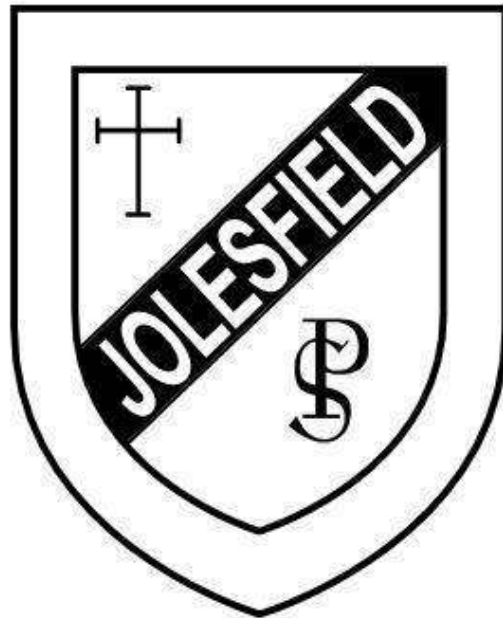


JOLESFIELD C.E. PRIMARY SCHOOL



***First Aid and Managing
Medicines
Policy***

Contents

1. Statement of Intent	<i>page 3</i>
2. Organisation	<i>page 3</i>
3. Implementation monitoring and review	<i>page 3</i>
4. Insurance	<i>page 3</i>
5. Admissions	<i>page 4</i>
6. Pupils with medical needs	<i>page 4</i>
7. All prescribed and non-prescribed medicines	<i>page 4</i>
8. Confidentiality	<i>page 5</i>
9. Consent to administer medication	<i>page 5</i>
10. Prescription Medicines	<i>page 5</i>
11. Non-prescription Medicines	<i>page 5</i>
12. Short term ad-hoc non-prescribed medication	<i>page 7</i>
13. Pain relief protocol	<i>page 7</i>
14. Asthma	<i>page 8</i>
15. Anaphylaxis	<i>page 8</i>
16. Mild Allergic Reaction	<i>page 8</i>
17. Hay fever	<i>page 9</i>
18. Severe Allergic Reaction	<i>page 9</i>
19. Medical Emergencies	<i>page 9</i>
20. Controlled Drugs	<i>page 10</i>
21. Pupils taking their own medication	<i>page 10</i>
22. Storage and Access to Medicines	<i>page 10</i>
23. Waste medication	<i>page 10</i>
24. Spillages	<i>page 11</i>
25. Record Keeping - administration of medicines	<i>page 11</i>
26. Recording Errors and Incidents	<i>page 11</i>
27. Staff Training	<i>page 11</i>
28. Education Visits (off-site one day)	<i>page 12</i>
29. Residential Visits (overnight stays)	<i>page 12</i>
30. Risk assessing medicines management on all off site visits	<i>page 13</i>
31. Complaints	<i>page 13</i>
32. First Aiders	<i>page 13</i>
33. Medical Room Supplies	<i>page 14</i>
34. School Visits	<i>page 14</i>
35. Sending Unwell Children Home	<i>page 14</i>

36.Serious Injury	page 14
37.Fire	page 14
38.Head Injuries	page 14
39.Head Lice	page 15
40.Emergency Procedures	page 15
41.Travelling Abroad	page 15

1. Statement of Intent

Section 100 of the Children and Families Act 2014 places a duty on governing bodies of maintained schools, proprietors of academies and management committees of PRUs to make arrangements for supporting pupils at their school with medical conditions'. The governing body of Jolesfield CE Primary School will ensure that these arrangements fulfil their statutory duties and follow guidance outlined in 'Supporting pupils at school with medical conditions' December 2015'.

Medicines will be administered to enable the inclusion of pupils with medical needs, promote regular attendance and minimise the impact on a pupil's ability to learn. In an emergency all teachers and other staff in charge of children have a common law duty of care to act for the health and safety of a child in their care – this might mean giving medicines or medical care.

In line with recommendations, a first aid needs assessment has been conducted to inform our policy meets the needs of pupils whilst in school and participating in any off-site activities.

2. Organisation

The governing body will develop policies and procedures to ensure the medical needs of pupils at Jolesfield CE Primary School are managed appropriately. They will be supported with the implementation of these arrangements by the Head teacher and school staff.

The Lead for Managing Medicines at Jolesfield CE Primary School is Mrs Debbie Smith or in their absence Mrs Natalie Saunders or Mrs Sue Balicki. In their duties, staff will be guided by their training, this policy and related procedures.

3. Implementation monitoring and review

All staff, governors, parents/carers and members of the Jolesfield CE Primary School community will be made aware of and have access to this policy. This policy will be reviewed biannually and its implementation reviewed and as part of the Head teacher's annual report to Governors.

4. Insurance

Staff who follow the procedures outlined in this policy and who undertake tasks detailed in the RMP Medical Malpractice Treatment Table are covered under WSCC insurance policies. The medical audit is available to view on West Sussex Services for Schools under 'guide to insurance for schools'.

Claims received in respect of medical procedures not covered by the insurers will be considered under the Council's insurance fund.

5. Admissions

When the school is notified of the admission of any pupil the Lead for Managing Medicines will seek parental consent to administer short term-ad-hoc non-prescriptions medication using 'Template B: Parent/guardian consent to administer short-term non-prescribed 'ad-hoc' medicines'. An assessment of the pupil's medical needs will be completed this might include the development of an Individual Health Care Plans (IHP) or Education Health Care Plans (EHC) and require additional staff training. The school will endeavour to put arrangements in place to support that pupil as quickly as possible. However the school may decide (based on risk assessment) to delay the admission of a pupil until sufficient arrangements can be put in place.

6. Pupils with medical needs

The school will follow Government guidance and develop an IHP or EHC for pupils who:

- Have long term, complex or fluctuating conditions – these will be detailed using Template 1 (Appendix 2)
- Require medication in emergency situations – these will be detailed using Template 2 for mild asthmatics and Templates 3, 4, 5 and 6 for anaphylaxis (Appendix 2).

Parents/guardians should provide the Head teacher with sufficient information about their child's medical condition and treatment or special care needed at school. Arrangements can then be made, between the parents/guardians, Head teacher, school nurse and other relevant health professionals to ensure that the pupil's medical needs are managed well during their time in school. Healthcare plans will be reviewed by the school annually or earlier if there is a change in a pupil's medical condition.

7. All prescribed and non-prescribed medication

On no account should a child come to school with medicine if he/she is unwell. Parents may call into the school and administer medicine to their child, or they may request that a member of school staff administers the medicine. If a pupil refuses their medication, they should not be forced, the school will contact the parent/guardian and if necessary the emergency services. Pupils should not bring any medication to school for self-administration.

The school will keep a small stock of paracetamol and antihistamine for administration with parental consent (template B or gained at the time of administration) for symptoms that arise during the school day. All other medication must be supplied by the parent/guardian in the original pharmacist's container clearly labelled and include details of possible side effects e.g. manufacturer's instructions and/or patient information leaflet (PIL). Medicines must be delivered to the school office with the appropriate

consent form Template C and/or C1 (Appendix 2). The school will inform the parent/guardian of the time and dose of any medication administered at the end of each day by phone.

8. Confidentiality

As required by the General Data Protection Act 2018, school staff should treat medical information confidentially. Staff will consult with the parent, or the pupil if appropriate, as to who else should have access to records and other information about the pupil's medical needs and this should be recorded on the IHP or EHC. It is expected that staff with contact to a pupil with medical needs will as a minimum be informed of the pupil's condition and know how to respond in a medical emergency.

9. Consent to administer medication

Parental/guardian consent to administer medication will be required as follows:

- **Short term ad-hoc non-prescribed medication** - The school will request parent/guardian consent to administer ad-hoc non-prescription by either using Template B (Appendix 2) when the pupil joins the school OR by contacting the parent/guardian to gain consent at the time of administration (conversations will be recorded). The school will send annual reminders requesting parents/guardians to inform the school if there are changes to consent gained when the pupils joined the school. If the school is not informed of any changes by the parent/guardian it will be assumed that consent remains current.
- **Prescribed and non-prescribed medication** - each request to administer medication must be accompanied by 'Parental consent to administer medication form' (Appendix 2 Template C and/or C1) or if applicable on the IHP

10. Prescription Medicines

Medicine should only be brought to school when it is essential to administer it during the school day. In the vast majority of cases, doses of medicine can be arranged around the school day thus avoiding the need for medicine in school. Antibiotics for example are usually taken three times a day, so can be given with breakfast, on getting home from school and then at bedtime. Administration will be recorded using Template D or E and the parent/guardian informed. Parents/guardians are expected to remove any remaining medicine from school once the prescribed course has been completed.

11. Non-prescription Medicines

Under exceptional circumstances where it is deemed that their administration is required to allow the pupil to remain in school, the school will administer non-prescription medicines. The school will not administer alternative treatments i.e. homeopathic or herbal potions, pills or tinctures or nutrition supplements unless prescribed or recommended by a Doctor and detailed on an IHP or EHC as part of a wider treatment protocol. As recommended by the Government in 'Supporting Pupils at School with

Medical Conditions December 2015' the school will also not administer aspirin unless prescribed. The storage and administration for non-prescription medication will be treated as prescription medicines.

If the relevant symptoms develop during the school day as detailed under the paragraph below 'short term ad-hoc non-prescribed medication' the school will administer the following non-prescription medications:

- paracetamol (to pupils of all ages)
- antihistamine

All other non-prescription medications will only be administered by staff, providing:

- The parent/guardian confirms daily the time the medication was last administered and this is recorded on Template C1 (Appendix 2);
- medication is licensed as suitable for the pupil's age;
- medication is suitable for the pupil i.e. if a child is asthmatic the medication is suitable for that condition;
- administration is required more than 3 to 4 times per day;
- medication is supplied by the parent or guardian in the original packaging with the manufacturer's instructions and/or (PIL);
- and accompanied by parental/guardian consent Template C and C1 (Appendix 2) and confirmation the medication has been administered previously without adverse effect;

The school will **NOT** administer non-prescription medication:

- as a preventative, i.e. in case the pupil develops symptoms during the school day;
- if the pupil is taking other prescribed or non-prescribed medication, i.e. only one non-prescription medication will be administered at a time;
- Any requirement for a non-prescription medication to be administered during school hours for longer than 48 hours must be accompanied by a Doctor's note. In the absence of a Doctor's note and if following the administration of a non-prescription medication symptoms have not begun to lessen in the first 48 hours the school will advise the parent to contact their Doctor. If symptoms have begun to alleviate, the medication can continue to be administered at home out of school hours. Under very exceptional circumstances where the continued administration of a non-prescribed medication is required to keep the pupil in school and this requirement has not been documented by a medical professional the school will continue to administer medication at their own discretion.
- A request to administer the same or a different non-prescription medication that is for the same/initial condition will not be repeated for 2 weeks after the initial episode; and not for more than 2 episodes per term - it will be assumed that the prolonged expression of symptoms requires medical intervention, and parents/guardians will be advised to contact their Doctor.
- Skin creams and lotions will only be administered in accordance with the Schools Intimate Care Policy and procedures.
- Medication that is sucked i.e. coughs sweets or lozenges, will not be administered by the school.

- if parents/guardians have forgotten to administer non-prescription medication that is required before school – requests to administer will be at the discretion of the school and considered on an individual basis.

12. Short term ad-hoc non-prescribed medication

A small stock of standard paracetamol, ibuprofen and antihistamine will be kept by the school for administration if symptoms develop during the school day.

ONLY the following will be administered following the necessary procedures:

- For relief from pain
 - Standard Paracetamol will be administered in liquid or tablet form for the relief of pain i.e. period pain, migraine.
- For mild allergic reaction – antihistamine (see Anaphylaxis)
- For travel sickness – medication will be administered if required before educational visits and must be age appropriate and supplied by the parent/guardian in its original packaging with the PIL if available.

Only 1 dose of any of the above medications suitable to the weight and age of the pupil will be administered during the school day.

13. Pain relief protocol for the administration of paracetamol

If a request for non-prescribed pain relief is made by a pupil or carer/staff (advocate for a non-verbal/non-communicating pupil) before 12pm:

- The school will contact the parent/guardian and confirm that a dose of pain relief (Paracetamol) was NOT administered before school, parents/guardians and if appropriate the pupil will also be asked if they have taken any other medication containing pain relief medication i.e. decongestants e.g. Sudafed, cold and flu remedies e.g. Lemsip and medication for cramps e.g. Feminax etc. and these conversations will be recorded. If a dose of pain relief has not been administered in the past 4 hours the school will with parental consent administer 1 dose.
- If the school cannot contact the parent/guardian and therefore cannot confirm if pain relief (Paracetamol) was administered before school then the school will refuse to administer pain relief.

If a dose of pain relief has been administered before school:

- PARACETAMOL - The school will not administer paracetamol until 4 hours have elapsed since the last dose (assume 8am) no more than 4 doses can be administered in 24 hours.

If a request for pain relief is made after 12pm:

- The school will assume the recommended time between doses has elapsed and will with parental consent, administer 1 standard of dose of Paracetamol or Ibuprofen without any need to confirm with the parent/guardian if a dose was administered before school, but if appropriate the pupil will still be asked if they have taken any other medication containing pain relief medication and this conversation will be recorded.

The school will inform the parent/guardian if pain relief has been administered this will include the type of pain relief and time of administration.

14. Asthma

The school recognises that pupils with asthma need access to relief medication at all times. The school will manage asthma in school as outlined in the Asthma Toolkit. Pupils with asthma will be required to have an emergency inhaler and a spacer (if prescribed) in school. The school may ask the pupil's parent or guardian to provide a second inhaler. Parents are responsible for this medication being in date and the school will communicate with the parents if new medication is required and a record of these communications will be kept. The school inhaler will only be used in an emergency and will always be used with a spacer as outlined in the Asthma Toolkit. The school will develop IHP's for those pupils with severe asthma, and complete the Individual Protocol for pupils with mild asthma.

15. Anaphylaxis

Every effort will be made by the school to identify and reduce the potential hazards/ triggers that can cause an allergic reaction to pupils diagnosed with anaphylaxis within the school population. The school complies with the School Nursing Service recommend that all staff are trained in the administration of auto injectors and that training is renewed annually.

In accordance with the Medicines and Healthcare Products Regulatory Agency (MHRA) advice the school will ask parent/ guardian(s) to provide 2 auto-injectors for school use. Parents are responsible for this medication being in date and the school will communicate with the parents if new medication is required and a record of these communications will be kept.

16. Mild Allergic Reaction

Non-prescription antihistamine will with parental consent be administered for symptoms of mild allergic reaction (i.e. itchy eyes or skin, rash or/and redness of the skin or eyes), the pupil must be monitored for signs of further allergic reaction. If antihistamine is not part of an initial treatment plan, anaphylaxis medication will be administered following the guidance for short term ad-hoc non-prescribed medication.

Some antihistamine medication can cause drowsiness and therefore the school will consider if it is necessary for pupils to avoid any contact hazardous equipment after administration of the medication i.e. P.E. Science, Design and Technology.

17. Hay fever

Parent(s)/guardian(s) will be expected to administer a dose of antihistamine to their child before school for the treatment of hay fever. The school will only administer antihistamine for symptoms of allergic reaction and not as a precautionary measure.

18. Severe Allergic Reaction

Where a GP/Consultant has recommended or prescribed antihistamine as an initial treatment for symptoms of allergic reaction this will be detailed on the pupils IHP. The school will administer 1 standard dose of antihistamine (appropriate to age and weight of the pupil) and it is very important that symptoms are monitored for signs of further allergic reaction. During this time pupils must **NEVER** be left alone and should be observed at all times.

If symptoms develop or there are any signs of anaphylaxis or if there is any doubt regarding symptoms then if the pupil has been prescribed an adrenaline auto injector it will be administered without delay an ambulance called and the parents informed.

19. Medical Emergencies

In a medical emergency, first aid is given, an ambulance is called and parents/carers are notified. Should an emergency situation occur to a pupil who has an IHP or EHC, the emergency procedures detailed in the plan are followed, and a copy of the IHP or EHC is given to the ambulance crew. If applicable the pupil's emergency medication will be administered by trained school staff, if the pupils medication isn't available staff will administer the schools emergency medication with prior parental consent.

In accordance with amendments made to the Human Medicines Regulations 2012 from October 2014 a sufficient number of salbutamol inhaler(s) spacer(s) will be held by the school to cover emergency use. Parents are expected to provide 2 in date auto-injectors for administration to their child, if the school does not hold 2 in date auto-injectors for each pupil then a suitable number of auto-injectors will be purchased for use by the school in an emergency.

Parental consent to administer the 'school inhaler and/or auto-injector' will be gained when the pupil joins the school using Template 2 for asthmatics and Templates 3, 4, 5 and 6 for anaphylaxis (Appendix 1).The school will hold a register of the pupils diagnosed with asthma and/or anaphylaxis, and if parental consent has been given to administer the school medication. The school will be responsible for ensuring the school medication remains in date.

Instructions for calling an ambulance are displayed prominently by the telephone in the school office. (Appendix 2 Template G)

20. Controlled Drugs

The school does not deem a pupil prescribed a controlled drug (as defined by the Misuse of Drugs Act 1971) as competent to carry the medication themselves whilst in school. Controlled drugs will be stored securely in a non-portable locked medicines cabinet in a locked room and only named staff will have access. Controlled drugs for emergency use e.g. midazolam will not be locked away and will be easily accessible. The administration of a controlled drug will be witnessed by a second member of staff and records kept. In addition to the records required for the administration of any medication, a record will be kept of any doses used and the amount of controlled drug stock held in school. (Appendix 2 Templates D and E)

21. Pupils taking their own medication

For certain long-term medical conditions, it is important for children to learn how to self-administer their medication. Appropriate arrangements for medication should be agreed and documented in the pupil's IHP or EHC and parents should complete the self-administration section of 'Parental consent to administer medication' form (Template C Appendix 1).

22. Storage and Access to Medicines

All medicines apart from emergency medicines (inhalers, adrenaline auto injector, midazolam etc.) will be kept securely (where access by pupils is restricted). Medicines are always stored in the original pharmacist's container. Pupils are told where their medication is stored and who holds the key and staff will be fully briefed on the procedures for obtaining their medication.

Emergency medicines such as inhalers, adrenaline auto injectors and midazolam must not be locked away. If appropriate certain emergency medication can be held by the pupil, or kept in a clearly identified container in his/her classroom. The school will make an assessment as to the competency of each individual pupil to carry their own medication. Parents will be asked to supply a second adrenaline auto injector and/or asthma inhaler for each child and they will be kept in the school office. Staff must ensure that emergency medication is readily available at all times i.e. during outside P.E. lessons, educational visits and in the event of an unforeseen emergency like a fire.

Medicines that require refrigeration are kept in the staffroom fridge to which pupil access is restricted, and will be clearly labelled in an airtight container. There are specific arrangements in place for the storage of controlled drugs see page 7.

23. Waste medication

Where possible staff should take care to prepare medication correctly. If too much medication is drawn into a syringe the remainder (amount above the required dose) should be returned to the bottle before administration. If only a half tablet is administered the remainder should be returned to the bottle or packaging for future administration.

If a course of medication has been completed or medication is date expired it will be returned to the parent/guardian for disposal.

24. Spillages

A spill must be dealt with as quickly as possible and staff are obliged to take responsibility/follow the guidelines. Spillages will be cleared up following the school's procedures and considering the control of infection. Any spilled medication will be deemed unsuitable for administration and if necessary parents will be asked to provide additional medication.

The school has additional procedures in place for the management of bodily fluids which are detailed in the Intimate care policy.

If the school holds any cytotoxic drugs, their management will be separately risk assessed and follow Health and Safety Executive (HSE) guidance.

25. Record Keeping – administration of medicines

For legal reasons records of all medicines administered are kept at the school until the pupil reaches the age of 24. This includes medicines administered by staff during all educational or residential visits. The pupil's parent/ guardian will also be informed if their child has been unwell during the school day and medication has been administered. For record sheets see Appendix 2 Template D and E.

26. Recording Errors and Incidents

If for whatever reason there is a mistake made in the administration of medication and the pupil is:

- Given the wrong medication
- Given the wrong dose
- Given medication at the wrong time (insufficient intervals between doses)
- Given medication that is out of date
- Or the wrong pupil is given medication

Incidents must be reported to the Schools Senior Management Team who will immediately inform the pupil's parent/guardian. Details of the incident will be recorded locally as part of the schools local arrangements. Local records must include details of what happened, the date, who is responsible and any effect the mistake has caused. Senior Management will investigate the incident and change procedures to prevent reoccurrence if necessary. NB: Incidents that arise from medical conditions that are being well managed by the school do not need to be reported or recorded locally.

27. Staff Training

The school will ensure a sufficient number of staff complete Managing Medicines in Schools training before they can administer medication to pupils. The school will also ensure that other staff who may occasionally need to administer a medicine are instructed and guided in the procedures adopted by the school by the person who has completed the Managing Medicines course. Staff given instruction by the

Lead for Medicines MUST complete a competency test and achieve a score of 100% in order to administer medication.

All trained first aiders follow the protocols taught during their First Aid at Work, Emergency First Aid at Work and/or Paediatric First Aid courses. A list of the trained first aiders can be found on the notice board in the staff and is also in the green First Aid file in the office.

Supply and locum staff will be given appropriate instruction and guidance in order to support the pupils with medical needs in their care. All school staff are trained annually to administer an auto-injector and asthma inhaler in an emergency.

A record of all training must be maintained to show the date of training for each member of staff and when repeat or refresher training is required.

The school will ensure that the staff who administer medicine for specific chronic conditions are trained to administer those specific medicines, for example, Diabetes (insulin) Epilepsy (midazolam). Training in the administration of these specific medicines is arranged via the school nurse.

28. Educational Visits (Off - site one day)

Staff will administer prescription medicines to pupils when required during educational visits. Parents should ensure they complete a consent form (Appendix 2 Template C) and supply a sufficient amount of medication in its pharmacist's container. Non-prescription medicines as detailed in this policy can be administered by staff, pupils must not carry non-prescription medication for self-administration.

All staff will be briefed about any emergency procedures needed with reference to pupils where needs are known and copies of care plans will be taken by the responsible person.

29. Residential Visits (overnight stays)

The school acknowledges the common law 'duty of care' to act like any prudent parent. This extends to the administration of medicines and taking action in an emergency, according to the care plan.

Occasionally it may be necessary to administer non-prescription medicines as described in this policy i.e. antihistamine to pupils suffering from an allergic reaction or paracetamol for acute pain from things like headache, period pain, toothache etc. Parents must give written consent prior to the residential visit and sign to confirm that they have administered the medication without adverse effect.

The school will keep its own supply of the following non-prescription medication (Calpol, Antihistamine) for administration to pupils during a residential visit and parental consent will be required in order for the school to administer their supply (Appendix 2 Template C and C1). The medication will be stored and administration recorded as for prescription medicines. Pupils should not bring non-prescribed medication on the residential visit for self-administration.

30. Risk assessing medicines management on all off site visits

Pupils with medical needs shall be included in visits as far as this is reasonably practicable. School staff will discuss any issues with parents and/or health professionals so that extra measures (if appropriate) can be put in place. A copy of the pupils IHP or EHP will be taken on the visit and detail arrangements relating to the management of their medication(s) during the visit should be included in the plan.

If a pupil requires prescribed or non-prescribed medication during visit and an IHP or EHP has not been developed and the management of their medication differs from procedures followed whilst in school, the school will conduct a risk assessment and record their findings.

The results of risk assessments however they are recorded i.e. IHP, EHP etc. will be communicated to the relevant staff and records kept of this communication.

31. Complaints

Issuing arising from the medical treatment of a pupil whilst in school should in the first instance be directed to the Head teacher. If the issue cannot easily be resolved the Head teacher will inform the governing body who will seek resolution.

Appendix 1 – WSCC Care Plan Templates September 2017

Appendix 2 – WSCC Administering Medicines Templates September 2017

Appendix 3 – Summary guidance medicines policy

31. Teaching Staff

All teaching staff and MDMS (Mid-day Meals Supervisors) are able to offer pupils minimal first aid (eg, a wet paper towel) for very minor injuries such as a bumped knee or small graze. Any injuries such as bleeding cuts, bumps to any part of the head or face, twists and/or sprains will be referred to a first aider. Appointed persons will record any first aid provided in the first aid book. This is checked by the School Business Manager (a first aider) at 1:15pm daily.

32. First Aiders

It is the responsibility of the School Business Manager to ensure employment and training of an adequate number of staff as First Aiders to cover the school's needs. A list of current qualified First Aiders is kept on the notice board in the staff room. These staff can administer first aid at any time during the school day and out of school time if on a trip or residential outing.

The First Aiders are available, during break times, to attend to any first aid needed by children and adults. For any head injury, the adult/child should be accompanied to the school office by a responsible adult to receive the appropriate treatment (see Section 38 - Head Injuries).

Record of First Aid/Accidents

Any individual providing even minimal first aid must keep a record. The following details must be completed in the First Aid book, as close as possible to the time treatment was provided:

- date, time and place of incident
- name of injured or ill person
- details of the injury or illness
- details of what first aid was given
- what happened immediately after the incident (for example, went home, went back to class, went to hospital)
- name and signature of first aider or person dealing with the incident

If any child goes to hospital following an accident within school, the school business manager will report the incident via the WSCC Accident Reporting Form, which is authorised by the headteacher.

Any adult injured at work is seen by a first aider and an entry is completed in the staff accident book. This is also reported via the WSCC Accident Reporting system.

33. Medical Room Supplies

The School Business Manager is responsible for keeping the medical store cupboard stocked with adequate medical supplies. A first aid kit is taken outside if pupils are leaving the school building, for example, at break time, PE lessons and for any LOtC activities.

34. School Visits

First Aid kits are available for school outings. It is the responsibility of the First Aider on the trip to check the contents are correct before it is taken out. When a child who has 'long term' medication being held in school goes on a trip, it is the responsibility of the attending First Aider to take the child's medication with them.

Storage of First Aid Kits

Every classroom has a basic first aid kit. The location of this and any inhalers is indicated by a first aid symbol (white cross on green background) on the relevant cupboard door. 'Bumbags' stocked with basic first aid equipment are available for staff to wear when on duty at break or lunchtime. The School Business Manager is responsible for keeping these adequately stocked. Medication is not kept in a first aid container.

35. Sending Unwell Children Home

If a child becomes unwell at school and needs to go home, it is the responsibility of the First Aider 'on duty' to arrange this safely. Contact information for all children is available in the School Office, with calls made only to the adults listed. When the child is collected, this must be recorded in the Removal Book by the office staff.

36. Serious Injury

If a child has a serious injury and an ambulance is needed, this should be done via the school office. Office staff will act as coordinators between the hospital and the first aiders looking after the child. Once the ambulance has been called, the parents/carers of the child should then be contacted. With a serious accident the child should be attended by two first aiders. For a serious injury when a visit to hospital is required, whether with School staff or later with Parents/Carers, then Template H must be completed with WSCC informed also through <https://wsccl.info-exchange.com/SchoolIncident> (A login to WSCC will be needed).

37. Fire

If the fire alarms rings, the First Aider 'on duty' should take a first aid kit and the special fire blanket and go out to the playground immediately to deal with any possible injuries.

38. Head Injuries

For any head or facial injury, the child should be emailed a 'Head Bang' letter on the day of the injury containing injury advice provided by the NHS with details of the injury and incident recorded clearly on the front (see Appendix 1). For any more significant head or facial injury, including loss of consciousness, Parents/Carers should be telephoned to inform them of the injury. In addition, parents will be informed by telephone of any head injury where their child has fallen from standing onto a hard surface such as the playground or fallen from a height such as the stage or a piece of gymnastics equipment. No child or adult should be left alone following a head injury and extra caution, including additional monitoring, should be taken, no matter how serious.

39. Head Lice

If a Parent/Carer reports that their child has head lice, the school will send an email to all parents/carers of children in the same year to ask that all children be checked for lice. If a member of staff notices that a child has head lice, the First Aider 'on duty' will phone the parent/carers to inform them and an email will be sent out to the Year group concerned.

40. Emergency Procedures

In a medical emergency, first aid is given, an ambulance is called and Parents/carers are notified. Should an emergency situation occur to a pupil who has an IHCP, the emergency procedures detailed on the plan are followed, and a copy of the IHCP is given to the ambulance crew. IHCP's will also be given to those companies and staff providing transportation of pupils to and from school in order that the IHCP can be passed to the ambulance crew in the event of an emergency. For a serious injury when a visit to hospital is required, whether with School staff or later with Parents/Carers, then Template H (Appendix 2) must be completed with WSCC informed also, using form <https://wsc.info-exchange.com/SchoolIncident> (A login to WSCC will be needed).

EYFS

At least one member of staff with a current paediatric first aid certificate is present on the premises at all times and accompanies EYFS on any off-site activities.

This policy will be reviewed on an annual basis.

This policy was approved by the Governing Body of Jolesfield C.E. Primary School on: 23rd January 2024

Signature of Chair of Governors: *S. Crute*

Signature of Headteacher: V. Price



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Deputy Headteacher: Mr Colin Brookes

Dear Parents/Carers

Head Injury Notification

Your child banged his/her head at am/pm today.

Approximate location of bump:

As per NHS advice, in any case of head injury, please observe your child closely for up to 72 hours. Give your child pain medicines such as paracetamol if they are in pain. Make sure your child is drinking enough fluid, and allow your child plenty of rest and avoid stressful environments until they are feeling better.

Post head injury symptoms:

- Mild headache
- Tiredness or trouble getting to sleep
- Irritability or bad temper
- Concentration problems
- Feeling sick and/or dizzy

If you are worried about any of the symptoms your child is experiencing, or if they are not going away, please contact your child's GP.

Red Flag symptoms:

- Sleepy and you cannot wake them
- Three or more separate vomiting episodes
- Bad headache or persistently irritable, even after pain medication
- Difficulty speaking or understanding what you are saying
- Weakness in arms or legs or loss of balance
- Convulsion or fit

If you notice any of the red flag symptoms, please phone 999 or go to your nearest A&E department.

Yours sincerely
Staff First Aider

Appendix 2



Administering Medicines Templates Supporting pupils with medical conditions

September 2017

Contents	page
Template A – Pupil Health Information Form	19
Template B – Parent/guardian consent to administer short-term non-prescribed ‘ad-hoc’ medicines	23
Template C – Parental consent to administer medicine	24
Template C1 – Individual protocol for non-prescribed medication	26
Template D – Record of medicine administered to an individual child	28
Template E – Record of medicine administered to all children	32
Template F – Staff training record – administration of medicines	33
Template G – Contacting the emergency services	35
Template H Consent to administer non-prescribed medication on a school trip	36

Template A: Pupil Health Information Form

This information will be kept securely with your child's other records. If further information is needed we will contact you. Please do not hesitate to contact the school if there are any issues you wish to discuss.

Childs Name	D.O.B
Gender	Year/Tutor Group

Please complete if applicable

Has your child been diagnosed with or are you concerned about any of the following:

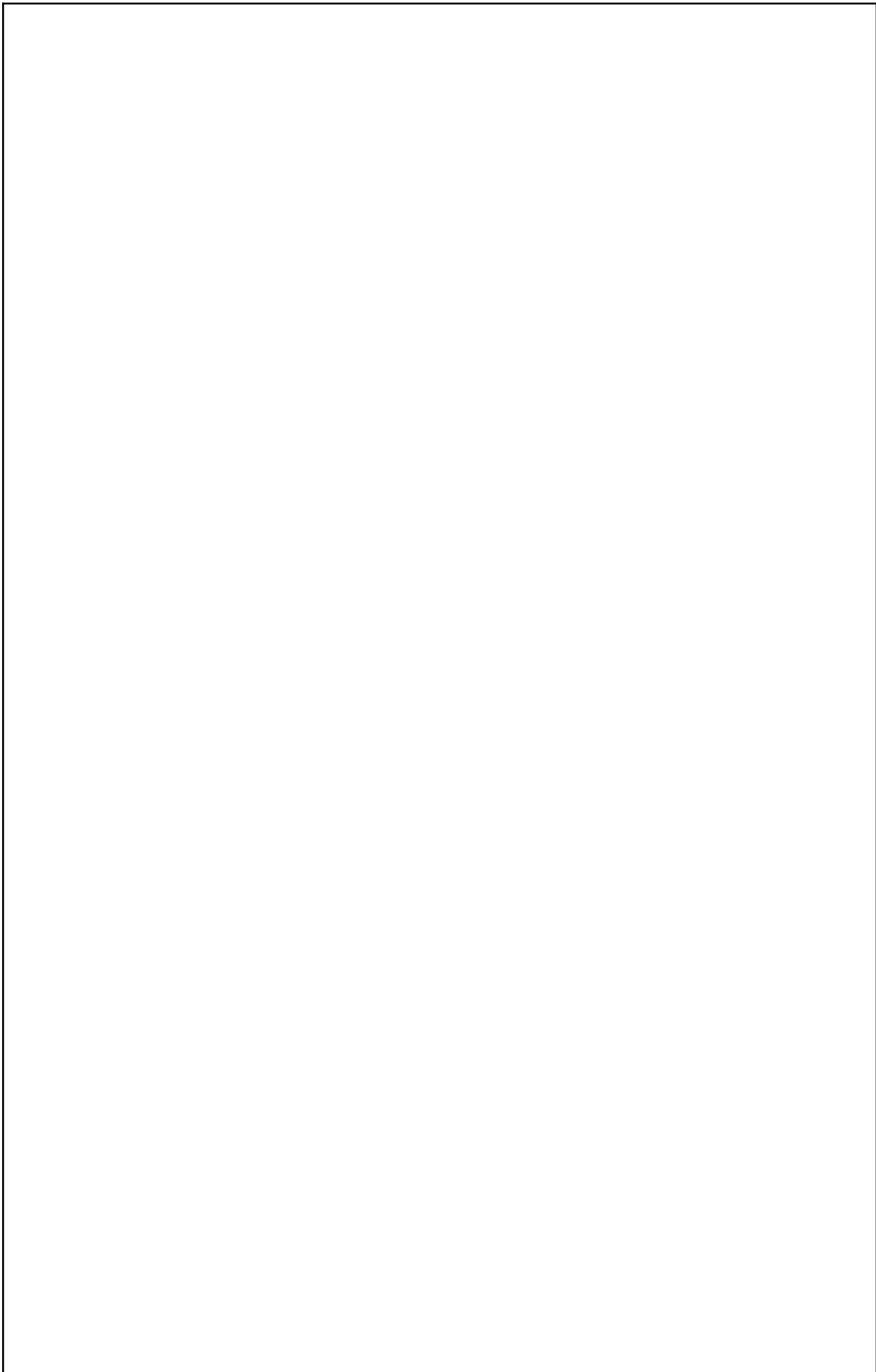
Condition	Yes	No	Medication
<p>Asthma</p> <p>NB:Parents of pupils with mild asthma must also sign an asthma protocol form (template 2 in Appendix 1) available from the school</p>			

<p>Allergies/Anaphylaxis</p> <p>NB:Parents of pupils prescribed an auto injector must also sign</p> <p>The relevant auto injector protocol form (template 3, 4, 5 in Appendix 1 or available from the school)</p>			
<p>Epilepsy</p>			
<p>Diabetes</p>			

Is your child taking regular medication for any condition other than those listed on the previous page – continue on a separate sheet if necessary.

Condition	Medication, emergency requirements

Please use the space below to tell us about any other concerns you have regarding your child's health, continue on a separate sheet if necessary:



Thank you

JOLESFIELD PRIMARY SCHOOL

Template B: Parent/guardian consent to administer short-term non-prescribed 'ad-hoc' medicines

The school will not administer medication unless this form is completed and signed. This information will be kept securely with your child's other records. If further information is needed we will contact you. Please do not hesitate to contact the school if there are any issues you wish to discuss.

Pupils Name	D.O.B
Gender	Year/Tutor Group

The Medicines Policy permits the school to administer the following non-prescription medication if your child develops the relevant symptoms during the school day. Pupils will be given a standard dose suitable to their age and weight. You will be informed when the school has administered medication by (insert method of communication). The school holds a small stock of the following medicines:

- Paracetamol
- Ibuprofen (pupils age 12 and over)
- Anti-histamine

Tick the non-prescription medications above that you give your consent for the school to administer during the school day and confirm that you have administered these medications in the past without adverse effect. Please keep the school informed of any changes to this consent.

Signature(s) Parent/Guardian

Date

Print name

Template C: parental consent to administer medication (where an Individual

Healthcare Plan or Education Healthcare Plan is not required)

The school/setting will not give your child medicine unless you complete and sign this form, and the school or setting has a policy that the staff can administer medicine.

Date for review to be initiated by

--

Name of child

--

Date of birth

--

Group/class/form

--

Medical condition or illness

--

Medicine

Name/type of medicine

(as described on the container)

--

Expiry date

--

Dosage and method

--

Timing

--

Special precautions/other instructions

--

Are there any side effects that the school/setting needs to know about?

--

Self-administration - y/n

--

Procedures to take in an emergency

--

NB: Medicines must be in the original container as dispensed by the pharmacy and the manufacturer's instructions and/or Patient Information Leaflet (PIL) must be included

Contact Details

Name

--

Daytime telephone no.

--

Relationship to child

--

Address

--

I understand that I must deliver the medicine personally to

[agreed member of staff or school location]

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school/setting staff administering medicine in accordance with the school/setting policy. I confirm that this medication has been administered to my child in the past without adverse effect. I will inform the school/setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature(s)

Date

If this is a request to administer non-prescribed medication, please work with the school to complete Template C1 on the reverse of this form

JOLESFIELD PRIMARY SCHOOL

Template C1 - Individual Protocol for non-prescribed medication

This form should be completed in conjunction with Template C – parental consent

Under exceptional circumstances where it is deemed that their administration is required to allow the pupil to remain in school the school will administer non-prescription medicines for a maximum of 48 hours.

Date (requirement reviewed daily)	Time last dose administered at home as informed by parent/guardian	Dosage given in school	Time	Comments
Day 1				
Day 2				

3 main side effects of medication as detailed on manufacturer’s instructions or PIL		
1.	2.	3.

Emergency procedures – if the pupil develops any of the signs or symptoms mentioned above or any other signs of reaction as detailed on the manufacturer’s instructions and/or PIL this might be a sign of a negative reaction or if it is suspected that the child has taken too much medication in a 24 hour period staff will call 999 and then contact the parent/guardian(s).

I agree that the medical information contained in this plan may be shared with individuals involved with my child’s care and education.

I am aware that each day I must inform the school when I last administered the medication and that I will be informed by the school in writing when medication has been administered by (insert method of communication).

Agreed by: Parent/guardian.....Date.....

JOLESFIELD PRIMARY SCHOOL

Template D: record of medicine administered to an individual child

Name of school/setting	
Name of child	
Date medicine provided by parent	
Group/class/form	
Quantity received	
Name and strength of medicine	
Expiry date	
Quantity returned	
Dose and frequency of medicine	

Staff signature _____

Signature of parent _____

Date

Time given

Dose given

Controlled drug stock

Name of member of staff

Staff initials

Witnessed by

Date

Time given

Dose given

Controlled drug stock

Name of member of staff

Staff initials

Witnessed by

JOLESFIELD PRIMARY SCHOOL

D: Record of medicine administered to an individual child (Continued)

Date			
Time given			
Dose given			
Controlled drug stock			
Name of member of staff			
Staff initials			

Witnessed by

Date			
Time given			
Dose given			
Controlled drug stock			
Name of member of staff			
Staff initials			

Witnessed by

Date

Time given

Dose given

Controlled drug stock

Name of member of staff

Staff initials

Witnessed by

Date

Time given

Dose given

Controlled drug stock

Name of member of staff

Staff initials

Witnessed by

--	--	--

Template E: record of medicine administered to all children

Name of school/setting

--

Date	Child's name	Time	Name of	Dose given	Any reactions	Signature	Print name	Comments

JOLESFIELD PRIMARY SCHOOL

Template F: staff training record – administration of medicines

Training can also be recorded on a matrix, in SIMS or similar database or using this form.

Name of school/setting	
Name	
Type of training received	
Date of training completed	
Training provided by – print name and signature	
Refresher/update training date	
Profession and title	
I confirm I have received and understood the above training	signature

Additional training:

Type of training received	
Date of training completed	

Training provided by – print name and signature

--

Refresher/update training date

--

Profession and title

--

I confirm I have received and understood the above training

signature

Type of training received

--

Date of training completed

--

Training provided by – print name and signature

--

Refresher/update training date

--

Profession and title

--

I confirm I have received and understood the above training

signature

JOLESFIELD PRIMARY SCHOOL

Template G: contacting emergency services

Request an ambulance - dial 999, ask for an ambulance and be ready with the information below.

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

1.

telephone number

School telephone

2.

your location as follows [insert school/setting address]

School address

3.

state what the postcode is – please note that postcodes for satellite navigation systems may differ from the postal code

Postcode

4.

inform Ambulance Control of the best entrance to use and state that the crew will be met and taken to the patient

Best entrance is:

5. your name

6. provide the exact location of the patient within the school setting

7. provide the name of the child and a brief description of their symptoms

8. put a completed copy of this form by the phone

JOLESFIELD PRIMARY SCHOOL

Template H – Consent to administer non-prescribed medication on a Residential Visit

The school will not administer medication unless this form is completed and signed. This information will be kept securely with your child's other records. Whilst away if your child feels unwell the school staff may wish to administer the appropriate non-prescription.

Please do not hesitate to contact the school if there are any issues you wish to discuss.

Pupils Name	D.O.B
Gender	Year/Tutor Group

If your child develops the relevant symptoms during the residential visit, with your consent they will be given a standard dose suitable to their age and weight of the appropriate non-prescribed medication. If symptoms persist medical advice will be sought and if necessary the emergency services called. You will be informed when the school has administered medication on our return by (insert method of communication).

The school will hold a small stock of the following medicines:

Paracetamol brand

Anti-histamine brand

Please tick the non-prescription medications that you give your consent for the school to administer their stock of during the residential visit.

If you would like your child to be given travel sickness medication please supply medication suitable for their age and weight in its original packaging with the patient information leaflet

Travel sickness

I give my consent for the medications ticked above to be administered by the school from their stock and confirm I have administered them to my child in the past without adverse effect.

Print and Sign Parent/Guardian

Date