

**Ingleby Mill Primary School**  
**Policy for First Aid and**  
**Administering Medicine in**  
**School**





# Statement of Organisation

The school's arrangements for carrying out the policy include nine key principles.

- Places a duty on the Governing body to approve, implement and review the policy.
- Place individual duties on all employees.
- To report, record and where appropriate investigate all accidents.
- Records all occasions when first aid is administered to employees, pupils and visitors.
- Provide equipment and materials to carry out first aid treatment.
- Make arrangements to provide training to employees, maintain a record of that training and review annually.
- Establish a procedure for managing accidents in school which require First Aid treatment.
- Provide information to employees on the arrangements for First Aid.

# Arrangement for First Aid

## Materials, equipment and facilities

The school will provide materials, equipment and facilities as set out in DfE 'Guidance on 'First Aid for schools'.

The Appointed Person: Currently the Appointed person is Joanne Measor. The appointed person is responsible for the arrangement of adequate First Aid training for staff.

Each team has their own First Aid Box. These need to be stored where they are visible and easy to access. A first aid green and white cross will be on the front of the cupboard where the First Aid Boxes are stored. There is also a First Aid Box in the staffroom and portable First Aid Boxes are also located in the staffroom. It is the responsibility of each team to ensure the stock of equipment in the boxes are maintained and are not running low. There is a weekly check table in each team which must be initialled each week to evidence that the first aid equipment has been checked and that it is fit for purpose. The main supply of first aid equipment is held in the staff room and Jackie Nann is responsible for ensuring this is maintained.

## Head injuries

Any bump to the head, no matter how minor is treated as serious. All bumped heads should be treated with an ice pack. Children should receive a bumped head sticker. The adults in the child's class-room should keep a close eye on the child. All bumped head accidents should be recorded by completing an accident form and a bumped head injury letter should be taken home along with a copy of the accident form.

Parents should be called if the child has a serious cut on the head, a large bump (egg) or mark on the head or there are obvious signs of concussion. Children who have a concussion after a head injury will need to be taken to hospital.

## **Allergic reaction**

Children in school who have severe allergies may have an Epi-pen. Staff who will be working in close contact with these children will receive Epi-pen awareness training. This training is also covered in Paediatric First Aid Training.

## **Record Keeping**

### **First Aid and Medicine files**

A record of children's medical conditions will be kept in the school office. A copy is also given to the SEND Coordinator, Headteacher, Deputy Headteacher and Lunchtime Assistants. Individual sheets for medical conditions will be given to the teachers where they have a child in their class with a medical condition form.

**Employees/ staff:** The school has a responsibility to provide first aid to all staff. In case of an accident/incident staff should seek First Aid from any of the qualified First Aiders. All First Aid treatment to staff should be recorded on an accident form. In case an accident/incident results in the individual being taken to hospital, where they receive treatment and are absent from work for 3 days or more, the appointed person needs to be notified. The appointed person and the Headteacher will review the accident and report to the Local Authority on an SP8 form.

### **Notifying parents/carers**

The school uses 2 different forms for parent notification. These are:

- **Head injury form**
- **Accident form**

Copies can be obtained from the school office.

# **Arrangement for Medicine in schools**

## **Administering medicine in school**

At the beginning of each academic year, any medical conditions are shared with staff and a list of these children and their conditions is kept in the office.

Medications kept in the school for children with medical needs, are stored in the staff room in the lockable fridge.

Medicine cannot be administered without a consent form being obtained from parents/carers. Copies can be obtained from the office and can be seen in the appendices below.

## **Asthma**

Children with Asthma do not require a medical condition form. In order for children's Asthma pumps to be kept in school an Administering Medication Consent form must be signed by parents. It is the parents/carers responsibility to provide the school with up-to date Asthma Pumps for their children. Adults in the classroom are to check the expiry date on the pumps regularly (at the end of each half-term) and inform parents should the pumps expire or run out. Asthma pumps should be carried by the person who it has been prescribed to, and clearly labelled with the child's name. Asthma sufferers should not share inhalers.

Inhalers are stored in the classrooms in a drawstring bag which is to be hung on the back of the teacher's cupboard door.

## **Epi-pens**

Children with Epi-pens require a medical condition form. In order for children's Epi-pens to be kept in school an Administering Medication Consent form must be signed by parents. It is the parents/carers responsibility to provide the school with up-to date Epi-pens for their

children. Adults in the classroom are to check the expiry date on the pens regularly (at the end of each half-term) and inform parents should the pens expire or run out.

Epi-pens are stored in the classrooms in a drawstring bag which is to be hung on the back of the teacher's cupboard door.

## **PE and Fire Drills**

Asthma pumps and Epi-pens should be taken outside when doing PE and should also be grabbed during evacuation of the school building e.g. during a fire drill.

## **Short term prescriptions**

Medications such as the short term use of antibiotics or painkillers can be administered only if the parent /carer fill out the 'Parental consent form for administering medicine' form on the day the request is made. The form can be obtained from the school office. Signed copies of the forms are stored in the school office. Parents need to give the completed form to the school office together with the medication. However, staff should encourage parents to administer medicine at home. Medication may be administered in school if it is required to be taken four (4) times a day. Only medication prescribed by a GP, Hospital or Pharmacy and clearly labelled with the child's name, address and required dosage can be administered in school. Non-prescription medication or creams and lotions should not be administered in school.

All medication should be stored in the lockable fridge in the staffroom.

If a child refuses to take a medicine, staff should not force them to do so. Instead they should note this in records and inform parents/ carers or follow agreed procedures or the Care Plan.

## **Record keeping - Medicine**

Staff should record any instances when medicine is administered. This includes if children use their asthma pumps. The records need to include, date and time of medicine administered, its name and the dose given, signed by the person responsible for administering the medicine. A copy of the medication log can be seen in the appendix below.

Medication logs are kept in the first aid cupboard of the shared areas for each team so that they are accessible for all staff.

## **Calling the Emergency services**

In case of a major accident, it is the decision of the fully trained first aider if the emergency services are to be called. Staff are expected to support and assist the trained first aider in their decision.

The Headteacher or Deputy Headteacher should be informed if such a decision has been made, even if the accident happened on a school trip or on school journey.

If the casualty is a child, their parents/ carers 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 available from the school office.

## **Headlice**

Staff do not touch children and examine them for headlice. If we suspect a child or children have headlice we will have to inform parents/carers. A standard letter should be sent home with all the children in that year group where the suspected headlice incidence is. If we have concerns over headlice the school nurse can be called in, who is able to examine children and also give advice and guidance to parents/carers on how best to treat headlice.



## **Chickenpox and other diseases, rashes**

If a child is suspected of having chickenpox, measles etc; we will look at the child's arms or legs. Chest and back will only be looked at if we are further concerned. We should call a First Aider and two adults should be present. The child should always be asked if it was ok to look.

For the inspection of other rashes the same procedure should be followed. If we suspect the rash to be contagious (such as scabies, impetigo, conjunctivitis, etc.) we need to inform parents and request that children are treated before returned to school. In most cases once treatment has begun it is safe for children to return to school.

It is the HeadTeachers duty to decide if there is an outbreak of infectious disease and whether there is a need to report it to the local HPU (Health Protection Unit).

## **Residential Visits and Educational Visits**

The school will make every effort to continue the administration of medication to a pupil whilst on trips away from the school premises, even if additional arrangements might be required. However, there may be occasions when it may not be possible to include a pupil on a school trip if appropriate supervision cannot be guaranteed. For residential visits, parents will be asked to complete a risk assessment for any child who may need medication.

**PARENTAL/CARER CONSENT TO ADMINISTER MEDICINE IN SCHOOL**

The school 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	
Name of school	Ingleby Mill Primary School
Name of child	
Date of birth	
Class	
Medical condition or illness	

**Medicine**

Name/type of medicine <i>(as described on the container)</i>	
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**

**Contact Details**

Name	
Daytime telephone no.	
Relationship to child	
Address	
Name of person in school who medicine is delivered to	

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 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 \_\_\_\_\_





