

# Havannah Primary School

# Administration of Medicines

Summer Term 2024

# Havannah Primary School First Aid & Medicines Policy

#### Rationale:

Children and adults in our care 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; including the management and/or treatment of Asthma and Epilepsyand other serious health conditions.

# Purpose This policy;

- 1. Gives clear structures and guidelines to all staff regarding all areas of first aid and medicines
- 2. Clearly defines the responsibilities and the staff
- 3. Enables staff to see where their responsibilities end
- 4. Ensures the safe use and storage of medicines in the school
- 5. Ensures the safe administration of medicines in the school
- 6. Ensures good first aid cover is available in the school and on visits

#### Guidelines

New staff to the school are given a copy of this policy when they are appointed. This policy is reviewed and updated annually. 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.

The administration and organisation of first aid and medicines provision is taken very seriously at Havannah Primary School. There are annual procedures that check on the safety and systems that are in place in this policy. The school takes part in the Health and Safety checks by Cheshire East Council, these happen annually. Adjustments are made immediately if necessary.

# First Aid Policy Guidelines Training

All staff at Havannah Primary School are offered emergency first aid training. This is repeated on a 3 year cycle. Staff recruited mid cycle will be offered the training too. Dates of training are recorded on the school's Safeguarding Audit. Three members of staff are fully trained first aiders - having been accredited with the First Aid At Work Certificate. With three fully trained first aiders, there should always be one on the school premises at any one time. Fully trained first aiders attend retraining courses as required. We also have two Paedriatric first aiders.

#### First Aid kits

All staff, including Midday Assistants, are issued with their own first aid kit and carry this with them whenever they are on playground duty. Additional first aid kits are stored in the infant, lower junior and upper junior classroom areas.

#### Cuts

Cuts can be treated by any trained first aider. All open cuts should be covered after they have been cleaned with clean water or a medi wipe. All plasters used should be dermalogically tested to ensure that no child can have an allergic reaction to wearing one. (N.B. All parents/guardians are asked to complete a Medical Form that details any allergies when they register their child at Havannah Primary School). For more severe cuts a fully trained first aider must attend the patient to give advice. All cuts must be recorded in the Pupil Accident slips which are scanned and saved in the system. ANYONE TREATING AN OPEN CUT SHOULD USE RUBBER GLOVES. All blood waste is disposed of in the first aid bin, located in the courtyard.

## Bumped heads

Any bump to the head, no matter how minor is treated as serious. All bumped heads should be treated with a cold compress; and the child's teacher must be informed and asked to keep a close eye on the progress of the child throughout the remainder of the day. All bumped head incidents must be recorded in the Pupil Accident File and the child's parent/guardian must be contacted by telephone/text message to ensure that they are aware of the incident and the treatment provided BEFORE the child leaves that day. Concerned parents should always be invited to come into school to assess their child personally. Any trained first aider can apply a ice pack when a child or adult has bumped their head. However, if the child shows any signs of concussion then the advice of a fully trained first aider must be sort. The signs of concussion include: • Dizziness or nausea. • Loss of memory of any events that occurred at the time of, or immediately preceding, the injury. • Mild, generalised headache.

# Bumps & grazes to other parts of the body

If a child reports an injury to any part of their body that is above the knee but below the neck (not including the arms) - that is hidden by their clothing - then they must be asked if they are comfortable to show their injury to a trained first aider. In the event that a child needs to remove any clothing to expose the region that has been injured then another member of staff must be present. Any child who does not feel comfortable to do this should be encouraged to examine themselves privately, or with a friend, and report any marks, bruising or bleeding. If a child reports that they are injured but still feels uncomfortable to have the injury assessed by a first aider then their parents must be

contacted by telephone to make them aware of the situation; and that no treatment has been able to be carried out.

In the case of an emergency - and the need for a child to go to the A + E injuries unit at Macclesfield Hospital - the child's parent must be called immediately. If all contacts are unavailable two members of staff will take the child by car to the hospital and the parent will be informed as soon as possible. In the event of two members of staff needing to take a child to hospital, a photocopy of the child's DATA COLLECTION SHEET must also be taken with them. Calling the emergency services In the case of major accidents, 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.

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 school

In the event of the emergency services being called, a member of the Admin staff OR another member of staff, should wait at the the school gates and direct the emergency vehicle in through the school. 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 clearly located in the school office. Pupil Accident and Administration of Medication Files The Pupil Accident and Administration of Medication Files are located in the School Office. At the end of each term, records are removed, analysed and stored in the filing cabinet in the Administration Office.

For major accidents - where the casualty leaves school early or further medical advice and services are sought - this must be reported via the electronic remote PRIME system overseen by the Local Authority. This must be completed within 3 days of the accident taking place.

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 - including their photograph and details of their conditions - are kept:

1. On SIMS

- 2. In the school office
- 3. In the school kitchen
- 4. In the staffroom
- 5.In the staffroom

#### **Inhalers**

Children should have their inhalers with them at all times. The blue box in the clasrrom must be taken out during PE sessions conraining the inhalers. All children who have an inhaler will will keep their inhalers in their classroom in a secure place in a designated container for safety. OTHER ASTHMA SUFFERERS CANNOT SHARE INHALERS! In the event of a child having an asthma attack, who has no inhaler with them, the parents must be contacted and informed quickly (by telephone) and the emergency services contacted.

### Epipens and anaphylaxis shock

Some children require epipens to treat the symptoms of anaphylaxis shock. Epipens are kept in a secure place in the child's classroom. Staff receive regular training on the use of epipens. Another pen is kept in the school office in the red care plan box labelled with the childs name and photo.

#### Head lice

Staff do not touch children and examine them for head lice. If we suspect a child has head lice we will inform parents and ask them to examine them. When we are informed of a case of head lice in school, we send a standard letter 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 48 hours after the last symptom has elapsed.

Chicken pox and other diseases, rashes If a child is suspected of having chicken pox etc, we will only look at their arms or legs with the child's permission. 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 permission will be sought from the child. If a child has any of these infections they will need to stay off school for a prescribed period of time.

#### Parental responsibility

It is the responsibility of the parent to ensure their child's medical needs are met and it is therefore preferable that parents administer any medicines that their child needs. However, during the school day this is not always practical and in such cases, medicines may be administered by the school.

#### Prescribed medicines

Only medicines prescribed by a doctor, dentist or nurse practitioner will be given. Only medicines in their originally dispensed container will be accepted.

### Non-prescribed medicines

Non-prescribed medicines will only be given incase of an emergency or a doctor's note. No person under 16 should be given aspirin or ibuprofen unless prescribed by a doctor. If a parent wishes their child to be given non-prescribed medicine they can always arrange to come into school and administer the medicine themselves.

### **Emergency Medicines**

In the event of an emergency a main first aider will make a decision either independently or with the advice from emergency services to give medication if needed by an approved first aider until parents or medical help arrives.

#### Written agreement

Any medicine to be given by a school needs a prior written agreement from the parents. A form - "request for the school to give medication" - is in the school letters rack, in the entrance. This form must be filled in whenever a request is made for administering medicine at school.

### Responsibility for and administering of medicines

Any medicines brought into school by a parent must be delivered personally to the designated staff members only. Medicines for which the designated staff members have no written notification will not be administered. Only the designated staff member who accepts the medicine can administer it (to avoid double dosing).

#### Children with allergies and other long term conditions

Children who have been diagnosed with allergies, who may have an anaphylactic reaction are known to all the members of staff, details of their condition being posted in every classroom and in particular the school kitchen. Details (Health Care Plan) relating to their condition are kept in the Office. Details of children with other long term conditions, for example, asthma and allergies, are kept in the first aid box in each classroom.

### Record Keeping

As a further precaution and where the designated staff member is unavailable, all medicines given to a child are to be recorded in the medicines administered book - kept in the box file in the staffroom. A sticker "Notification of medicine administered" should be completed and given to parents/stuck in the

childs planner. The teacher responsible for the child should be informed of their condition

### Storage of Medicines

Medicines should be stored in the original container in which dispensed and in accordance with the product instructions. Staff should ensure that the medicine is clearly labelled with the child's name, name and dosage of medicine and frequency of administration. Medicines are stored in the locked cabinet in the staffroom. The child should know where their medicine is kept. Asthma inhalers and adrenaline (EPIPENS) are stored in the child's classroom in a labelled blue container. Any medicine that needs to be refrigerated should be labelled and stored in the first aid fridge in the staffroom. EPIPENS for children who have been diagnosed with allergies are also stored in a care plan box with their photograph and name on, in the school office.

# Staff Training

All staff were trained in the recognition of an anaphylactic reaction and the administration of adrenaline on the 5<sup>th</sup>September 2017. (See attached Health and Safety Guidance notes - "Administration of Medicines in Educational Establishments" (Section 6) - Asthma, Anaphylactic reaction.

#### Self administration of medicines

Children who are ready to do so, are encouraged to administer their own medicine under supervision, in regards to long term conditions such as asthma.

# Managing Medicines on school visits and outings

When a school visit or outing is planned, any child who has a medical condition is assessed as part of the risk assessment and appropriate action is put in place. This usually involves a designated staff member taking charge of the child's medical needs and, if necessary, safe transportation of medicines.