



## HIGH MARCH SCHOOL

### FIRST AID AND MEDICINES POLICY

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**This policy applies to the Early Year Foundation Stage,  
Key Stage 1 and Key Stage 2**

<b>Useful Websites</b>	
<a href="http://www.dfes.gov.uk">www.dfes.gov.uk</a>	
<a href="http://www.education.gov.uk">www.education.gov.uk</a>	

# High March School

## First Aid and Medicines Policy

This policy has two parts:

- First Aid
- Managing Medicines

### **First Aid**

#### **Introduction**

The timely and competent administration of First Aid can save lives and prevent minor injuries becoming major ones.

Under health and safety legislation employers have to ensure that there are adequate and appropriate equipment and facilities for providing First Aid in the workplace. The regulations relating to First Aid in schools are governed by the Health and Safety (First Aid) Regulations 1981, as amended.

These regulations require that First Aid facilities be provided for staff, pupils and visitors.

First Aid provision must be available at all times while people are on school premises, and also off the premises whilst on school outings.

#### **First Aid Personnel**

- Two members of staff at Upper School and two members of staff at Junior House have attended a three-day First Aid at Work course, or the equivalent. They are full-time members of staff and their training is renewed every three years. (See Appendix 1 for details).
- The School Nurse is a Registered General Nurse who is also registered on the Nursing and Midwifery Council. She holds a Paediatric First Aid Certificate, which is renewed every three years.
- The School Nurse and the Deputy Head (Pastoral) are also Mental Health First Aiders.
- We aim to have all Foundation Stage staff qualified as Paediatric First Aiders. This training is updated every three years. (See Appendix 3 for details).
- We aim to have all school staff including those who teach practical subjects, such as Science, Art, DT and Cookery trained in First Aid for Schools. This training is updated every three years. (See Appendix 4 for details).
- Staff at each site have undergone training in the use of the Defibrillator (See Appendix 4).
- Some staff have undergone training to administer specific medication. (See Appendix 5 for details).
- Key staff have undergone Managing Medicines Training. See Appendix 2.
- We will have one member of staff, qualified in First Aid for Schools, on each site at all times that children are present. There will be one qualified Paediatric First Aider on site at all times that Foundation Stage pupils are present.
- There will be at least one member of staff with a Paediatric First Aid Certificate on all Foundation Stage outings.

#### **Location of First Aid Cupboards and Boxes**

#### **First Aid Area/Room**

At Junior House there is a First Aid area and at Upper School a First Aid Room.

Both have all the necessary equipment, including:

- A basin
- A fridge

- A bed where pupils may lie down if needed
- A well-stocked First Aid cupboard
- A locked medicine cupboard (for pupils' own medication brought from home)
- Ice packs stored in the First Aid fridges
- A defibrillator, one of which is kept on the wall of the First Aid Area at Junior House and the other on the wall in the First Aid Room at Upper School. There is also a defibrillator in the reception of the swimming pool.

### **First Aid boxes**

First Aid boxes are located:

- in the School Minibuses
- at the Swimming Pool
- in the Art Room at Upper School
- in the Science Lab at Upper School
- in the First Aid Area at Junior House
- in the First Aid Room at Upper School
- in the outdoor classroom at Upper School

### **Portable First Aid bags**

Portable First Aid bags for taking on school trips are kept by the School Nurse at Upper School. These are returned to the First Aid room at Upper School and the School Office at Junior House after each trip so that they can be checked and restocked by the School Nurse before being put away. The School Nurse also maintains the portable First Aid bags that PE staff take with them for any sporting activities or fixtures. This bag is stored in the First Aid Room at Upper School.

### **Restocking First Aid Supplies**

All boxes and cupboards are inspected by the School Nurse termly and restocked as necessary.

### **Record Keeping**

All First Aid treatment is recorded in the book/record sheets provided for this purpose at Junior House and Upper School. All records include the date and time that the incident took place.

In the Foundation Stage, any First Aid that is administered must be reported to parents. There is a duplicate book for each Foundation Stage class, where First Aid treatment is recorded. Staff speak to parents about the incident and treatment at the end of the day and parents sign to indicate that they have been given the information.

In classes other than those in the Foundation Stage, parents are informed in writing of any bump to the head. There are specific notes for this purpose in the First Aid cupboards. When these notes are filled in, they will be copied so that one copy goes to the parent and the other goes on file. In Junior House the notes are filed in the child's file in the School Office. In Upper School they are stored in the First Aid room and transferred to the medical archive at the end of each school year. Bumped heads in the Foundation Stage are reported to parents in the usual way through the duplicate book.

In classes other than the Foundation Stage, parents are informed of an incident where the child has been very distressed or where it has been necessary to call for assistance from the designated First Aider. Staff will either ring the parents or speak to the parents at the end of the day depending on what is felt appropriate in the situation.

Where a pupil has been injured and it is necessary to call an ambulance or call the parents, the Self Duplicating Accident form will be completed and the bottom copy given to the parent/ambulance crew when the child is collected.

Where a pupil has had an accident that may require further medical attention, the School Nurse should be called to assess the injury and where necessary phone home and/or complete an accident report form. When the School Nurse is off site, details of the accident including actions taken and a copy of the Accident Report Form should be made available to her to follow up the next school day.

In the event of a member of staff or a visitor being involved in an accident and needing First Aid, an Accident Form is filled in and returned to the Bursar. (See Appendix 7)

### **Ambulance**

In the event of an accident or where concern is raised over a child's wellbeing, the School Nurse will be called. A Designated First Aider will be called in her absence. The School Nurse will decide on when to call an ambulance. Where there is any doubt over the need to call an ambulance, we will always err on the side of caution.

If parents are unable to accompany a child to hospital then a member of staff will accompany the child in the ambulance and meet the parent there. No casualty will go to hospital unaccompanied.

### **Hygiene Procedures for Spillage of Body Fluids**

There are 'Urine and Vomit' packs available in each First Aid area/room. These should be used to clear up any spillage of bodily fluids. Antibacterial Spray should then be used to clean the area. Antibacterial Spray is located in the locked cleaning cupboards on each site. Vomit bowls are provided for use at Junior House and vomit bags at Upper School.

### **Medical Waste**

All contaminated material should be disposed of in the yellow clinical bins provided on each site including the swimming pool.

### **Keeping Children away from School after Illness**

Parents are asked not to send children to school when they are ill. This includes times when a child may have a raised temperature.

When a pupil has had sickness and/or diarrhoea they should be kept away from School for a full 48 hours after the last bout of sickness/diarrhoea.

### **RIDDOR**

Serious Injuries, Notifiable Illnesses and Dangerous Occurrences will be reported to the School Nurse, who in liaison with the Headmistress, who will contact RIDDOR via the official website (Google RIDDOR HSE)

## **Managing Medicines**

Medication will only be administered if it is essential i.e. '*when it would be detrimental to a child's health or school attendance not to do so.*' (P13 Supporting Pupils at School with Medical Conditions DfES 2014)

### **Parent Responsibilities**

At High March we rely on parents to keep us informed about any medical condition or treatment that their child requires. Parents are asked to provide information on medical needs upon enrolment to the school. They are required to provide up to date information on any medical needs that might arise whilst their child is a pupil at High March. It is the responsibility of parents to ensure that the correct medication is in school and in date.

### **Medication to be administered during the school day**

Long term and short term prescription medication in Junior House and Upper School can only be administered if prescribed by a GP, Dentist or Pharmacist.

### **Long Term Medication** (See Appendix 8 for the Protocol)

Parents will complete a **Care Plan**, for medication which is to be administered over a long period of time. This includes both **emergency and non-emergency** medications. They will discuss the matter with the School Nurse, where necessary.

### **Short Term Medication** (See Appendix 8 for the Protocol)

Where medication is to be administered on a short term basis, parents will contact the Receptionist at Junior House or the Administrator/PA to the Directors at Upper School and the form, 'Permission to Administer Medicine on a Short Term Basis', will be completed. (See Appendix 7)

The School Nurse informs all staff of the medical conditions/needs of the children at the beginning of each term and changes are communicated with staff as required.

The School Nurse will ask parents to review the Care Plans for each child at the end of each school year. The old paperwork will then be transferred to the Medical Archive for storage.

### **Staff Responsible for administering medication to pupils**

#### **In Junior House:**

- the School Nurse
- the Receptionist
- the PA to the Head
- the Lunchtime Supervisor

#### **In Upper School**

- the School Nurse
- the Deputy Head (Pastoral)
- the Deputy Head (Curriculum)
- the Administrator/PA to the Directors

In situations where these staff members are not available, we will aim for the medication to be administered by another member of staff who has undertaken a course in Managing Medicines. (See Appendix 2)

## **Storage of Medication**

All medication is stored according to the directions and in the original packaging.

### **Non-emergency medication**

Both long term and short term medications, are stored in the locked Medicine cupboards at Junior House and Upper School.

In Junior House a clear named box is set up for the child. The box contains:

- The Parent consent form is completed and records of the administration of the medication are maintained. (Permission to Administer Medication on a Short Term Basis)
- Records of administration
- The medication

Parents who need to bring medicine to school on a daily basis are responsible for collecting the medicine at the end of the day or providing medication specifically for use in school.

**Emergency medication** is stored in the unlocked First Aid cupboard at Junior House and the red medical bags, stored on the high hooks, in the First Aid room at Upper School.

At Upper School, Emergency medication is stored in the Red Medical bags which also contain:

- The Care Plan
- Records of administration
- The medication

At Junior House, Emergency medication is stored in a clear named box set up for the child. The box contains:

- The Parent consent form (Permission to Administer Medication on a Short Term Basis)
- Records of administration
- The medication
- Where a child has a second Adrenaline pen (AAI) or inhaler, this is stored in the red medical bag on the high hook in their classroom. The red bag will contain the Care Plan, Records of administration and the medication

Where medication requires refrigeration, it is stored in the small, lockable fridge in the First Aid area/room. The fridge temperatures are monitored and recorded on a daily basis to ensure the correct temperature is maintained.

At Junior House, the key for the medicine cupboard and fridge are stored on a hook in the First Aid cupboard. Spare keys are kept with the Bursar and the School Office.

At Upper School, the key for the medicine cupboard and the fridge are stored on the noticeboard in the First Aid Room. Spare keys are kept in the office of the Administrator/PA to the Directors, on a hook on the side of the cupboard.

See section on Emergency Medication for storage of Emergency Medication.

### **Staff Medication**

When Staff require medication, it should be stored securely out of reach of children.

### **Record Keeping for short term medication**

At Junior House, the office and at Upper School, Administrator/PA to the Directors keeps:

- a record of medicines brought in or collected by parents. (See Appendix 7 – Record of Medicines on site and their Location)
- record of short term medication that needs to be administered during the day. (See Appendix 7 – Log of Medicines to be Administered)

### **Record Keeping for Long term medication**

The following are kept on the inside of the medicine cupboard doors at both sites:

- The list of pupils requiring long term medication and the expiry dates for the medication
- The list of pupils with Permission to use the school Emergency Inhalers and Auto Injector Pens (AAI).

### **Administration of Medication**

Wherever possible, doses of medicine should be worked out so that they can be taken outside of the school day. However, where this is not possible, it will be administered in school, subject to the completion of the necessary forms giving permission for this to happen.

Medicine not in its original packaging cannot be administered.

Before administering medicine to a child the member of staff will check:

- The child's name
- Prescribed dose
- Expiry date
- Written instructions provided by the prescriber on the label or container
- Instructions given on the Parental Consent Form

Staff who administer medicines are trained as necessary.

Such medication is only administered following full permission from the parent.

After any medication is administered, forms are completed listing:

- the date
- time
- dose administered
- name of the person administering the medication. (See Appendix 7)

**Refusal** – If a child refuses to take **his or her** medication, staff will not compel **him or her** to do so. They will record in the child's record the refusal and any surrounding circumstances and will inform the parents as soon as possible and at the end of the day at the latest.

In the event that a child has a condition that requires specialist help eg. Adrenaline pens for anaphylactic shock or glucose monitoring for diabetes, training for staff will be sought so that all are knowledgeable and confident in taking care of the child's needs.

### **Administration of Paracetamol or Anti-Histamine**

#### **Upper School**

There are times when a pupil might suffer a headache or mild pain during the school day. In this situation it may be that the administration of paracetamol would enable them to finish the day in School. Where this is the situation in Upper School, a member of staff will ring the pupil's parent to discuss with them whether they would like to collect their child from school or give permission for a member of staff to administer a dose of paracetamol. Where permission is granted, it is recorded on the sheet for administering medicines (See Appendix 7). Details of the dose administered are also recorded on the sheet in the usual way. Parents are informed of the dose

and time of administration through a note that is placed in the Homework Diary. See Appendix 7 – Record of Medicine Administered (for Parents)

A school bottle of anti-histamine is stored with the medicines at Upper School in case it is required. Parental permission is always sought before administering a dose of anti-histamine.

### **Junior House**

Paracetamol is not administered to pupils in Junior House unless parents have provided a supply of the medicine and completed the necessary paperwork. Where a pupil in Junior House suffers pain that impacts on their ability to finish the day in School, parents are contacted and asked to collect the pupil.

## **Emergency Medication**

### **Emergency procedures**

Actions to be taken in an emergency and what constitutes an emergency for a particular child are contained in the child's Health Care Plan. All staff will be made aware of children with Care Plans. Copies of the Care Plans are in files in the First Aid Room at Upper School and in the First Aid area at Junior House so that they are readily available for consultation in the event of an emergency.

### **Adrenaline pens (AAI pens)**

In **Junior House**, where the Care Plan indicates that a pupil requires an Adrenaline pen parents will be requested to provide two Adrenaline pens. In the event that an Adrenaline pen is needed by the child, the second will act as a safeguard and will be administered five to ten minutes after the first if advised by medical staff with the Ambulance Service. One Adrenaline pen will be stored in the emergency medicine cupboard in the First Aid area and the second will be stored in the red medical bag which will be kept on the high hook in the child's classroom. The red medical bag will be taken with the child by the staff whenever the pupils leave the Junior House campus, including visits to the swimming pool.

At **Upper School**, children who need Adrenaline pens, are required to have two Adrenaline pens in school. These are stored in a red medical bag and kept on the high hooks in the First Aid Room. The School Nurse ensures that the red medical bags are taken on outings and other occasions when pupils leave the Upper School campus. The PE Staff are responsible for taking the red medical bags to the swimming pool and to any sporting fixtures.

An ambulance is always called where an Adrenaline pen has been administered.

### **School Emergency Auto Injector Pens (AAI pens)**

High March has emergency AAI Pens for use by a pupil who has been prescribed an AAI pen and has been given permission by their parent to use the School's AAI pen should their own AAI pen fail or not be available for use.

Junior and adult dose AAI pens are kept:

- in the swimming pool by the first aid kit, on a high hook on the wall.
- in the Junior House emergency medication cupboard.
- at Upper School the adult dose AAI pens are kept in the unlocked medicines cupboard and on the wall under the A.E.D in the First Aid Room.

The number and dosage of pens kept in school are determined by the number of pupils in school with prescribed AAI pens.

High March has purchased AAI pens, our brands are Epipens, Emerade and Jext Pens.

## **Asthma Inhalers**

### **Junior House**

- Pupils who have **rapid onset** of symptoms will have one inhaler in the red medical bag kept on the high hook in the classroom and in addition they will have a second inhaler kept in the Emergency Medicine cupboard in the First Aid area.
- Where pupils have a **slower onset** of symptoms, one inhaler will be kept in the Emergency Medicine cupboard in the First Aid area.

### **Upper School**

- All inhalers are kept in the named red medical bags which are kept on the high hooks in the First Aid Room.

In Junior House, where symptoms do not come on rapidly and only one inhaler is kept in the First Aid area, it will be included in the red medical bag when pupils go on outings.

The need to take emergency medicine is highlighted in the Risk Assessment for each outing.

### **School Emergency Inhalers**

In addition to pupils having their own inhalers as required, there are emergency inhalers at Upper School, at Junior House and at the swimming pool.

These are used accordingly:

- The inhaler will only be used by children who have asthma or have been prescribed a reliever inhaler and for whom written parental consent has been given for use of the emergency inhaler. The list of pupils with permission to use the School's emergency inhaler is kept on the inside of the First Aid cupboard door at both Junior House, and Upper School and the swimming pool.
- The emergency inhaler will only be used when the child's own inhaler (or both inhalers) has been tried and found not to be working. The emergency inhaler will be administered in the same way as the child's own inhaler is administered.
- The emergency inhaler will be used with the child's own spacer if at all possible. There is a supply of disposable spacers for use with the emergency inhaler where the child's spacer is not available.
- Where the emergency inhaler has been administered, a record of the details of administration will be kept.
- The emergency inhalers will be checked by the School Nurse on a regular basis to ensure that they are present and in working order.
- The emergency inhalers should be primed when first used (eg. spray twice).
- After use the inhaler should be cleaned by removing the canister from the plastic housing. The housing and the cap should be cleaned in warm, soapy water and left to dry in air in a clean, safe place. The canister should be returned to the housing when it is dry and the cap replaced and the inhaler returned to the designated storage place.
- Where there has been contamination with blood, the inhaler should be disposed of properly.
- The emergency inhalers are clearly labelled to avoid confusion with a child's inhaler.
- Where agreed with parents, pupils in Upper School may carry their asthma inhalers with them.

### **Red medical bags**

All red bags have a photograph of the child on the outside of the bag for easy recognition in the case of an emergency.

## **School Outings**

Before a school outing is undertaken an additional Risk Assessment will be carried out in relation to children with medical needs. This information will be recorded on the Risk Assessment form for the outing. Steps will be taken to minimise risks and to ensure that all children can be included on the trip.

Medicine, for children who may require it on the trip, will be carried by the member of staff allocated to that child for the trip or by the child's parent if they are attending the trip. Specific medication administered should be recorded on the Medication Administration Form. At Upper School any other medication administered will be recorded in the Duplicate Book included in the trips medical bags.

## **Upper School**

- The School Nurse is responsible for ensuring the relevant medication is available on outings.
- Pupils who have Adrenaline pens in a red medical bag, will wear the bag around their waist, where practical. The red medical bag will contain a copy of the Care Plan. and emergency procedures for that child.
- If it is thought that additional staffing is necessary to ensure the safety and enjoyment of the trip by everyone, this will be put into place.
- Adults supervising children with medical needs and the trip leader will carry mobile phones.

## **Junior House**

- The School Nurse is responsible for ensuring that the relevant medication is available on outings.
- Staff will collect the medication from the Receptionist before the outing and return it afterwards. The School Nurse Receptionist will ensure that the records are updated showing where the medication is.
- If it is thought that additional staffing is necessary to ensure the safety and enjoyment of the trip by everyone, this will be put into place.
- Adults supervising children with medical needs and the trip leader will carry mobile phones.

## **Infectious Diseases**

Where a child is found to have an infectious disease, the School will inform all parents that a case of the illness has been identified in a pupil at the School and advice on symptoms to watch for will be given as well as advice to seek medical help in case of any doubt.

## **Dietary Requirements**

Kitchen staff are informed of allergies that might affect what a child is able to eat, upon completion by the parent of the Dietary Notification Form. The original Dietary Notification Form is stored in the pupil's file in the School Office and a copy passed to the kitchens is stored in the file with the Care Plans which is kept in the Medicine cupboard at Junior House and at Upper School it is kept in the top of the filing cabinet which is in the First Aid room. The School Nurse will upload the Dietary Notification Form on to the pupil's personal Profile on Engage and she will activate an alert to be sent to the Head of Junior House and the Deputy Head (Pastoral). At Junior House, copies of these forms are placed in a file in the kitchen office on a board, which is and are available to staff who are on duty. The board is only on display during mealtimes. At Upper School, the information is displayed inside a folder in the kitchen, so that staff who are on duty are able to check the dietary needs of any of the children.

### **Sun Protection in School**

During warmer weather, parents are reminded that pupils should wear their sports caps for PE lessons and have a bottle of water available in School. We also recommend that parents apply a 'once a day' sun cream product of factor 30 or above before the girls come in to School. At Upper School we will hold 4 bottles of Boots Soltan hypo allergenic sun cream, Factor 50 to be offered to girls who have not had protection applied and who are taking part in an outdoor activity such as a match after school, their Games afternoon or an outdoor Educational Visit. This will not be routinely administered, but offered when there will be prolonged exposure to the sun and where children have not had protection applied in the morning. Parents who do not wish their child to be offered sun cream by High March are asked to opt out by emailing the School Nurse. The sun cream will be stored in the First Aid room and will be taken off-site in the First Aid bags by staff as required.

### **Confidentiality**

At High March we respect the child's right to confidentiality and information will be shared with relevant staff members who need to be informed after discussion with parents and obtaining their specific consent.

## **Appendix 1**

### **Designated First Aiders**

Lyn Cole is the School Nurse. She is a Registered General Nurse.

The following members of staff have completed the First Aid at Work training.

<b>Name of Staff Member</b>	<b>Name of Course</b>	<b>Date of latest training</b>	<b>Provider</b>
Michelle Honiball	First Aid at Work (3 day training) Requalification	28/03/17 29/03/17	St. John Ambulance
Claire Mullin	First Aid at Work (3 day training) Requalification	14/11/18 15/11/18	St. John Ambulance
Kate Stuhldreer	First Aid at Work (3 day training) Requalification	01/11/18 02/11/18	St. John Ambulance
Gill Cook	First Aid at Work (3 day training) Requalification	25/09/17 26/09/17	St. John Ambulance

## **Appendix 2**

### **Staff trained in Managing Medicines**

<b>Name of Staff Member</b>	<b>Name of Course</b>	<b>Date of latest training</b>	<b>Provider</b>
Lyn Cole Nurse	Medicine Awareness Foundation Course for Schools	12/11/18	Opus
Sue Clifford Head	Administration of Medicine in Schools Level 2	07/02/2019	Educare
Kate O'Shaughnessy Teacher	Administration of Medicine in Schools Level 2	07/02/2019	Educare
Michelle Honiball Head of Junior House	Medicine Awareness Foundation Course for Schools	20/11/18	Opus
Claire Mullin Assistant Head of Junior House	Medicine Awareness Foundation Course for Schools	18/12/18	Opus
Kate Stuhldreer Deputy Head (Pastoral)	Medicine Awareness Foundation Course for Schools	04/01/19	Opus
Gill Cook Deputy Head (Curriculum)	Medicine Awareness Foundation Course for Schools	21/11/18	Opus
Rebecca Garlick Head of PE	Medicine Awareness Foundation Course for Schools	07/01/19	Opus
Tanya Cockcroft School secretary/PA to the Headmistress	Medicine Awareness Foundation Course for Schools	03/01/19	Opus
Jo Stevenson Administrator/PA to the Directors	Medicine Awareness Foundation Course for Schools	04/01/19	Opus
Ana Ridley Receptionist	Medicine Awareness Foundation Course for Schools	08/01/19	Opus
Susie Matthews Nursery Classroom Assistant	Medicine Awareness Foundation Course for Schools	26/01/19	Opus
Lorraine Sargeant Midday Supervisor	Medicine Awareness Foundation Course for Schools	07/01/19	Opus
Sara James PE Teacher	Medicine Awareness Foundation Course for Schools	07/01/19	Opus
Alex Dale Reception Teacher	Medicine Awareness Foundation Course for Schools	13/11/18	Opus

### Appendix 3

#### Paediatric First Aiders

<b>Name of Staff Member</b>	<b>Name of Course</b>	<b>Date of latest training</b>	<b>Provider</b>
Lyn Cole	Paediatric First Aid	16/05/17	NDA First Aid Training
Christine Rolfe	Paediatric First Aid	05/09/17 06/09/17	CJ Group
Michelle Honiball	Paediatric First Aid	05/09/17 06/09/17	CJ Group
Wendy Rickman	Paediatric First Aid	05/09/17 06/09/17	CJ Group
Wendy Tungate	Paediatric First Aid	05/09/17 06/09/17	CJ Group
Alex Dale	Paediatric First Aid	05/09/17 06/09/17	CJ Group
Tina Franklin	Paediatric First Aid	05/09/17 06/09/17	CJ Group
Karin Haumann	Paediatric First Aid	05/09/17 06/09/17	CJ Group
Alpna Mooney	Paediatric First Aid	05/09/17 06/09/17	CJ Group
Fiona Pitman	Paediatric First Aid	05/09/17 06/09/17	CJ Group
Lorraine Sargeant	Paediatric First Aid	05/09/17 06/09/17	CJ Group
Liz Robinson	Paediatric First Aid	05/09/17 06/09/17	CJ Group
Teresa Mulkern	Paediatric First Aid	18/10/16 18/10/16	CJ Group
Katie Hill	Paediatric First Aid	08/09/16 09/09/16	

## **Appendix 4**

### **Emergency First Aiders – Teachers’ First Aid which included defibrillator training**

<b>Name of Staff Member</b>	<b>Name of Course</b>	<b>Date of latest training</b>	<b>Provider</b>
Belinda Avery	First Aid for Schools	05/09/17	The CJ Group
Anna Baxter	First Aid for Schools	05/09/17	The CJ Group
Mike Chapples	First Aid for Schools	05/09/17	The CJ Group
Sue Clifford	First Aid for Schools	05/09/17	The CJ Group
Herrick Hayes	First Aid for Schools	05/09/17	The CJ Group
Gillian McAlister	First Aid for Schools	05/09/17	The CJ Group
Beverley Reid	First Aid for Schools	05/09/17	The CJ Group
Moira Whittlely	First Aid for Schools	05/09/17	The CJ Group
Kate Chapples	First Aid for Schools	05/09/17	The CJ Group
Sue Dunster	First Aid for Schools	05/09/17	The CJ Group
Adele Gray	First Aid for Schools	05/09/17	The CJ Group
Claudia Jackson	First Aid for Schools	05/09/17	The CJ Group
Beverly Mackay	First Aid for Schools	05/09/17	The CJ Group
Jo Stevenson	First Aid for Schools	05/09/17	The CJ Group
Linda Bissett	First Aid for Schools	05/09/17	The CJ Group
Tracey Cook	First Aid for Schools	05/09/17	The CJ Group
Emily Green	First Aid for Schools	05/09/17	The CJ Group
Tanya Crockford	First Aid for Schools	05/09/17	The CJ Group
Amanda Dale	First Aid for Schools	05/09/17	The CJ Group
Jenni Nurse	First Aid for Schools	05/09/17	The CJ Group
Helen Pearce	First Aid for Schools	05/09/17	The CJ Group
Ana Ridley	First Aid for Schools	05/09/17	The CJ Group
Anna Taylor	First Aid for Schools	05/09/17	The CJ Group
Kate Eardley	First Aid for Schools	05/09/17	The CJ Group
Lisa Ivey	First Aid for Schools	05/09/17	The CJ Group
Kate O’Shaughnessy	First Aid for Schools	05/09/17	The CJ Group
Zoe Sheppard	First Aid for Schools	05/09/17	The CJ Group
Hanna Wallington	First Aid for Schools	05/09/17	The CJ Group
Julia Halford	First Aid for Schools	05/09/17	The CJ Group
Jo Kilbourn	First Aid for Schools	05/09/17	The CJ Group
Naomi Slattery	First Aid for Schools	05/09/17	The CJ Group
Katy Aarons	First Aid for Schools	05/09/17	The CJ Group
Amanda Davey	First Aid for Schools	05/09/17	The CJ Group
Rebecca Garlick	First Aid for Schools	05/09/17	The CJ Group
Sue Green	First Aid for Schools	05/09/17	The CJ Group
Sharon Hill	First Aid for Schools	05/09/17	The CJ Group
Sara James	First Aid for Schools	05/09/17	The CJ Group
Alex Pemberton	First Aid for Schools	05/09/17	The CJ Group

## Appendix 5

### Staff Trained to Administer Specific Medication

<b>Name of Staff Member</b>	<b>Name of Course</b>	<b>Date of latest training</b>	<b>Provider</b>
Claire Mullin	Adrenaline Pen Training	14 <sup>th</sup> January 2019	School Nurse
Fiona Pitman	Adrenaline Pen Training	14 <sup>th</sup> January 2019	School Nurse
Louise Hollander	Adrenaline Pen Training	14 <sup>th</sup> January 2019	School Nurse
Alex Dale	Adrenaline Pen Training	14 <sup>th</sup> January 2019	School Nurse
Wendy Tungate	Adrenaline Pen Training	14 <sup>th</sup> January 2019	School Nurse
Katie Hill	Adrenaline Pen Training	14 <sup>th</sup> January 2019	School Nurse
Alpna Mooney	Adrenaline Pen Training	14 <sup>th</sup> January 2019	School Nurse
Katy Aarons	Adrenaline Pen Training	14 <sup>th</sup> January 2019	School Nurse
Naomi Slattery	Adrenaline Pen Training	14 <sup>th</sup> January 2019	School Nurse
Jenni Nurse	Adrenaline Pen Training	14 <sup>th</sup> January 2019	School Nurse
Sue Clifford	Adrenaline Pen Training	14 <sup>th</sup> January 2019	School Nurse
Michelle Honiball	Adrenaline Pen Training	14 <sup>th</sup> January 2019	School Nurse
Mike Chapples	Adrenaline Pen Training	7 <sup>th</sup> February 2019	School Nurse
Sue Dunster	Adrenaline Pen Training	7 <sup>th</sup> February 2019	School Nurse
Gill Cook	Adrenaline Pen Training	7 <sup>th</sup> February 2019	School Nurse
Kate O'Shaughnessy	Adrenaline Pen Training	February 2019	School Nurse
Lorraine Sergeant	Adrenaline Pen Training	February 2019	School Nurse

## Appendix 6

### Action Plan for all head injuries

If a child sustains a head injury during your lesson/activity be aware of the following possible symptoms:

- Brief loss of consciousness
  - Dizziness, nausea
  - Short term memory loss, headache
  - Lumps and bumps
1. Assess the injury. **Do not** leave the casualty and if concerned in any way, send another adult/child to the front office at Junior House or the Staffroom at Upper School, for extra assistance or use a phone (**for nearest phone see below**).
  2. Make the child comfortable and monitor symptoms for deterioration.
  3. Where there is concern inform the School Office (ext. 221 or 232). They will contact the parent/guardian and inform them of the injury and arrange for possible collection of child. If the Office is closed, emergency contact numbers are available on Engage. A list of emergency contact phone numbers can be found in the Medical Room at Upper School and the Medical Cupboard at Junior House. The **PE Staff** are to ensure that Emergency Contact numbers are taken to all fixtures that take place away from the school.
  4. Complete a **Head Injuries Form** as detailed on Page 2 of this Policy.
  5. Record all the relevant details in the Accident Book (located in First Aid Room at Upper School or the First Aid area in Junior House) before you leave the premises.
  6. Ice packs, if necessary, are found in the First Aid fridges at both sites.

#### **Nearest phone to:**

**Netball Court** – in Music block

**Astroturf** – in Art Room, or downstairs in Acacia

**Swimming Pool** – in Pool Foyer

Other phones located in Upper School Staffroom, First Aid Room, Deputy Head's Office, Computer Room.

At Junior House – outside Reception classes, in 1M, in corridor outside NWR, in corridor outside Year 2 classes

**Press 9 for an outside line**

## **Appendix 7**

### **Forms for the Medicine File**

1. Agreement for Medicine to be administered in School on a Short Term Basis
2. Health Care Plan
3. RECORD OF MEDICINES ON SITE AND THEIR LOCATION  
Medicines administered on a Long Term Basis
4. RECORD OF MEDICINES ON SITE AND THEIR LOCATION  
Medicines administered on a Short Term Basis
5. Log of Medicines to be Administered
6. RECORD OF MEDICINE ADMINISTERED
7. RECORD OF MEDICINE ADMINISTERED (FOR PARENTS)
8. Bumped Head Note
9. Accident form for Staff/Visitors at High March



High March

**Agreement for Medicine to be administered in School on a Short Term Basis**

Name of Child: \_\_\_\_\_ Form: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Illness: \_\_\_\_\_

**Medicine**

- Medicines must be in the original container as dispensed by the pharmacy.
- A separate form for each medicine is required.

Name of medicine as described on the container: \_\_\_\_\_

Date dispensed: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

Dosage: \_\_\_\_\_ Time(s) of Day: \_\_\_\_\_

Are there any side effects that the school should know about? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Name of Parent / Carer: \_\_\_\_\_

Contact telephone numbers: \_\_\_\_\_

I understand that I must deliver the medicine personally to the **Receptionist at Junior House** or the **Deputy Head (Pastoral) at Upper School**. I accept that this is not a service that the School is obliged to undertake. I understand that it is my responsibility to collect the medicine from the School at the end of the day. I understand that I must notify the School of any changes in writing.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**This arrangement will continue until (either the end of the course of medicine or until instructed by parents) \_\_\_\_\_ (Date)**

## HEALTH CARE PLAN



Photo
-------

Date form completed:

Pupil name

Pupil form

Date of birth

Member of staff responsible

Medical diagnosis or condition  
**A SEPARATE FORM MUST  
BE COMPLETED FOR  
EACH CONDITION**

Asthma sufferers, permission to  
use school inhaler (please  
circle)

Yes/No/Not Applicable

AAI users, permission to use  
school AAI pen (please circle)

Yes/No/Not Applicable

Describe medical condition and give details of pupil's individual symptoms


Daily care requirements (*e.g. before sport/at lunchtime*)

--

Describe what constitutes an emergency for the pupil, and the action to take if this occurs

--

Follow up care after an emergency


**Medicine 1**

Name of Medicine 1	
Time(s) to be administered	
Date dispensed	
Expiry date	
Dosage	
Are there any side effects that the school should know about?	
Any other instructions?	
Self-Administration?	

**Medicine 2**

Name of Medicine 2	
Time(s) to be administered	
Date dispensed	
Expiry date	
Dosage	
Are there any side effects that the school should know about?	
Any other instructions?	
Self-Administration?	

**Medicine 3**

Name of Medicine 3	
Time(s) to be administered	
Date dispensed	
Expiry date	
Dosage	
Are there any side effects that the school should know about?	
Any other instructions?	
Self-Administration?	

**Clinic/Hospital Contact**

---

Name

Phone no

**GP**

Name

Phone no

**Family Contact Information**

Name

Relationship to pupil

Phone no (work)

(home)

(mobile)

Name

Relationship to pupil

Phone no (work)

(home)

(mobile)

Care Plan Review Date

Form copied to


The above information is, to the best of my knowledge, accurate at the time of writing and I give consent for school staff to administer medicine in accordance with the school policy. I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication or if the medication is stopped.

**This arrangement will continue until (either the end of the course of medicine or until instructed by the parents).**

Date:

Signed:

## Parental Responsibility

### Adrenaline Pens

- It is my responsibility to ensure the adrenaline pens are in date and are renewed before the expiry date is reached.
- It is my responsibility to ensure my child has two adrenaline pens and antihistamine at school. Where the GP has only agreed to prescribe one adrenalin injector pen, I agree that I am aware of the advice of the MHRA and Anaphylaxis Campaign that a child should have two pens in school and I undertake to purchase a second adrenaline pen privately.

High March follows the guidance of the anaphylaxis campaign and the MHRA in our policy on anaphylaxis, which is:

#### **How many injectors should an allergic pupil have at school?**

The UK's Medicines and Healthcare Products Regulatory Agency (MHRA) advised in June 2014 that anyone who is at risk of suffering anaphylaxis should always have at least two adrenaline injector devices immediately available for use. The MHRA report said "It is acknowledged that in some cases, a single injection is not sufficient to achieve a response for a number of reasons, including severity of attack as well as the possibility that a dose has not been effectively administered; a second injection may therefore be needed." The Anaphylaxis Campaign supports this view.

### Other Medication including Asthma Inhalers

- It is my responsibility to ensure that the medication is in date and renewed before the expiry date is reached.
- It is my responsibility to ensure where my child requires an asthma inhaler and where there is rapid onset of symptoms he/she will have two inhalers in school. Where the symptoms come on gradually it is acceptable to have one inhaler at school. If in doubt as to whether my child requires one inhaler or two in school I will seek professional advice from my GP.

- It is my responsibility to keep contact numbers updated.
- I consent to staff having access to this Care Plan and that a copy will go out with teachers on school trips.
- I understand that Care Plans are reviewed annually. If I have any new details about my child's condition in the interim period, I will contact the School Office.

Date:

Signed:



## RECORD OF MEDICINES ON SITE AND THEIR LOCATION

### Medicines administered on a Short Term Basis

DATE RECEIVED	NAME OF CHILD	MEDICINE	LOCATION	Monday		Tuesday		Wednesday		Thursday		Friday	
				IN:	OUT:	IN:	OUT:	IN:	OUT:	IN:	OUT:	IN:	OUT:
				IN:		IN:		IN:		IN:		IN:	
				OUT:		OUT:		OUT:		OUT:		OUT:	
				IN:		IN:		IN:		IN:		IN:	
				OUT:		OUT:		OUT:		OUT:		OUT:	
				IN:		IN:		IN:		IN:		IN:	
				OUT:		OUT:		OUT:		OUT:		OUT:	
				IN:		IN:		IN:		IN:		IN:	
				OUT:		OUT:		OUT:		OUT:		OUT:	
				IN:		IN:		IN:		IN:		IN:	
				OUT:		OUT:		OUT:		OUT:		OUT:	
				IN:		IN:		IN:		IN:		IN:	
				OUT:		OUT:		OUT:		OUT:		OUT:	







High March

**Record of Medicine Administered**  
**(For Parents)**

**Child's Name:** \_\_\_\_\_

**Name of medication:** \_\_\_\_\_

**Dose given:** \_\_\_\_\_

<b>Date</b>	<b>Time</b>	<b>Staff signature</b>



High March

**Record of Medicine Administered**  
**(For Parents)**

**Child's Name:** \_\_\_\_\_

**Name of medication:** \_\_\_\_\_

**Dose given:** \_\_\_\_\_

<b>Date</b>	<b>Time</b>	<b>Staff signature</b>



Dear Parent,

(Name)..... bumped her his/her head at school today.

Date: .....

Time of incident: .....

Details of the accident and action taken:

.....

.....

.....

.....

.....

.....

.....

.....

**General Advice:**

Minor head injuries are common in people of all ages and should not result in any permanent damage.

The [symptoms of a minor head injury](#) are usually mild and short lived. Symptoms may include:

- a mild [headache](#)
- nausea (feeling sick)
- mild dizziness
- mild blurred vision

If your child experiences these mild symptoms after a knock, bump or blow to the head, you won't usually require any specific treatment. However, you should go to your [local accident and emergency \(A&E\) department](#) for a check-up.

If the symptoms significantly worsen or if they develop any new symptoms after being discharged, you should return to A&E straight away or call 999 and ask for an ambulance.

(NHS <http://www.nhs.uk/conditions/Head-injury-minor/Pages/Introduction.aspx> )

Date.....

Signed.....

# Accident Form for Staff / Visitors at High March



Name:	
Date and time of accident:	
Site of accident:	
Description of accident:	
Treatment:	
Printed name(s) of staff who assisted:	
Signature(s):	

Please send this form to the Bursar's Office.

## **Appendix 8**

### **Protocol to follow when parents ask for medicine to be administered in school**

#### **Medicine to be administered on a Short Term Basis**

##### **Junior House**

- Receptionist completes paperwork with the parent.
- Parents complete 'Agreement for Medicine to be administered in school on a Short Term Basis' form.
- A box is made up for the child that contains, the permission form and the 'Record of Medicine Administered' form. The end of the box is labelled with a yellow note to distinguish it from the long term medication in the cupboard.
- Medicine is stored according to the instructions on the label. It will either be stored in the Medicine cupboard or in the Medicine Fridge.
- Details of the Medication are recorded on 'Record of Medicines on Site and their Location' (Medicines administered on a Short Term Basis). The Receptionist will indicate on this sheet when the medicine is dropped off or collected by the parents, so that there is always an accurate record of the medication that is in school at any time. This form is kept by the Receptionist.
- When medication is administered, it is recorded on the 'Record of Medicine Administered' form.
- Medicine is administered in Junior House by the the School Nurse, Receptionist, the PA to the Headmistress or the Lunchtime Supervisor.

##### **Upper School**

- The School Nurse, Deputy Head (Pastoral), or in her absence the Deputy Head (Curriculum) or the Administrator/PA to the Directors completes paperwork with the parent.
- Parents complete 'Agreement for Medicine to be administered in school on a Short Term Basis' form.
- The paperwork is kept in the Medicine File in the First Aid Room.
- Medicine is stored according to the instructions on the label. It will either be stored in the Medicine cupboard or in the Medicine Fridge.
- Details of the Medication are recorded on 'Record of Medicines on Site and their Location' (Medicines administered on a Short Term Basis). The Administrator/PA to the Directors will indicate on this sheet when the medicine is dropped off or collected by the parents, so that there is always an accurate record of the medication that is in school at any time. This form is kept on the medicine fridge.
- When medication is administered, it is recorded on the 'Record of Medicine Administered' form.
- In Upper School medicine is administered by The School Nurse, the Deputy Head (Pastoral), the Deputy Head (Curriculum) or the Administrator/PA to the Directors.

## Medicine to be administered on a Long Term Basis

### Junior House

- Parents complete a Care Plan
- Where a child has a long term medical condition, Parents will meet with the School Nurse to discuss the child's needs.
- The School Nurse will set up a box for the child containing:
  - A copy of the Care Plan
  - 'Record of Medicine Administered'
  - The medication
- The end of the box is labelled with:
  - The name of the child
  - Date of birth
  - Class
  - Expiry Date of Medication
- The School Nurse:
  - Puts the original Care Plan in the pupil's personal file in the office.
  - Adds the Care Plan to Engage.
  - A copy of each Care Plan is stored in the relevant class red medical bag, along with a photo badge of each child on the outside of the bag.
  - The School Nurse notifies form staff when Care Plans have been added to Engage.
- Where there is a second inhaler or epi-pen, it is stored in the red medical bag on the high hook in the classroom.
- Other red medical bags are stored in the Medicine cupboard so that medicines can be put in them prior to pupils going on an outing.
- The medicines are entered on the 'Record of Medicines Stored on Site' and this is kept on the inside of the Medicine Cupboard door.
- Medicine is stored according to the instructions on the label.
- Medicine is administered in Junior House by the School Nurse, the Receptionist, the PA to the Headmistress or the Midday Supervisor.
- The School Nurse contacts parents one month before the expiry date of each Medicine. At the first reminder, parents are asked to provide updated medication, the following week a similar reminder is sent and if after this, the new medication is not received by the school, the following week, the Headmistress will contact parents to ask for the medication. Pupils may not attend school without the correct, in-date medicine available in school.  
The School Nurse keeps a record of all reminders that have been sent to parents.
- When parents bring in new medication:
  - The old medication should be given to the parent.
  - The School Nurse will update the expiry date of the medication on the Care Plan that is in the Medical File and the Care Plan that is stored in the clear box and the red bag/s
  - Record reminders for the new expiry date.

## Upper School

- Parents complete a Care Plan
- Where a child has a long term medical condition, Parents will meet with the School Nurse to discuss the child's needs.
- For emergency medication, the School Nurse will set up a red medical bag for the child containing:
  - The Care Plan
  - The medication
  - The Record of Medicine Administered
  - A photo badge on the outside of the red medical bag
- For non-emergency medication, the School Nurse will set up a box for the child containing:
  - The Care Plan
  - The medication
  - The Record of Medicine Administered
- The original copy of the Care Plan is stored in the child's file in the School Office
- A copy of the Care Plan is also kept in the red Medical File in the top drawer of the filing cabinet in the First Aid room.
- The School Nurse notifies form staff when Care Plans have been added to Engage.
- The medicines are entered on the 'Record of Medicines Stored on Site' and this is kept by the Administrator/PA to the Directors.
- The School Nurse makes a reminder one month before the expiry date of each Medicine. At the first reminder, parents are asked to provide updated medication, the following week a similar reminder is sent and if after this, the new medication is not received by the school, the following week, the Headmistress will contact parents to ask for the medication. Pupils may not attend school without the correct, in-date medicine available in school.
- The School Nurse will record when reminders are sent to parents.
- Medicine is stored according to the instructions on the label.
- Medicine is administered by the School Nurse, the Deputy Head (Pastoral), the Deputy Head (Curriculum) or the Administrator/PA to the Directors.
- When parents bring in new medication:
  - The old medication should be given to the parent
  - The School Nurse will update the expiry date of the medication on the Care Plan that is in the Medical File and the Care Plans that are stored in the clear box and the red bag/s. Record reminders for the new expiry date.

## APPENDIX 9

### RISK ASSESSMENT FOR STORAGE OF MEDICINES

	Hazard	Control Measures
Storage of Non-Emergency Medication	<ul style="list-style-type: none"> <li>Pupils may access medication independently.</li> </ul>	<ul style="list-style-type: none"> <li>Pupil medication is stored in locked medicine cupboards at both Upper School and Junior House. The keys are stored nearby but not accessible to children.</li> <li>Spare keys are stored with the Receptionist at Junior House and with the PA to the Directors at Upper School. In addition, the Bursar also holds spare keys to the Medicine cupboards.</li> </ul>
Medication requiring refrigeration	<ul style="list-style-type: none"> <li>Medicine might not be effective if it is not stored according to the instructions on the label.</li> </ul>	<ul style="list-style-type: none"> <li>Both the First Aid area in Junior House and the First Aid Room at Upper School have fridges for the storage of medication where this is required. The fridge at Upper School has a lock and the fridge at Junior House is in a locked cupboard.</li> </ul>
Staff Medication	<ul style="list-style-type: none"> <li>Pupils may access medication independently.</li> </ul>	<ul style="list-style-type: none"> <li>Staff medication is stored securely and out of reach of children.</li> </ul>
Emergency Medication	<ul style="list-style-type: none"> <li>The medication is not immediately accessible in the case of an emergency.</li> </ul>	<ul style="list-style-type: none"> <li>Adrenaline pens – pupils have two adrenaline pens. In Junior House one is stored in the red medical bag, which is kept on a high hook in the classroom (out of reach of children). The second is stored in the First Aid cupboard. Both adrenaline pens are stored with a copy of the Care Plan in case of an emergency. At Upper School both adrenaline pens are stored in the red medical bag which is stored on high hook in the First Aid Room. These medical bags are taken with the child whenever they leave the School site.</li> <li>Inhalers – At Junior House, where there is rapid onset of symptoms, there are two inhalers, one in the Red medical bag and the other in the Medicine Cupboard. Where the symptoms are slower to emerge, one inhaler is kept in the medicine cupboard. In Upper School either one or two inhalers are kept in the red medical bag, which is stored on the high hook in the First Aid Room.</li> </ul>

Emergency inhaler does not work	Pupils could suffer an asthma attack without the remedial effect of an inhaler.	<ul style="list-style-type: none"> <li>• School inhalers are stored in the Medicine Cupboards along with disposable spacers. There is also a School inhaler kept at the Swimming pool. School inhalers are also taken on outings where there are pupils who have permission to use the spare inhalers.</li> </ul>
Expiration of medication	Medicines will be ineffective	<ul style="list-style-type: none"> <li>• Advance notification system in place to alert parents to replace</li> <li>• Half termly check of medication in school.</li> </ul>
Children's Medical Information not to hand in an emergency	Children might not get the required care in the case of an emergency.	<ul style="list-style-type: none"> <li>• In Upper School the Care Plans are stored in the First Aid Room. At Junior House the Care Plans are stored in a file in the First Aid area. Copies of the Care Plans are on Engage and are stored with the medication in the First Aid cupboards and in the red medical bags.</li> <li>• At Junior House, where a child requires Emergency Medication, a box is made up for them to store the medication in the Medicine Cupboard. The box contains the medication as well as the Care Plan and permission to administer medication from the parents.</li> </ul>