyes or face

Dry. red and cracked skin

Severe Allergic Symptoms

In rare cases. an allergy can lead to a severe allergic reaction (anaphylactic shock). Signs include any of the common allergy symptoms, as well as:

Swelling of the throat and mouth

Difficulty breathing

Dizziness

Confusion

Blue skin or lips

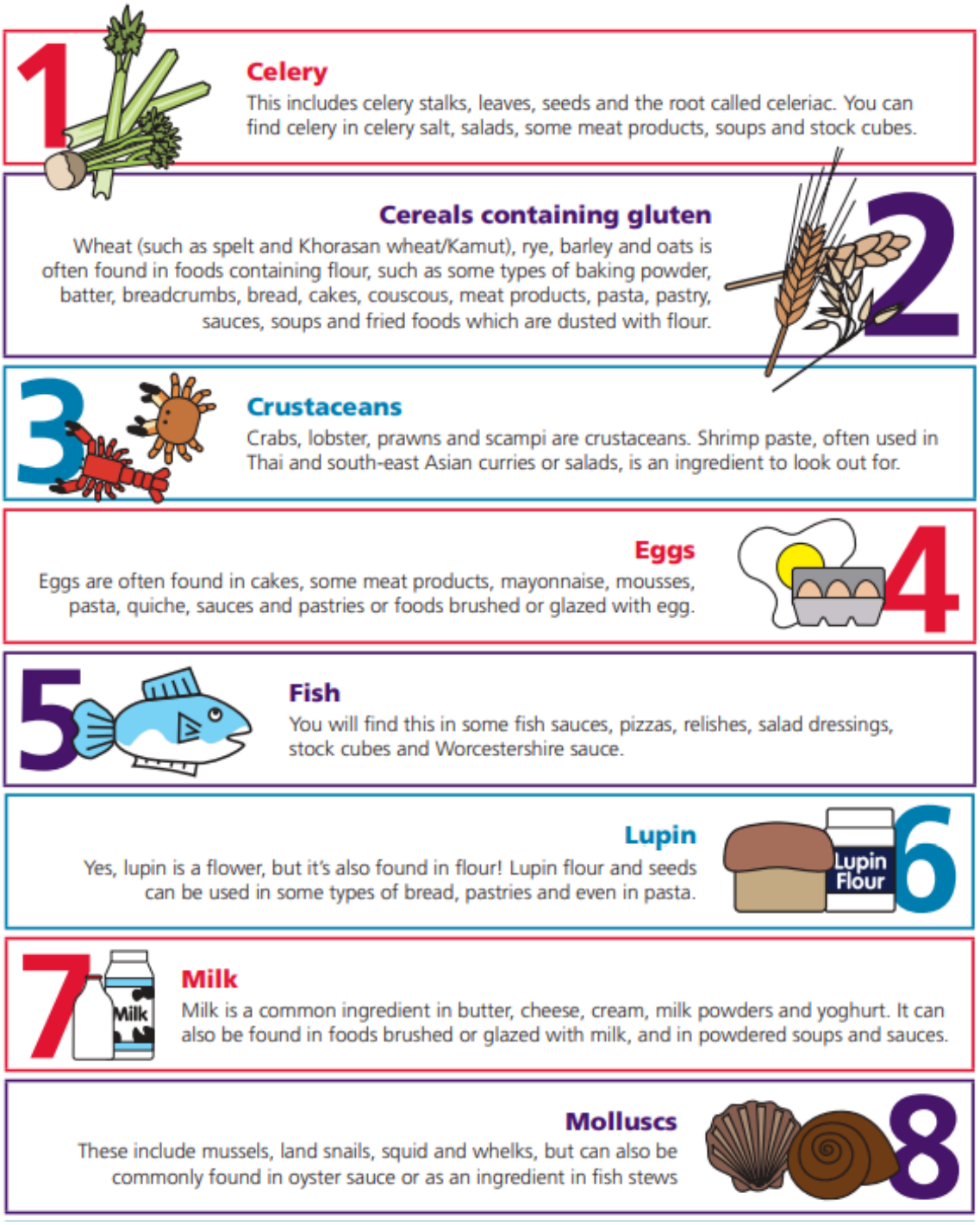
Collapsing and losing consciousness

***Anaphylaxis* is a medical emergency. It can be very serious if not treated quickly.**

Food Allergens Icons

The Food Information Regulation has been in place since December 2014. It introduced a requirement that food businesses must provide information about the allergenic ingredients used in any food they sell or provide.

There are 14 major allergens which need to be mentioned (either on a label or through provided information such as menus) when they are used as ingredients in a food. Here are the allergens, and some examples of where they can be found.



9

Mustard

Liquid mustard, mustard powder and mustard seeds fall into this category. This ingredient can also be found in breads, curries, marinades, meat products, salad dressings, sauces and soups.

Nuts

10

Not to be mistaken with peanuts (which are actually a legume and grow underground), this ingredient refers to nuts which grow on trees, like cashew nuts, almonds and hazelnuts. You can find nuts in breads, biscuits, crackers, desserts, nut powders (often used in Asian curries), stir-fried dishes, ice cream, marzipan (almond paste), nut oils and sauces.

11

Peanuts

Peanuts are actually a legume and grow underground, which is why it's sometimes called a groundnut. Peanuts are often used as an ingredient in biscuits, cakes, curries, desserts, sauces (such as satay sauce), as well as in groundnut oil and peanut flour.

Sesame seeds

12

These seeds can often be found in bread (sprinkled on hamburger buns for example), breadsticks, houmous, sesame oil and tahini. They are sometimes toasted and used in salads.

13

Soya

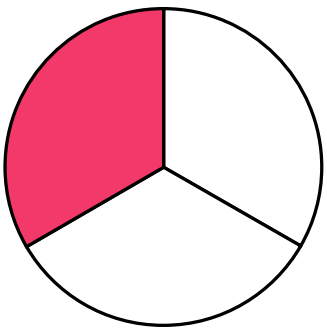
Often found in bean curd, edamame beans, miso paste, textured soya protein, soya flour or tofu, soya is a staple ingredient in oriental food. It can also be found in desserts, ice cream, meat products, sauces and vegetarian products.

Sulphur dioxide (sometimes known as sulphites)

14

This is an ingredient often used in dried fruit such as raisins, dried apricots and prunes. You might also find it in meat products, soft drinks, vegetables as well as in wine and beer. If you have asthma, you have a higher risk of developing a reaction to sulphur dioxide.

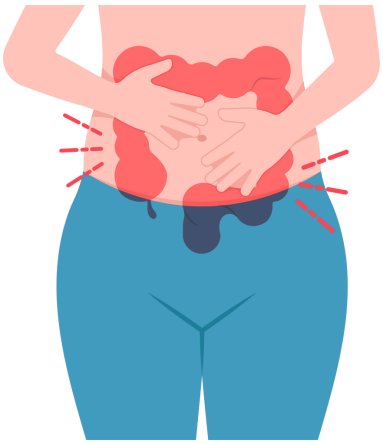
The 14 most common allergens must be highlighted in the ingredient list on a food label. They should be highlighted in **bold**, CAPITAL LETTERS, or <u>underlined</u> to alert the consumer that it contains an allergen.



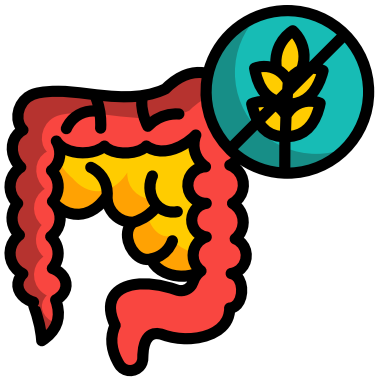
1 in 3 people in the UK have one or more allergic conditions (<u>Allergy UK</u>)

Food Hypersensitivity

Some people may have other types of sensitive reactions towards food.



Food intolerance is difficulty in digesting certain foods and having physical reactions to them, such as bloating and stomach pain.



Coeliac Disease is a reaction to certain ingredients such as gluten, a protein found in wheat, rye, and barley. Oats can also sometimes cause a reaction. Symptoms range from mild (e.g. bloating, diarrhoea) to severe (e.g. hair loss and joint/bone pain.)

Household Products

It is important that children and young people learn about household products to ensure their safety and wellbeing.

Reading labels

Labels provide important information on how to use a product safely and what to do in case of an accident.

This symbols shows that the product contains posion.

This symbols shows that the product is corrosive.

This symbols shows that the product is flammable.

This symbols shows that the product is hazardous to the environment.

This symbols shows that the product is hazardous to health or hazardous to the ozone layer.

This symbols shows that the product is a serious health hazard.

Being Safe

Household producs are safe when used and stored correctly. There are some rules that children and young people should be aware of to ensure their own safety and the safety of others.

- Products like bleach and ammonia should not be mixed as it can cause dangerous gases.
- Some products should be used in well-ventalited areas to avoid inhaling harmful fumes.
- When handling certain products, masks and gloves should be wrm to protect the skin and lungs.
- Products should be kept in their original containers to ensure the safety instructions are alwasy available.
- Hazardous products should be stored out of reach of younger children and pets.
- Follow the disposal instructions on the label to avoid environmental harm and personal injury.
- Some items, like batteries, and old medicines, need special disposal methods.

Button batteries can badly hurt or kill a small child if they swallow one

Look

around your home for button batteries. Think toys, lights, remote controls and more.

Check

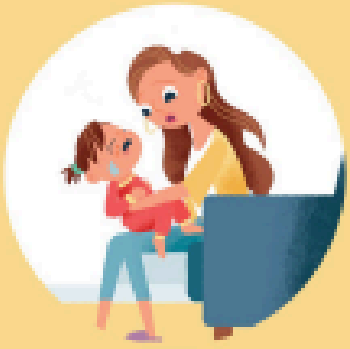
for products with loose backs and button batteries that have dropped out.

Store

button batteries in a safe place, up high and out of your child's reach.

Dispose

of used button batteries as soon as you can. They are still unsafe.



Act

If you think your child may have swallowed a button battery, go straight to A&E or call an ambulance.

capt.org.uk

@ChildAccidentPreventionTrust

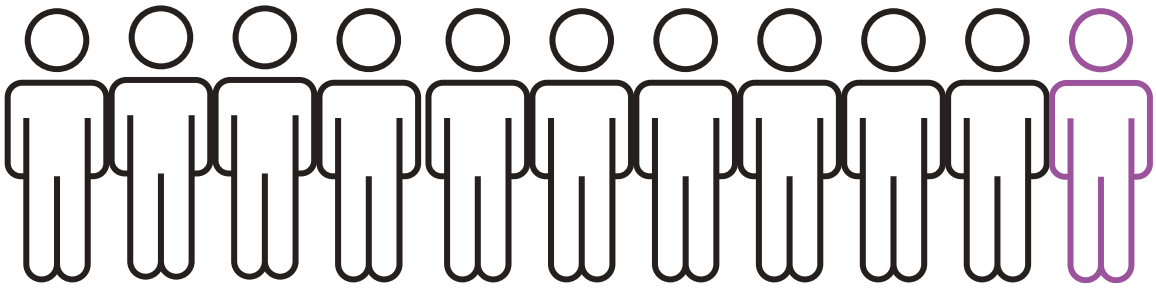
@capt_charity

child accident prevention trust

Statistics

Most accidental poisoning happens to children younger than five years old, with children aged one to three years being most at risk (ROSPA)

On average 15 under-fives are admitted to hospital each day due to suspected poisoning (ROSPA)



Approximately 1 in 11 children and young people are living with Asthma

Less than 1 in 4 children have a personalised asthma action plan - this helps them to manage their condition.

A study showed that one in six people in the UK do not know or are unsure if asthma can be fatal (Charity Awareness Monitor, January 2017)

Training

Department for Education

Teacher training: health and prevention

Practical training materials for primary and secondary schools to use to train staff to teach about health and prevention.

This training module supports the physical health and mental wellbeing section of the statutory relationships, sex and health education curriculum. The module contains key knowledge and facts to help teachers understand what they must teach. It includes information on:

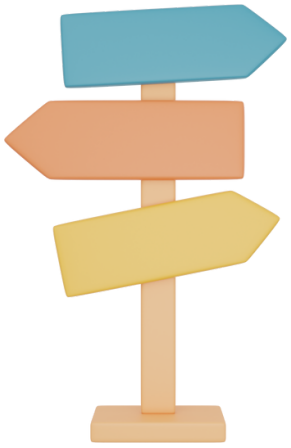
- the signs of physical illness
- sun safety
- sleep
- dental health
- personal hygiene
- allergies
- immunisation and vaccination
- self-examination and screening

These slides should be adapted to suit individual school context. This can include adding your own videos and resources to make your teaching training sessions more visual and interactive.

Linked & PSHE packs

The following ...& PSHE packs have links to this topic and can be found in the Resource Library on the website -Register or sign-in. Alternatively you can find them in the & PSHE section of the Training area on our website.

Signposting Information:



It is important to signpost children and young people to relevant local and national organisations who can provide further advice and support.

- Families Health and Wellbeing Service

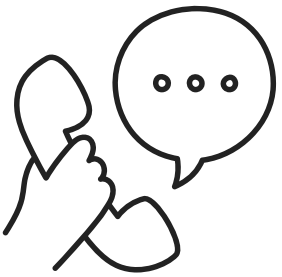
Text - 07520 615 7211 (Staffordshire Moorlands, Newcastle, South Staffordshire, Stafford only)
Text - 07520 615 721 (East Staffordshire, Cannock, Lichfield, Tamworth)
Text - 07520 615 723 (Stoke-on-Trent only)

- Staffordshire Family Hubs
- Stoke-on-Trent Family Hubs

- www.nhs.uk

- GP Practice
- Local Pharmacy

Useful Contacts:



If you would like more information or support about Medicine Management and Allergies please contact:

- Families Health and Wellbeing 0-19 Service
- Staffordshire Family Hubs
- Stoke-on-Trent Family Hubs

If a referral to Children's Social Care is required, please contact:

Staffordshire:

Staffordshire Children's Advice Service - 0300 111 8007

Monday - Thursday 8.30am -5pm and Friday 8.30-4.30pm

Out of Hours - 0345 604 2886 / 07815 492613

Stoke:

CHAD - 01782 235 100

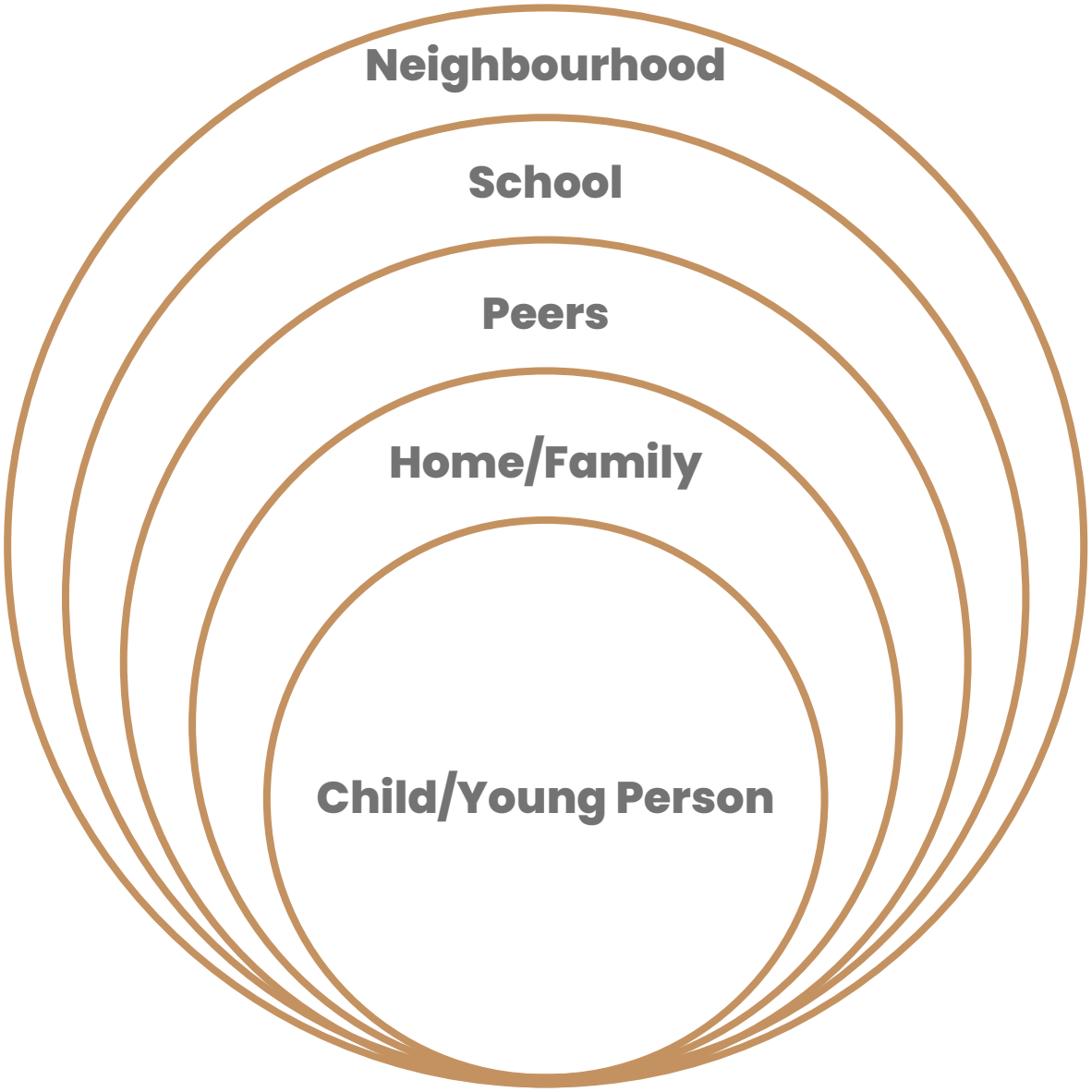
Monday - Thursday 8.30am -5pm and Friday 8.30-4.30pm

Out of Hours - 01782 234 234

Contextual Safeguarding

Contextual safeguarding recognises the impact of the public/social context on young people's lives, and consequently their safety. Contextual safeguarding seeks to identify and respond to harm and abuse posed to young people outside their home, either from adults or other young people.
Using Contextual safeguarding can enable professionals to build a holistic picture of the child or young person's individual factors and also identify where and by whom interventions can occur

More information on contextual safeguarding can be found here



Further Reading:

- NHS medication information
- Great Ormond Street Hospital - Types of Medicines
- Child Accident Prevention Trust
- Allergy UK
- Medicines & Healthcare products Regulatory Agency

VERSION CONTROL

Date	Changes	Made by
February 2025	Pack created	Ellie Chesterton Natalie McGrath

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