

# *Stradbroke Primary Medicines/First Aid Policy*

*Supporting the achievement of all children*



<u>Written By</u>	<u>Written Date</u>	<u>Review Date</u>	<u>Approved by</u>
Paul Grainger	Sep 2022	Sep 2023	

Stradbroke Primary School is committed to reducing barriers to sharing in school life and learning for all its pupils. This policy sets out the steps which our school will take to ensure full access to learning for all its children who have medical needs and are able to attend school.

### **Managing Prescription Medicines**

- Short-term prescription requirements should only be brought into school if it is detrimental to the child's health not to have the medicine during the school day. If the course of medicine lasts more than 8 days there must be an individual health care plan.
- The school will not accept medicines that have been taken out of the container as originally dispensed, nor make changes to the prescribed dosages.
- The school will not administer medicines that have not been prescribed by a doctor, dentist, nurse prescriber, or pharmacist prescriber, unless it is done as part of an individual health care plan.
- Some medicines prescribed for children (e.g. methylphenidate known as Ritalin) are controlled by the Misuse of Drugs Act. Members of staff are authorised to administer a controlled drug, in accordance with the prescriber's instructions. A child may legally have a prescribed drug in their possession. The school will keep controlled drugs in a locked non portable container, to which only named staff will have access. A record of access to the container will be kept. Misuse of a controlled drug is an offence, and will be dealt with under the school's behaviour policy.
- Medicines should always be provided in the original container as dispensed by a pharmacist and should include the prescriber's instructions for administration. In all cases this should include:
  1. Name of child
  2. Name of medicine
  3. Dose
  4. Method of administration
  5. Time/frequency of administration
  6. Any side effects
  7. Expiry date
- Staff who have a child with medical needs in their class or group will be informed about the nature of the condition, and when or where the child will need extra attention, and procedures in case of an emergency.
- Lunchtime supervisors and other day staff will be provided with training and advice where necessary.

**Managing prescription medicines on trips, outings and sporting activities**

- The school will consider what reasonable adjustments might be made to enable children with medical needs to participate fully and safely on visits. If staff are concerned about how they can best provide for a child's safety, or the safety of other children on a visit, they should seek parental views and medical advice from the school nurse or the child's G.P.
- The school will support children wherever possible in participating in physical activities and extra-curricular sport. Any restriction on a child's ability to participate in PE should be recorded in a health care plan.
- Some children may need to take precautionary measures before or during exercise, and may need access, for example to asthma inhalers. Staff supervising sporting activities will be made aware of relevant medical conditions and will consider the need for a risk assessment to be made.

**Staff management of the administering of medicines.**

- Close co-operation between school, parent/carer, health professional and other agencies will help provide a suitably supportive environment for children with medical needs.
- The school will always designate a minimum of 2 people to be responsible for the administering of medicine to a child.
- Any member of staff who agrees to accept responsibility for administering prescribed medicines to a child does so voluntarily and will have appropriate training and guidance. They will also be aware of possible side effects of the medicines, and what to do if they occur.
- Teachers' conditions of employment do not include giving or supervising a pupil taking medicines. Agreement to do so must be voluntary.
- The head teacher will ensure that staff receives proper support and training where necessary, in line with contractual duties. The head teacher will make sure all parents/carers and staff are aware of the policy and procedures for dealing with medical needs.
- The school will take full account of temporary, supply and peripatetic staff when informing staff of arrangements for the administration of medicines.
- Staff should never give a non-prescribed medicine to a child unless part of an individual health care plan and involving specific written permission from the parents/carers.
- National Guidance states: "A child under 16 should never be given aspirin or medicines containing ibuprofen unless prescribed by a doctor."
- If a child refuses to take a medicine. Staff will not force them to do so. Staff should record the incident and inform parents immediately. If the refusal results in an emergency then normal emergency procedures will be followed.

**Parental/carer responsibilities in respect of their child's medical needs.**

- Provide the setting with information about child's medical needs if treatment or special care is required
- Administer non-prescribed medicines or remedies to pupil unless part of a health care plan
- Give consent before information about a child's health is shared with other staff
- Contact a key health worker from the setting to assist, support and advocate understanding around child's health issues
- Keep their child at home if acutely unwell

**Emergency situations:**

- All emergency medicines will be readily available and clearly marked with the pupil's name – where possible pupils will carry their own inhalers
- All staff & pupils are aware of the likelihood of an emergency arising and what action to take
- Staff should never take children to hospital in their own car; it is safer to call an ambulance
- A member of staff will always accompany a child taken to hospital by ambulance, and will stay until the parent arrives
- School will have emergency inhalers and epi pens available to be used for emergencies only, such as a child's first allergic reaction or an inhaler being unavailable. The use will be agreed by at least 2 first aiders if possible.

**Assisting children with long-term or complex medical needs**

- When there are long term medical needs for a child including administration of medicines for a period of longer than 8 days, then a health care plan should be completed.
- The school will judge each child's needs individually and their ability to cope with poor health or a particular medical condition.
- In addition to input from the school health service, the child's GP or other health care professionals depending on the level of support the child needs, those who may contribute to the health care plan could include:
  1. Head teacher
  2. Parent/Carer
  3. Child (if appropriate)
  4. Teacher

5. Support staff
6. Staff trained to administer medicines
7. Staff trained in emergency procedures

### **Common Conditions**

#### **Asthma**

- Younger children may need some help to use their inhaler and spacer device in school.
- Children who are able to use their inhaler themselves must have easy access to where they are stored, fully labelled. Inhalers should always be available during PE, sports activities and educational visits
- We will support and encourage pupils to manage their own medicines. If such medicines are taken under supervision, this should be recorded.

#### **Epilepsy**

- Staff administering this medication must have received training from local health services. A written authorisation from the GP, Consultant or Epilepsy Specialist Nurse must have been received for each child, along with instructions for use. The relevant paperwork from the health professional who delivers the training showing who has been trained and procedures for use with each child must be included in the child's health care plan.

#### **Rectal Diazepam**

- Staff administering this medication must have received training from local health services. A written authorisation from the GP, consultant or Epilepsy Specialist Nurse must have been received for each child, along with instructions for use. The relevant paperwork from the health professional who delivers the training showing who has been trained and procedures for use with each child must be included in the child's health care plan

#### **Buccal Midazolam**

- Staff administering this medication must have received training from local health services. A written authorisation from the GP, Consultant or Epilepsy Specialist Nurse must have been received for each child, along with instructions for use. The relevant paperwork from the health professional who delivers the training showing who has been trained and procedures for use with each child must be included in the child's health care plan.

### **Diabetes**

- A suitable private place must be provided for children to test blood sugars and for them to administer their insulin injections. The child must be supervised at all times ensuring safe disposal of needles.
- If the child is too young or unable to inject for themselves then a trained member of staff must do this for them. Training must come from a health professional as for epilepsy and included in the health care plan.

### **Anaphylaxis**

- Caused by severe allergic reaction requiring immediate medical attention.
- Treatment usually adrenaline injection, all staff must receive training from relevant health professional before administering this medicine. Information to be included in health care plan.
- Adrenaline pens must be accessible to children and not locked away
- Some milder cases of allergic reactions are treatable with piriton syrup. Rules for administration are the same as all prescribed medicines in school and will be included in the health care plan.

### **Safe storage of medicines**

- All medicines will be stored strictly in accordance with product instructions, especially temperature and always in the original container.
- Non-healthcare staff will never transfer medicines from their original container
- All emergency medicines such as asthma inhalers and adrenaline pens will be readily available to children and will not be locked away.

### **Disposal of medicines and needles**

- Staff should not dispose of medicines; all unused medicines should be collected by the parent/carer. Please document all medicines removed from school by parents in the medical book in the medical room.
- Sharps boxes to be removed from school and disposed of by the child's parents

### **Schools should keep a record of any first-aid treatment given by first aiders and appointed persons.** (An up to date list of first aiders is available from Mrs Barker)

- The school will record all administration of medicines even under a supervisory role in the medical log book situated in the medical room.
- For a head bump a text will be sent as well as a bumped head letter.
- If requested by parents a record of treatment will be sent home via arranged format – first aid slip

- In Foundation Stage all first aid incidents are recorded in a separate file. , Parents are informed at the end of the day and asked to sign they agree they have received the information.

**When recording incidents this should include:**

- The date, time and place of the incident
- The name of the injured or ill person
- Details of the injury or illness and first-aid given
- What happened to the person immediately afterwards (for example, whether they went home, resumed normal duties, went back to class, or went to hospital)
- The name and signature of the first-aider or person dealing with the incident
- If a first aid incident needs reporting to health and safety forms are available from Mrs K Fielding and must be signed by the Head teacher. Any accidents requiring a hospital visit must always be reported to health and safety.

**Hygiene and infection control**

- All staff should be familiar with normal precautions for avoiding infection and follow basic hygiene procedures
- Staff will have access to disposable gloves
- Early Years settings to follow OFSTED guidance on infection control

The Education Regulations 1999 require every school to have a room appropriate and readily available for use for medical or dental examination and treatment and caring of sick or injured pupils. It must contain a washbasin and be reasonably near a water closet. It must not be teaching accommodation. Our first aid room is situated on the downstairs corridor, near Mrs Barker's office.

**COVID-19 Appendix**

**The following needs to be adhered to during the Covid-19 pandemic**

**Administering First Aid**

- If social distancing cannot be maintained when administering first aid, PPE appropriate to the circumstances e.g. gloves, face masks and eye protection (if necessary) should be provided
- Wash hands and ensure the affected area is cleaned upon completion
- All first aid waste and PPE should be disposed of by double bagging and put in the clinical / external waste

**Administering Medication**

As above plus:

- Staggered times of administration of medicines should be considered

**Suspected case of Covid-19 on the school site**

- If someone becomes unwell and starts to display symptoms and starts to display with a new, continuous cough or a high temperature in an education setting they must be sent home and advised to follow the staying at home guidance.
- If a child is awaiting collection, they should be moved to the medical room, where they can be isolated behind a closed door, depending on the age of the child and with appropriate adult supervision if required.
- Ideally, a window should be opened for ventilation. If it is not possible to isolate them, move them to an area which is at least 2 metres away from other people.
- If they need to go to the bathroom while waiting to be collected, they should use the disabled bathroom. The bathroom should be cleaned and disinfected using standard cleaning products before being used by anyone else.



- Once collected the isolation room will need to be cleaned thoroughly before any further use.

What to do if you suspect a child in your class has COVID 19 symptoms.

**What to do if you suspect a child in your class has COVID 19 symptoms.**

The main symptoms of coronavirus are:

- A high temperature – this means you feel hot to touch on your chest or back (you do not need to measure your temperature)
- A new, continuous cough – this means coughing a lot for more than an hour, or 3 or more coughing episodes in 24 hours (if you usually have a cough, it may be worse than usual)
- A loss or change to your sense of smell or taste – this means you've noticed you cannot smell or taste anything, or things smell or taste different to normal

1. Remove child immediately from the classroom.
2. Child to go to the isolation room on the ground floor (With a staff member supporting from 2 metres if possible).
3. First aider allocated to deal with Covid-19 to attend immediately.
4. Parent/carer contacted immediately to collect.
5. All children and staff within the ill child's group will be sent home for 14 days and will only be able to return if the affected child undergoes a negative test. The parents will be encouraged to get the child tested.
6. Classroom to be thoroughly cleaned.