

# MEDICATION and FIRST AID POLICY

Review Date: Spring 2017
Next review date: Spring 2019

**Person in charge:** CEO

**Link Governor:** Chair of Board

# **Pastoral Care/Spiritual Development**

The quality of relationships between all members of school, staff and pupils, and the relationship with parents and carers is the area that is most commonly associated with the ethos of a church academy. It is expressed in the terms of sharing and caring. Jesus was clear in his instructions to the disciples on this matter.

'Love your neighbour as yourself' – Matthew 22:39.

Everyone associated with the school is made in the image of God and is to be loved. This is the commandment from which Northern Lights Learning Trust derives its policy for pastoral care.

We have a series of overlapping networks of relationships, which includes governors, staff, children, parents, church members, and members of the community which the school seeks to serve. Our pastoral work will strive to meet the significant challenge to create and maintain such networks in ways which reflect the Gospel. Those who are in leadership roles, which includes all who have a particular responsibility, ensure that by their personal example they set the highest standards expected.

It is from this premise that Christian love will pervade all aspects of life in schools within the Northern Lights Learning Trust. It will influence how we reward and teach discipline. It will affect how we value work and the achievements of pupils and staff. It will be seen in the way in which the school environment is created and cared for, in the way in which the needs of pupils, parents, and community are met, and in the way in which teaching and non-teaching staff work together effectively as a team. Pastoral care pervades all aspects of school life and therefore will be reflected in the way the school is organised and the policies are written and implemented.

The academy's MEDICATION and first aid policy is part of the Trust's pastoral and safeguarding system.

Please read in conjunction with the Statutory Guidance "Supporting Pupils at school with medical conditions." [December 2015] and Statutory Framework for the Early Years Foundation Stage [September 2014]

## **Medication and First Aid Policy Statement**

#### **Rationale**

Children and adults at schools within the Norther Lights Learning Trust need good quality first aid provision. Clear and agreed systems should ensure that all children are given the same care and understanding in our school. This care should extend to emergency first aid provision and the administration of medicines.

<sup>&#</sup>x27;This is my commandment: love each other' - John 15:17.

Northern Lights Learning Trust endeavours to ensure that all its pupils achieve success in their academic work, in their relationships and in their day to day experiences at school. Some of our pupils are likely to have medical needs which mean that additional measures are required to ensure that they are enabled to have full access to the curriculum, that the impact of their medical difficulties upon their life in school is minimised as far as possible, and that all staff who work with the pupil understand the nature of their difficulties and how best to help them.

While there is no legal or contractual duty on teachers to administer medicines or supervise pupils taking their medicines nevertheless we would wish to support our pupils where we can. Pupils with special medical needs have the same right of admission to school as other children and cannot be excluded from school on medical grounds alone.

Teachers and support staff are in loco parentis and may need to take swift action in an emergency, both in school and off site, for example during school trips.

The prime responsibility for a pupil's health lies with the parent or carer who is responsible for the pupil's medication and should supply the school with any relevant information.

## **Purpose to:**

- assist parents in providing medical care for their children
- educate staff and pupils in respect of special medical needs
- adopt and implement any national or LA policies in relation to medication in schools
- arrange training for staff who volunteer to support individual pupils with special medical needs
- liaise as necessary with medical services in support of the pupil
- ensure that pupils with special educational need are enabled to access the full life of the school where possible
- maintain appropriate records
- give clear structures and guidelines to all staff regarding all areas of first aid and medicines
- clearly define the responsibilities and the staff
- enable staff to see where their responsibilities end
- ensure the safe use and storage of medicines in the school
- ensure the safe administration of medicines in the school
- ensure good first aid cover is available in the school and on educational visits

#### Guidelines

The policy is available for all staff during induction to the schools. This policy is regularly reviewed and updated. This policy has safety as its priority. Safety for the children and adults receiving first aid or medicines and safety for the adults who administer first aid or medicines.

#### **Entitlement**

The TRUST accepts that pupils with medical needs should be assisted if at all possible and that they have a right to the full education available to other pupils.

The TRUST believes that pupils with medical needs should be enabled to achieve full attendance and receive necessary proper care and support.

The TRUST accepts all employees have rights in relation to supporting pupils with medical needs in relation to:

- choosing whether or not become involved
- receiving appropriate training
- working to clear guidelines
- have concerns about legal liability
- bring any concerns they have about supporting pupils with medical needs to the management

For this reason the Academy have [2] designated staff who have received training in administering medication to ensure all children are safe and have equal access to our provision. There are very strict procedures in place which are regularly reviewed.

#### Conclusion

The administration and organisation of first aid and medicines provision is taken very seriously within Northern Lights Learning Trust . There are annual procedures that check on the safety and systems that are in place in this policy. The academy also discusses its first aid and medicines procedures with the school nurse where necessary. Adjustments are made immediately if necessary and may result in an individualised medical plan.

# **First Aid Policy Guidelines**

# First aid in school

#### **Training**

There are 6 staff that are fully first aid trained in school. Other members of staff have had emergency first aid training. There is always a fully qualified first aider in school and where whole class visits take place a

qualified first aider accompanies the visit, unless the place to where they are going has this provision. All first aiders attend updates and retraining courses as required.

Annually, the children in year 6 attend a half training session about an injury minimisation programme. During their final year pupils in year 6 receive training relating to Heart issues, including CPR.

First aid kits are stored in the Medical Room, Nursery, After school club and the staff area.

#### Cuts

All open cuts should be covered after they have been cleaned. Plasters should be applied to those children where consent has been given. Children who are allergic to plasters will be given an alternative dressing. Minor scrapes do not need to be recorded in the accident book although children will be given a bump note if they have been seen by a first aider.

Any first aider can treat more severe cuts, but a fully trained first aider must attend the patient to give advice. Minor cuts should be recorded in the accident book and parents informed through a bump note. Parents give their permission annually for their child to have plasters and cream, where parents have not given consent, the children's details are kept in the medical room and are made aware to staff.

ANYONE TREATING AN OPEN CUT SHOULD USE RUBBER GLOVES. All blood waste is disposed of in the bin, located in the medical room.

## **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 or cold water. A note will be sent home with the child. The child's teacher should be informed and keep a close eye on the progress of the child. ALL bumped head incidents should be recorded in the accident file.

### Accident file

The accident book is located in the medical room, in the plastic drawers under the medical bed. Each year there is a new file. Old files are stored in the school office. Accidents are recorded chronologically.

For major accidents, a further LA agreed accident form must be completed within 24 hours of the accident. These forms are located in the school office. These forms need to be signed by the Principal, a copy taken and the original copy forwarded to the LA.

## Calling the emergency services

In the case of major accidents, it is the decision of the fully trained first aider in consultation with the Principal if the emergency services are to be called. All staff are expected to support and assist the trained first aider in their decision. A mobile telephone is available in the medical room.

If a member of staff is asked to call the emergency services, they must,

- 1. State what has happened
- 2. The child's name
- 3. The age of the child
- 4. Whether the casualty is breathing and/or unconscious
- 5. The location of the academy

If the casualty is a child, their parents should be contacted immediately and given all the information required. If the casualty is an adult, their next of kin should be called immediately. All contact numbers for children and staff are located in the school office. All visitors and volunteers to school are required to complete a next of kin form in case of emergency whilst on the premises. The first aider and a member of the Senior Leadership team should accompany the child in a staff vehicle to hospital. If a parent is not available when the ambulance is leaving the school a senior member of staff will accompany the child in the ambulance.

## **Medicines in School**

Mrs Norton and Mrs Brown can administer medication in Benedict Biscop CE Academy.

#### What can be administered?

In school we will administer medicines such as antibiotics, anti-histamine, cough mixture, throat lozenge, creams and paracetamol etc <u>only when it has been prescribed by a doctor and clearly labelled with the child's name and dosage requirements.</u>

There will be 2 members of staff present who will countersign to ensure that the medicine has been administered at the time stated, according to the Academy procedures to protect the safety of pupils and staff.

#### COUGH MIXTURE/THROAT LOZENGES

Will only be administered when it has been prescribed by the GP

#### *PARACETAMOL*

When it has been prescribed by the GP

#### **CREAMS**

We can administer creams for skin conditions such as eczema when it has been prescribed. HOWEVER, staff must not rub cream onto a child's body, unless agreed with the parents. With agreement, application of these creams must be made under the observation of another adult.

#### Parental permission

Medicines will not be administered unless we have the written consent of parents. A consent form must be filled in with a member of staff who is qualified to administer medication.

In the event of a child coming into school with medicines without a consent form being filled in, the medicine **will not** be administered.

# Where medicine is stored

No medicines should be kept in the class or in the child's possession (except inhalers). All medicines are kept in the medical room fridge or the locked cupboard, or the medical cabinet in the nursery. Administration of medicines takes place in the medical room or nursery office.

All medicines to be sent home during holidays or destroyed and locked cabinets left open in accordance with national procedures.

The Principal [or designated representative] must sign all new medicines into school.

# Administration of medicines file

All medicine consent forms are in the current medication file which is kept in the medical room. Once medication is complete forms are transferred to the completed medication file. Old files are stored in the medical room.

Before administering medicines, staff should read the date entry section of the form to check that the medicine has not already been administered.

When medicine is administered staff must complete the dated entry of this and countersigned.

Procedures are in place for when a child goes to after school club – the date and time of when the medication was administered is recorded on the medical room wall so that the After School Supervisor will check before administering any further medication so that dosages are not exceeded.

## Asthma and other medical problems

At the beginning of each academic year, any medical problems are shared with staff and a list of these children and their conditions is kept in the class register. New signs are made of children with severe medical problems such as allergies. These signs and notices [not photographs] are displayed in the medical room and all staff have a copy which is given to them at the beginning of the year.

# Epipens and anaphylaxis shock training

Some children require epipens to treat the symptoms of anaphylaxis shock.

Epipens are all kept centrally in the medical room inside the locked cupboard (as advised by Sunderland safeguarding team).

Staff receive regular training on the use of epipens.

Children who require these epipens are listed with details - as above.

#### **Inhalers**

Children have their inhalers with them at all times. Key Stage 2 children are expected to take their inhalers with them whenever they do rigorous activity.

Key stage 1 children will keep their inhalers with their class teacher for safety.

# OTHER ASTHMA SUFFERERS CANNOT SHARE INHALERS.

In the event of a child having an asthma attack, who has no inhaler, the parents must be sought quickly by phone to give permission for the administration of someone else's inhaler. If parents cannot be located, then the emergency services will be contacted and they would give permission for the sharing of the inhaler. ONLY IN AN EMERGENCY.

#### Headlice

Staff do not touch children and examine them for headlice. If we suspect a child has headlice we will inform parents. When we are informed of a case of headlice in school, we send a note to the class where the case has been identified.

## 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 24 hours after the last symptom has elapsed.

#### **Conjunctivitis**

If a child is suspected of having conjunctivitis they will be sent home and the parents will be advised to seek medical advice. If diagnosed, children should stay off school until the infection is completely clear because it is highly contagious.

# Chicken pox and other diseases, rashes

If a child is suspected of having chicken pox etc, we will look at their arms or legs. To look at a child's back or chest would only be done if we were concerned about infection to other children. In this case another adult would be present and we would ask the child if thos was acceptable.

# **Specialist Medication**

- All children requiring specialist medication such as RITOLIN, EPIPENS, etc will be subject to a medical plan which will be signed off by consultants through the school nurse.
- These will be copied for staff and will accompany a child to hospital in the event of an emergency.