

Tilston Parochial CE Primary School

Bringing out the Best in Everyone.

'Encourage one another and build each other up.' Thessalonians 5:1



Tilston Parochial
CE Primary School

Administration of Medicines, First Aid and Infectious Diseases Policy

Date of policy: March 2022
Review cycle: Annual
Reviewed by: Kelsey Mort
Approved by: Achievement and Safeguarding Committee
Next review date: March 2025

Administration of Medicines, First Aid and Infectious Diseases Policy

1 Parental responsibility in respect of their child's medical needs

Parents and carers have the prime responsibility for their child's health and should provide the school with information about their child's medical condition, obtaining details from the GP or paediatrician if needed. The school doctor, nurse or health visitor may also be able to provide information for staff.

Most young people will at sometime have short-term medical needs, for example finishing a course of antibiotics. Some young people will also have longer term medical needs and may require medicines on a long-term basis such as controlled epilepsy etc. Others may require medicines in particular circumstances, such as those with severe allergies who may need an adrenaline injection. Young people with severe asthma may have a need for inhalers or additional doses during an attack.

In most cases young people with medical needs can attend school and take part in normal activities, but staff may need to take care in supervising such activities to make sure such young people are not put at risk. An individual Health Care Plan can help staff identify the necessary safety measures to help support young people with medical needs and ensure that they, and others, are not put at risk.

2 The need for prior written agreement from parents/carers for any medicines to be given to their child

The school must receive a written request from the parent/carer giving clear instructions regarding required dosage for prescription medicine. The necessary form should be completed by the parent whenever a request is made for medicine to be administered on each and every occasion. This request should be reviewed termly. (See Appendix 1 for request form)

3 Procedures for managing prescription medicines which need to be taken during the school day

Ideally it is preferable that parents/carers, or their nominee, administer medicines to their children, this could be affected by the young person going home during a suitable break or the parent visiting the school. However this may not be appropriate. In such cases it is likely that a request will be made for medicine to be administered to the young person at school.

Each request for medicine to be administered to a young person in school will be considered on its merits. Where it is thought necessary for medicines to be administered, the Headteacher will ensure that the school policy and the guidelines are followed carefully. All staff must be made aware of the school policy and practices with respect to administering medicines. A copy, signed by all the staff, is kept in the School Office.

The school will normally only accept medicines that have been prescribed by a doctor, dentist or nurse prescriber. Medicines should always be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions for administration. The school will never accept medicines that have been taken out of the container as originally dispensed nor make changes to the dosage. Ideally if medicines are prescribed in dose frequencies which enable it to be taken outside school hours, parents will be encouraged to ask their prescriber about this.

4 The circumstances in which young people may take non-prescription medicines

Staff should never give a non-prescribed medicine to a young person unless there is a specific prior written agreement from parents/carers and accompanied by a doctor's (or Health Professional's) note for medicine to be administered during school hours. For example if a young person suffers from frequent or acute pain the parents should be encouraged to refer the matter to their GP. Where appropriate, a copy of a child's individual Healthcare Plan will be kept in school and adhered to.

However during an Educational Visit involving a residential or overnight stay (when a parent is unlikely to be available to administer pain/flu relief to their child) an appropriate pain/flu relief may be administered so long as the parent has given consent and specified the medicine on the 'Parent/Guardian Consent for an Educational Visit' form which is available in Appendix 6 of the Educational Visits and Overnight Stays' guidance note. A young person under 16 should never be given aspirin or medications containing ibuprofen unless prescribed by a doctor.

5 Risk assessment and management processes

Risk assessments will be carried out for individuals and for specific occasions to ensure the health and safety of the children. Information will be shared with staff on a 'may need to know' basis.

6 The roles and responsibilities of staff managing administration of medicines, and for administering or supervising the administration of medicines

There is no legal duty that requires school staff to administer medicines, but all staff have a common law duty of care to act like any reasonable prudent parent/carer.

However under Part 4 of the DDA (Disability Discrimination Act 1995) responsible bodies for schools (including nursery schools) must not discriminate against disabled pupils in relation to their access to education. The school recognizes that it is under a duty to plan strategically to increase access. This includes planning for the admission of disabled pupils with medical needs. Early years settings should make reasonable adjustments for disabled children, including those with medical needs.

7 Staff training in dealing with medical needs

Where possible the medicine, in the smallest amount, should be brought into school by the parent/carer, or their nominee and it should be delivered personally to the Headteacher or their nominated member of staff. If a young person brings to school any medicine for which the Headteacher has not received written notification, the staff at the school **will not** be responsible for that medicine.

Staff will be appropriately trained in giving medication with particular demands. Only one member of staff at any one time should administer medicines to a young person (to avoid the risk of double dosing). All medicines administered are countersigned by an additional member of staff. Arrangements should be made to relieve the member(s) of staff from other duties while preparing or administering doses (to avoid the risk of interruption before the procedure is completed). Staff administering this medication should check the Record of Medicines sheet in the staff room beforehand (see Appendix 2). This recording sheet must be kept up to date. All staff administering medicines will know how to carry out their responsibilities and make a suitable record as given in Appendix 2.

Staff with a young person with medical needs in their class or group will be informed about the nature of the condition and when and where the young person may need extra attention.

8 Safe Storage of Medicines

Large volumes of medicines will not be stored. Medicines will be stored strictly in accordance with the product instructions and in the original container in which dispensed. Staff will ensure that the supplied container is clearly labelled with the name of the young person, name and dosage of the medicine and the frequency of administration.

A few medicines need to be refrigerated. They can be kept in a refrigerator containing food but should be in an airtight container and clearly labelled. There should be restricted access to refrigerators holding medicines. Normally this would be the staff room fridge.

The young person should know where their own medicines are being stored and who holds the key. All emergency medicines, for example, asthma inhalers and adrenalin pens should be readily available to the young person and should not be locked away.

9 Record keeping

The School will keep written records each time medicines are given and staff should complete and sign this record. (Appendix 2). Good records help demonstrate that staff have followed the agreed procedures. In early years settings such records must be kept and parents/carers should be requested to sign the form to acknowledge the entry.

If a young person refuses to take medicine, staff should not force them to do so, but should note this in the records and follow agreed procedures. Parents/carers should be informed of the refusal on the same day.

10 The school policy on assisting young people with long-term or complex medical needs

It is important to have sufficient information about the medical condition of any young person with long-term medical needs. The school needs to know about any particular needs before the young person attends for the first time or when they first develop a medical need. It is helpful to develop a written Health Care Plan for such a young person, involving the parents and relevant health professionals. Such plans would include the following:

- Details of the young person's condition
- Special requirements i.e. dietary needs, pre-activity precautions
- Any side effects of the medicines
- What constitutes an emergency
- What action to take in an emergency
- Who to contact in an emergency
- The role staff can play

(See Appendix 3 for an example Health Care Plan)

Specific advice on certain common conditions is given in the LA Health and Safety Guidance Note: The Administration of Medicines in Educational Establishments: Asthma (includes a link to a model policy), Epilepsy, Diabetes, Anaphylaxis.

11 Special Circumstances

Whilst the administration of all medicines requires caution, there are certain circumstances which require special attention before accepting responsibility for administering medicine when the parents/carers are unable to come to school themselves. These are:

- Where the timing and nature of the administration are of vital importance and where serious consequences could result if a dose is not taken;
- Where some technical or medical knowledge or expertise is required;
- Where intimate contact is necessary.

In such exceptional circumstances, the Headteacher will consider the best interests of the child as well as considering carefully what is being asked of the staff concerned. The Headteacher will seek advice from the consultant community paediatrician, GP or school doctor. A clear policy will be drawn up for administration for such medication and there will be clear written instructions, which are agreed by the parents/carers, teachers and advisory medical staff. The Medical Professionals must confirm that non-nursing staff can administer such medicines and what training is necessary and by whom.

Clear records will be kept of any medication administered in school and parents should be informed whenever a child is given such medication, which is not part of a regular regime.

12 INVASIVE PROCEDURES See Section 5 of the LA Guidance

13 Policy on young people carrying and taking their medicines themselves

It is good practice to support and encourage young people, who are able, to take responsibility to manage their own medicines and schools should encourage this. There is no set age when this transition should be made. Health professionals need to assess, with parents and young person, the appropriate time to make this transition. This should be recorded in the young persons Health Care Plan. If the young person can take their own medicine themselves, staff may only need to supervise the procedure, for example inhalers for asthma relief.

14 Access to school's emergency procedures

The school has arrangements in place for dealing with emergency situations as part of its First Aid procedures. Individual Health Care Plans should include instructions as to how to manage a young person in the event of an emergency and identify who is the responsible member of staff, for example if there is an incident in the playground a lunchtime assistant needs to be very clear of their role.

15 Procedures for managing medicines on school visits and outings

The same arrangements apply to medicines on Educational Visits. Prescribed medicines will need to be given throughout the 24 hour periods and relevant records kept. Additionally, parents/carers will be asked whether they agree to staff administering pain/ flu relief of a specified type and number of doses if needed e.g. for earache/ toothache. Every effort will be made to contact the parents to confirm this need.

16 Accident/Incident Reporting

Every injury should be reported in the school accident book, located in the office. All injuries must be investigated by the person in charge of the area of activity. Where the accident falls within the LA Accident reporting criteria, the LA Accident Form must be completed by the relevant member of staff, signed by the Headteacher and sent to the Health and Safety Team.

17 School First Aid Procedures

The following members of staff are First Aid Trained

NAME	QUALIFICATION	EXPIRY
Jo Huxtable	First Aid at Work	11/09/22
Pam Edwards	Paediatric First Aid	21/09/24
Jo Hewitt	Paediatric First Aid	08/09/23
Maree Hegarty	Paediatric First Aid Level 2	01/03/23
Donna Griffin	Paediatric First Aid Level 2	05/03/23
Fiona Pountney	Paediatric First Aid Level 2	20/03/23
Lucy Kehoe	Paediatric First Aid Level 2	07/04/23
Amy Winter	Paediatric First Aid Level 2	07/04/23
Kelsey Mort	Paediatric First Aid Level 2	12/04/23
Jo Callister	Paediatric First Aid Level 2	26/04/23
Jill Farmer	Emergency First Aid at Work	16/12/22

First Aid Kits

All classrooms have a first aid cupboard. Midday assistants are issued with their own first aid kit and carry this with them at lunchtime. Jo Huxtable checks the First Aid Kits monthly.

Cuts

The nearest adult deals with a small cut. All open cuts are treated with a medi wipe then covered. Children should always be asked if they can wear plasters BEFORE one is applied. Children who are allergic to plasters will be given an alternative dressing. Any first aider can treat more severe cuts, but fully trained first aiders must attend the patient to give advice. These are recorded in the accident book. Anyone treating open wounds should use disposable gloves.

Bumped Heads

Any bump to the head, no matter how minor, is treated as serious. All bumped heads should be treated with an ice pack. Parents/carers are informed by letter. The child's teacher should be informed to be able to keep a close eye on the progress of the child. All bumped head incidents should be recorded in the accident book.

Calling the Emergency Services

In the case of major accidents it is the decision of the fully trained first aider if the emergency services are called. Staff are expected to support and assist the trained first aider in their decision. If a member of staff is asked to call the emergency services, they must state:

- what has happened
- the person's name
- the age of the child
- whether the casualty is breathing and/or unconscious
- the location of the school

In the event of the emergency services being called, the Bursar or another member of staff, should wait by the school gate and guide the emergency vehicle to the school. If the casualty is a child, their parents/carers should be contacted immediately and be given all the information they require. If the casualty is an adult, their next of kin should be informed immediately. All contact numbers for pupils and staff are located in the school office.

18 Minor Illnesses

Vomiting and Diarrhoea

If a child vomits or has diarrhoea in school they will be sent home immediately. Children with these conditions will not be accepted back into school until 48 hours after the last symptom has elapsed.

Other common infectious diseases

If a child has any of these infections they will need to stay off school for the prescribed period of time. The Headteacher or school office will advise timescales.

For specific information see 'Guidance on Infection Controls in Schools' poster located in the school office.

Date: March 2022

Review: March 2023

APPENDIX ONE

TILSTON PAROCHIAL CE PRIMARY SCHOOL

REQUEST FOR THE SCHOOL TO GIVE MEDICATION

Dear Headteacher,

I request that (Full name of Pupil) be given the following medicine(s) while at school:

Date of birth Group/class/form

Medical condition or illness

Name/type of Medicine
(as described on container)

Expiry date..... Duration of course.....

Dosage and method Time(s) to be given.....

Other instructions

Self administration Yes/No (mark as appropriate)

The above medication has been prescribed by the family or hospital doctor (Health Professional note received as appropriate). It is clearly labelled indicating contents, dosage and child's name in FULL.

Name and telephone number of GP

I understand that I must deliver the medicine personally to (agreed member of staff) and accept that this is a service that the school/setting is not obliged to undertake. I understand that I must notify the school/setting of any changes in writing.

SignedPrint Name
(Parent/Guardian)

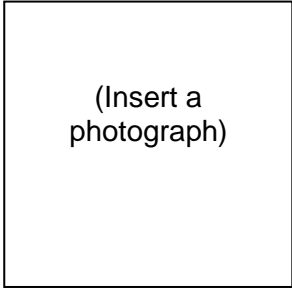
Daytime telephone number

Address
.....

Note to parents:
Medication will not be accepted by the school unless this form is completed and signed by the parent or legal guardian of the child and that the administration of the medicine is agreed by the Headteacher.
Medicines must be in the original container as dispensed by the Pharmacy.
The agreement will be reviewed on a termly basis.
The Governors and Headteacher reserve the right to withdraw this service.

APPENDIX THREE

**ADMINISTRATION OF MEDICINES FOR YOUNG PEOPLE
HEALTH CARE PLAN**



TILSTON PAROCHIAL CE PRIMARY SCHOOL

Young person's name

Date of birthGroup/class/form

Young person's address
.....
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Medical diagnosis or condition
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DateReview date

Family Contact Information

Name Phone no. (work)
(home)..... (mobile)

Name Phone no. (work)
(home)..... (mobile)

Clinic/Hospital Contact

Name Phone no.

G.P Name..... Phone no.

Describe needs and give details of young person's symptoms.

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Medicines to be kept in