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Crowton Christ Church C.E. Primary School

First Aid Policy/Administering of Medicines

First Aid Policy/Administering of Medicines- Summer 2024	
Review Frequency	Annual
Reviewed and approved by	Full Governing Body
Date	14.5.2024
Headteacher Signature	<i>Lauren Hill</i>
Chair of Governors Signature	<i>Ruth Downes</i> <i>Sarah Thompson</i>
Date of next review	May 2025

Introduction

This policy sets out the practices to be followed in First Aid at Crowton Christ Church Primary School. As a Church of England school, we believe in the care and nurturing of our children.

1. First Aid on the school premises seeks to maintain the well-being of the patient until there is:
 - a) no longer any need for special care by first aider
 - b) help on hand from medically qualified personnel
2. Each day there is at least one qualified first aider on site. At present this is:
 - Paediatric - Mrs S Gerrard and Mrs C Leach (Classroom Assistants)
 - Paediatric - Mrs C Dunn and Mrs K Healey (Midday Assistant)
 - Paediatric – Miss M Porter (Teacher)
 - Emergency - Site Maintenance Officer – Mr V Akers
3. First Aid boxes containing the statutory requirements are located in all the building at the following sites:-
 - a) Classrooms 1 and 3 and outside classroom 4
 - b) Kitchen
 - c) Staff Room

Mrs S Gerrard and Mrs C Leach (Classroom Assistants) monitor and maintain the stock for these boxes.

Emergency inhalers and AAI's are kept in the cupboard in the staff room (locked) – see Supporting Pupils with Medical Conditions Policy.

4. An emergency telephone number for each child are located in the school office so that parents can be speedily informed of any accident to their child needing parental or professional care.

5. All accidents are recorded on the school accident form, which is located in Class 1. Parents receive a letter to inform that if their child has had any bumps around the head and face area.

6. For residential visits, the County advised format for detailed health information and parental consent to necessary hospital treatment is followed. An equipped emergency first aid box is carried by the teacher in charge of all day visits – if the RA states it is required.

7. Access to emergency telephone numbers for parents, ambulance and casualty hospital is always available.

The school also has an AEG defibrillator (in the main entrance) which is regularly checked by Mr V Akers.

The Administration of Medicines

1. Introduction

This policy has been drawn up in consultation with consultant community paediatricians in Cheshire and in the County Medical Health and Safety Service, the County's Legal Section and the recognised trade unions and professional associations and Headteacher representatives.

No teacher or other member of staff can be required to administer medicines. Any agreement to administer medicine by staff will be on a voluntary basis only

There are two main sets of circumstances in which requests may be made to the Headteacher to deal with administering of medicines and they are as follows:

1. Cases of chronic illness or long term complaints, such as asthma, diabetes or epilepsy.
2. Cases where children are recovering from a short-term illness are well enough to return to school but are receiving a course of antibiotics or *prescribed* cough medicine.

2. Assistance from Parents

It is preferable that parents, or an adult nominated by the parent, administer the medicine to their children. Ideally this could be affected by the child going home during a suitable break or by the parent visiting the school.

However, if this is not practicable the parent must request and complete the form '**Request for the school to administer medication**' (See Appendix 1)

3. The Headteacher's Responsibility

Each request for medicine is to be considered on its merits. Where it is thought necessary for the medicines to be administered, the Headteacher is to ensure that the guidelines are followed carefully. Whether agreeing or refusing to administer medicines in school, the Headteacher's decision will be defensible if it is clear that s/he has acted reasonably.

4. Guidelines

The school should receive a written request from the parent or carer. Long term illnesses, such as epilepsy or diabetes, should be recorded on the child's medical sheet, together with appropriate instructions given by the school nurse.

Medicines can only be administered if clearly labelled from the doctors with contents, owner's name and dosage and must be kept in a safe and secure place appropriate to the contents and away from children. They must be documented for receipt and dispatch

Only one member of staff at any one time should administer medicines to avoid the risk of double doses

If a pupil brings to school any medication for which the Headteacher has not received written notification, the staff will contact the parent for advice.

Clear records are kept of any medication administered in school.

In all cases where following the administration of medication there are concerns regarding the condition of the child, medical advice must be sought immediately.

5. Inhalers

Inhalers for children with asthma need to be readily available and are held in appropriate classes with their teacher.

6. Circumstances requiring special caution

Whilst the administration of all medicines requires caution, there are certain circumstances which require special attention before accepting responsibility for administering medicine when the parents are unable to come to school themselves. These are:

- a) Where the timing and nature of the administering are of vital importance and where serious consequences could result if a dose is not taken;
- b) Where some technical or medical knowledge or expertise is required;
- c) Where intimate contact is necessary.

In such circumstances, the Headteacher will consider the best interests of the child as well as considering carefully what is being asked of the staff concerned. If necessary, advice will be sought from the consultant community paediatrician or school doctor.

There should be clear written instructions for the administration of such medication which are agreed by the parents, teachers and advisory medical staff. Parents will be informed whenever a child is given such medication, which is not part of a regular regime.

7. Invasive Procedures

Some children require types of treatment which school staff may feel reluctant to provide e.g. the administration of rectal Valium, assistance with catheters, or the use of equipment for children with tracheotomies. There is no requirement for Headteachers and staff to undertake these responsibilities and in such circumstances the matter should be referred to the Local Authority.

Only staff who are willing and have been appropriately trained are to administer such treatment. This must be in accordance with instructions issued by the paediatrician or GP.

Training in invasive procedures should be conducted by qualified medical personnel. For the protection of both staff and children, a second member of staff must be present while more intimate procedures are being followed.

The regular injection of children by teaching staff is not supported. Where it is known in advance that a child may be vulnerable to life-threatening circumstances the school should have in place an agreed plan of action. This should include the holding of appropriate medication and appropriate training of those members of staff required to carry out the particular medical procedures.

This has implications for school journeys, educational visits and other out of school activities. There may be occasions when individual children have to be excluded from certain activities if appropriate safeguards cannot be guaranteed.

8. Residential Visits

The medical form used for residential visits is the one issued by the county. It follows the county guidelines for educational visits.

9. Aspirin and preparations containing aspirin will never be given to pupils.

10. Parental Consent for Treatment

In some cases, a pupil may belong to a religious body which repudiates medical treatment. Normally the parent will make the decision and this should be regarded as the most desirable course of action.

However, the problem could be urgent or the parent unavailable. Parents who have specific beliefs which have implications for medical treatment should make their views and wishes known to the school so that the consequences of their beliefs can be discussed and, if possible, accommodated. In an emergency a teacher would have recourse to ordinary medical treatment.

If a child is being taken on a school journey where medical treatment may be needed and the parent is not prepared to give written instructions and an indemnity on the subject of medical treatment, the school might decide that the pupil should not go on the journey on the grounds of health and safety, harsh though this may appear to be.

If a teacher undertakes the responsibility for administering medicines and a child were to have an adverse reaction, in the event of a claim by the parent/guardian then the Authority will indemnify the teacher concerned, subject to legal liability being established, and if he/she has reasonably applied this policy.

11. Asthma

Crowton Christ Church Primary School is an "asthma friendly" school. We have a no smoking policy. We acknowledge that cigarette smoke and chemicals trigger asthma attacks and so avoid them as required, in the school environment.

Dealing with medication and inhalers.

- **Relievers:** These medicines, sometimes called bronchodilators, quickly open up the narrowed airways and help the child's breathing difficulties. Generally, relievers come in blue containers.
- **Preventers:** These medicines are taken daily to make the airways less sensitive to the triggers. Generally, preventers come in brown and sometimes white containers.

Reliever inhalers are crucial for the successful management of asthma. Delay in taking reliever treatment, even for a few minutes, can lead to a severe attack and in rare cases has proved fatal. Many children use a plastic spacer to help them take their inhaler more effectively.

If a child who does not have asthma "experiments" with another child's asthma medication this will not be harmful. Relievers act simply to dilate or open up the airways and will not have an adverse effect on a child who does not have asthma.

A few children with severe asthma may use an electrically powered device called a nebuliser to deliver asthma medicines.

Teachers need not worry that a child may overdose on his/her medication - reliever medication will not be harmful however much is used - you cannot overdose on an inhaler.

All inhalers and medications are kept in the office.

Asthmatic Children and Sport

Children with asthma can suffer because many people think that their asthma prohibits them from joining in. The aim of full participation should be the goal for all but the most severely affected pupil with asthma. However, most young people with asthma can become wheezy during exercise. Taking a dose of reliever or Intal can help prevent exercise-induced asthma. We:

- ✓ Make sure that everyone involved in physical education is aware of the needs of children with asthma.
- ✓ Make an opportunity for children who have exercise-induced asthma to take a puff of their inhaler before they start exercise. Teachers should be aware that some children are shy of doing this in public.
- ✓ Make sure that children bring their inhalers to the gym, the sports field or the swimming baths.
- ✓ Make sure that children who say they are too wheezy to continue take their reliever inhaler and rest until they feel better.

Appendix 1: Parental agreement for setting to administer medicine



The school/setting 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 for review to be initiated by

--

Name of school/setting

--

Name of child

--

Date of birth

--

Group/class/form

--

Medical condition or illness

--

Medicine

Name/type of medicine
(as described on the container)

--

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

--

I understand that I must deliver the medicine personally to Miss Hill / Miss Russon / Miss Porter

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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 _____

