

Fawbert & Barnard's Primary School

School Mission Statement

At Fawbert and Barnard's we are committed to the care and success of every individual in our school community. We aim to educate and develop everyone to become active learners, thus enabling them to become effective, confident, independent members of society ready to embrace learning for life.

First Aid and Administration of Medication Policy

- Our school policy reflects the consensus of the whole staff and has the full agreement of the Governing Body.
- This policy was approved by the Governing Body on: 16 October 2017
- This policy will be reviewed on a 3-year cycle linked to the School Development Plan

First Aid and Administration of Medication Policy

First Aid

First Aid is emergency care given to an injured person in order to minimise injury and future disability before professional medical care is available. Teachers and other staff are expected to use their best endeavours at all times, particularly in emergencies, to secure the welfare of pupils in the same way that parents might be expected to act towards their children. In general, the consequences of taking no action are likely to be more serious than those of trying to assist in an emergency.

1. Risks

A risk assessment of First Aid needs has been completed by the Health and Safety Co-ordinator to ensure adequate provision is available.

This considers:

- Hazards within the school
- The number of employees and pupils on site
- The past record of accidents and ill health
- Working arrangements
- Other visitors to the school

The school's insurance arrangements provide full liability and indemnity cover for claims arising from the actions of staff acting within the scope of their employment who administer First Aid and medication.

2. Roles and Responsibilities

The responsibility for First Aid policy rests with the Local Governing Body.

The Head Teacher is responsible for putting the policy in place and informing staff and parents.

All staff and those parents with responsibility for children in school should be aware of First Aid personnel, facilities, the location of First Aid boxes and First Aid procedures.

First Aid provision must be available at all times, including during educational visits, during PE and other times the school facilities are used e.g. Parent consultations, lettings etc

First Aid cover will be provided throughout the day at break and lunchtimes and in all school buildings. If a staff member is alone on a visit then they must have access to a mobile phone or a telephone in order to summon help. A landline is available in the kitchen next to the school hall and easy access to the school office is available during the school day. In some emergency situations, KS2 pupils may be sent in twos to summon additional help.

First Aiders must have attended a recognised First Aid Course approved by the Health and Safety Executive (HSE) and attend refresher courses every 3 years. First aiders should be reliable, have good communication skills, an ability to cope with stress and able to absorb new knowledge.

It is the responsibility of the Head Teacher to ensure good First Aid practice is being carried out within the school and at events and activities organised by the school.

All school staff receive First Aid training as soon as practical upon appointment. Staff members who have paediatric First Aid training are displayed on the staff room notice board and First Aid posters around the school.

3. Reporting and Recording of Accidents

Fawbert and Barnard's Primary School recognises that it has a duty to report accidents and incidents in accordance with the:-

Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 Health and Safety at Work Act 1974 Social Security Regulations 1979

Breach of the statutory requirement to report specific accidents and incidents to the Health and Safety Executive (HSE) may lead to prosecution. Inadequate incident reporting procedures will inhibit statistical analyses of accident data.

All first aid books must be kept for 3 years.

Governors receive regular reports each term on Health and Safety at the Finance and Premises Committee, which can include information on accident levels whenever these are assessed or requested.

4. First Aid Procedures

(a) School site

At Fawbert and Barnard's Primary School, we recognise that accidents may occur.

All minor accidents must be recorded in the class or midday accident books and should include details of how, when and where the accident occurred, the extent of the injury, name of the person involved and treatment given. Sickness must also be recorded here.

Any pupil who has suffered a head or facial injury must be given an accident slip. The adult responsible for treating a pupil should then accompany that child and hand over to the next responsible adult notifying them of the injury. All accident slips recording head or facial injuries must be shown to parents at the end of the day who must sign the 'head bump book' to acknowledge receipt.

All accidents to pupils, staff, parents and visitors are to be reported to the Health and Safety Coordinator as soon as possible after the accident took place. These will be reported by the Health and Safety Co-ordinator using the Local Authority on-line incident recording form along with any suggested action. The Local Authority will notify the school should any further action be required.

The First Aider present will deal with the accident and treat any injuries as required. Accident books will be reviewed when requested and an analysis made of the type and frequency of the accident/sickness and reported to the Governing Body.

Accidents reported in the office will be recorded in the office accident books. An investigation into the accident will be undertaken if this is required either immediately or at least on the same day. Judgements should be made as to what can be done to reduce the risk of similar accidents occurring again.

If hospital treatment is required, the parent should be called to take and accompany the child to hospital. In the absence of the parent, a member of staff should accompany the child but may NOT authorise any treatment. There is a casualty department at the Princess Alexandra Hospital at Harlow, the Minor Injury Unit at Bishop's Stortford or the Broomfield Hospital at Chelmsford. In addition, a member of staff will be required to complete a Health and Safety accident/incident form in order to formally record the incident. RIDDOR procedures will be followed as necessary. If an ambulance needs to be called, then follow the 'Contacting Emergency Services procedure' in Appendix 1.

(b) Educational Visits

A First Aid kit containing basic supplies MUST be taken on each trip off site. It is the responsibility of the class teacher/visit leader to ensure all relevant first aid and pupil medication, including asthma pumps and epipens, are taken. Pupils registered with medical needs or an IHCP MUST be identified specifically on the Educational Visits Risk Assessment and the necessary medication and documentation taken on the trip. Any group leaders or helpers will be briefed specifically about medical needs and any action to take. The group leader will be responsible for the asthma pumps/epipens of their assigned pupils. Individual medication logs must be taken on the trip to record any medication administered.

(c) Lettings and parents evenings

There is a First Aid kit available behind the door in the disabled toilet next to the School Hall if required during the letting of the school hall or during a parents evening when there may be no trained school staff present.

5. The Appointed Person

This person has the responsibility of taking charge during an incident and summoning help if needed. At Fawbert and Barnard's Primary School, each member of staff is able to assume the responsibilities of the Appointed Person.

6. First Aid supplies

The locations of First Aid kits are clearly labelled around the school.

The First Aid cupboard in the office contains extensive supplies of all first aid equipment.

Classroom kits contain basic First Aid supplies including a selection of plasters, surgical gloves and cleaning wipes for small injuries. Boxes of tissues are available in each classroom.

Midday Assistants on First Aid duties carry a selection of plasters, surgical gloves and cleaning wipes.

The First Aid kit in the disabled toilet carries a full selection of first aid items. A box of surgical gloves and tissues are also available.

Ice packs can be found in the Reception, Year 1 and Year 2 class refrigerators, DT room refrigerator and office refrigerator. Hot packs can be found in the school office and are heated in the office microwave for approximately 2 minutes. Pupils are asked to return all ice packs and hot packs to the school office if these are taken to class.

The Office Administrative Assistant has responsibility for the maintenance of the First Aid kits and supplies throughout the school.

The contents of the First Aid cupboard, class kits and cabinets are to be regularly checked at the end of each half term and maintained by the Office Administrative Assistant. These are also included in the Annual Health and Safety Inspection.

7. Training

At least two members of staff will have received paediatric first aid training. Staff currently trained as Paediatric First Aiders are:

Mrs Jay Hutchinson Mrs Joann Ensinger Mrs Stephanie Shillingford

All other school staff have received First Aid training and the school has a policy to ensure that all staff receive regular retraining every 3 years. Additional training for new staff joining the school will be organised whenever practicable and for all staff in relation to identified medical needs eg. Diabetes etc. A training log is maintained on BlueWaveSwift.

New staff members receive induction training that includes general first aid information, epi-pen guidance and information on diabetes, anaphylaxis, epilepsy and asthma.

Appointed Paediatric staff MUST be asked to attend more serious injuries and may be asked to provide a second opinion should there be any doubt as to the nature of an injury.

8. Administering Medication

(a) Background

Documents supporting procedures and guidelines include:

- 'Managing Medicines in Schools and Early Years Settings', DfE March 2005
- 'Supporting pupils with medical conditions' DfE December 2015
- 'Templates: Supporting pupils with medical conditions' DfE May 2014

(b) Roles and responsibilities

The Multi Academy Trust is responsible for:

- Promoting co-operation between relevant partners regarding supporting pupils with medical conditions.
- Providing support, advice, guidance and training to schools and their staff to ensure Individual Healthcare Plans (IHCPs) are effectively delivered.
- Working with schools to ensure pupils attend full-time or make alternative arrangements for the education of pupils who
 need to be out of school for fifteen days or more due to a health need and who otherwise would not receive a suitable
 education.

The Governing Body is responsible for:

- Ensuring arrangements are in place to support pupils with medical conditions.
- Ensuring the policy is developed collaboratively across services, clearly identifies roles and responsibilities and is implemented effectively.
- Ensuring that this policy does not discriminate on any grounds including, but not limited to protected characteristics: ethnicity/national/origin, religion or belief, sex, gender reassignment, pregnancy and maternity, disability or sexual orientation.

- Ensuring the policy covers arrangements for pupils who are competent to manage their own health needs.
- Ensuring that all pupils with medical conditions are able to play a full and active role in all aspects of school life, participate in school visits, trips, sporting activities, remain healthy and achieve their academic potential.
- Ensuring that relevant training is delivered to a sufficient number of staff who will have responsibility to support children with medical conditions and that they are signed off as competent to do so. Staff to have access to information, resources and materials.
- Ensuring written records are kept of all medicines administered to pupils.
- Ensuring the policy sets out procedures in place for emergency situations.
- Ensuring the level of insurance in place reflects the level of risk.
- Handling complaints regarding this policy as outlined in the school's Complaints Policy.

The Headteacher is responsible for:

- Ensuring the policy is developed effectively with partner agencies and then making staff aware of this policy.
- The day-to-day implementation and management of this policy.
- Liaising with healthcare professionals regarding the training required for staff.
- Identifying staff who need to be aware of a child's medical condition.
- Ensuring a sufficient number of trained members of staff are available to implement the policy and deliver IHCPs in normal, contingency and emergency situations.
- If necessary, facilitating the recruitment of staff for the purpose of delivering the promises made in this policy. Ensuring more than one staff member is identified, to cover holidays/absences and emergencies.
- Ensuring the correct level of insurance is in place for teachers who support pupils in line with this policy.
- Ensuring confidentiality and data protection
- Assigning appropriate accommodation for medical treatment and care

Staff members are responsible for:

- Taking appropriate steps to support children with medical conditions and familiarising themselves with procedures which detail how to respond when they become aware that a pupil with a medical condition needs help.
- Knowing where controlled drugs are stored.
- Taking account of the needs of pupils with medical conditions in lessons.
- Undertaking training to achieve the necessary competency for supporting pupils with medical conditions, with particular specialist training if they have agreed to undertake a medication responsibility.
- Allowing inhalers, epipens and blood glucose testers to be held in an accessible location, following DfE guidance.

School nurses are responsible for:

- Collaborating on developing an IHCP in anticipation of a child with a medical condition starting school.
- Notifying the school when a child has been identified as requiring support in school due to a medical condition at any time in their school career.
- Supporting staff to implement an IHCP and then participate in regular reviews of the IHCP. Giving advice and liaison on training needs.
- Liaising locally with lead clinicians on appropriate support. Assisting the Headteacher in identifying training needs and providers of training.

Parents and carers are responsible for:

- Keeping the school informed about any new medical condition or changes to their child/children's health. Parents complete the Pupil Information Form at the start of their child's education and the annual update of pupil information in September also provides an additional opportunity for parents to update the school of any changes to their child's medical needs.
- Participating in the development and regular reviews of their child's IHCP.
- Supporting their child in administering any unprescribed medication
- Completing a parental consent form to administer prescribed medicine or treatment before bringing prescribed medication into school.
- Providing the school with the prescribed medication their child requires and keeping it up to date including collecting leftover medicine.
- Carrying out actions assigned to them in the IHCP with particular emphasis on themselves, or a nominated adult, being contactable at all times.

Pupils are responsible for:

• Providing information on how their medical condition affects them.

- Contributing to their IHCP
- Complying with the IHCP and self-managing their medication or health needs including carrying medicines or devices, if judged competent

9. Parental agreement for school to administer medication

- The administration of medication is the overall responsibility of the parents/carers.
- Where clinically possible, parents will be encouraged to ask for medicines to be prescribed in dose frequencies which enable medicines to be taken outside school hours.
- When this is not possible, parents will be encouraged to make arrangements to administer any medication themselves.
- When this is not possible, staff will administer medication IF the medicine has been prescribed by a doctor, is in date, labelled with the child's name, in the original container with dosage instructions AND written consent has been given by the parent who has completed the 'parental consent to administer medication form.'

The following criteria will apply:-

- A file titled 'Medication Register' containing parental permission forms for pupils who need ad hoc medication as and when prescribed, will be kept in the School Office.
- Any child will have easy access to their medication.
- All medication will be kept in the school office in a secure cabinet.in the fridge.
- All medicine must be kept in the original container and correctly labelled with the child's name, dose, frequency of administration, cautionary advice and expiry date.
- The parental consent to administer medication form must be used to record the administration of medication, with date, time, dose and signature of administering adult.
- Parents are responsible for ensuring that their child has the correct in date medication at the school which is replaced when necessary.
- Asthma inhalers/Epipens and other medication will be sent home or collected by parents at the end of each full academic year.
- As good practice, the office staff will check the expiry date of medication kept in the school and inform parents of any action necessary at the end of each half term
- No staff member is legally required to administer medication but the cooperation of support staff is sought in this regard in order that pupils with medical needs are able to access their educational entitlement.
- Staff will be covered under the employer liability insurance and be expected to act under the duty of care placed upon them whilst children are at school.
- Staff will supervise pupils taking their asthma inhaler, as required, and will use the medical file to check the dosage, and initial and date on the child's record form.
- Any member of staff willing to administer medication will receive appropriate training from recognised personnel, e.g. school nurse on the use of an epi-pen.
- Emergency procedures will be followed as outlined on a child's healthcare plan or the usual emergency procedures followed in the event of a serious accident/injury or child's medical need (e.g. epileptic fit, administering of an epi- pen after an allergic reaction).
- Should a child refuse medication then the matter will be brought to the attention of the parent as soon as is practicable.
- It is expected that each child is registered with a GP and this information held on the central pupil records.
- The school will liaise with health professionals, e.g. school nurse, Health Protection Agency to assist the Headteacher with decisions regarding prevention of the spread of infection, staff training, updated medical guidance or action.

10. Pupils with serious medical conditions

The following procedures will apply to pupils with serious medical conditions:-

- An IHCP plan will be drawn up with the parents to reflect current medical advice linked to the condition. The IHCP will be reviewed at least annually by the Administrative Assistant in liaison with the pupil's parents or whenever a pupil's needs change.
- Copies of all IHCPs will be filed in the Medication Register in the School Office and also in the Medication folder in each classroom which will contain the IHCPs for pupils in that class. All relevant staff will be made aware of the contents of the IHCP and receive necessary training as applicable.
- A full photographic visual record of pupils with IHCPs can be found on the staffroom notice board. A photographic
 visual record for those pupils in each class with IHCPs will also be displayed at the front of the Medication Folder in
 each class.
- It is the responsibility of the parent to inform the school of their child's medical condition and needs and of any developments/changes at the earliest possible opportunity.
- It is the responsibility of the Health and Safety Co-ordinator to oversee the IHCP process, in liaison with the SENDco, other office staff and the parent in completing and maintaining an up to date IHCP.
- The IHCP will include:
 - name and nature of the condition

- special requirements
- medication required and possible side effects
- date of implementation
- Any documentation will be kept in the locations stated and be confidential and accessible to relevant staff only.

11. Educational visits

It is the responsibility of the class teacher/visit leader to ensure all relevant pupil medication, including asthma pumps and Epipens, are taken on trips offsite. Pupils registered with medical needs or an IHCP MUST be identified specifically on the Educational Visits Risk Assessment and the necessary medication and documentation taken on the trip. Any group leaders or helpers will be briefed specifically about medical needs and any action to take. The group leader will be responsible for the asthma pumps and Epipens of their assigned pupils. Individual record logs must be taken on the trip to record any medication administered.

12. PE lessons, break and lunchtimes

In the case of pupils with asthma and anaphylaxis, it is the school's intention to hold one inhaler/Epipen in a box in the classroom and one inhaler/Epipen in a box in the School Office. All school staff, supply staff and volunteers should be made aware of this during induction.

The box containing the inhaler/epipen should remain in class unless taken out on an Educational Visit or off site sports event or the parent requests, during the IHCP meeting, that the box also accompanies the child at breaktime, lunchtime and during PE lessons. When these pupils are in class or offsite, they will then have easy access to their inhalers/Epipens. During PE lessons, assemblies, break and lunchtimes, when pupils are not in class, all staff should be aware that if a pupil requires their inhaler/Epipen and the classroom is not the nearest location, then a spare inhaler/Epipen will be available in the School Office. It is advisable for staff to take out a walkie talkie from the School Office during PE lessons, break and lunchtimes so that they are able to call the office in an emergency and urgently request a pupil's inhaler/Epipen.

13. Breakfast and After School Clubs

It is the responsibility of the club themselves to ensure that they have their own procedures for those pupils in their care with serious medical needs. However, as good practice, club organisers will be given the codes to be able to access the inhalers or Epipens in classrooms or the School Office.

14. Protocol for use of emergency Salbutomol inhaler

Given the existence of the split site at Fawbert and Barnard's Primary School, the school will purchase 2 emergency Salbutomol inhalers, one to be located in Year 2 classroom and one to be located in the School Office.

(a) Arrangements for the supply, storage, care and disposal of the inhaler and spacers

The school will purchase an inhaler by creating an order signed by the Headteacher on headed paper detailing:-

- The name of our school
- The purpose of the inhaler
- The quantity required

The emergency asthma inhaler kit will include:-

- A salbutamol metered dose inhaler
- At least 2 plastic spacers compatible with the inhaler
- Instructions on using the inhaler and spacer
- Instructions on cleaning and storing the inhaler
- Manufacturer's information
- Checklist of inhalers identified by their batch number and expiry date with monthly checks recorded
- Note of arrangements for replacing the inhalers and spacers

The school will keep 2 emergency asthma kits, one for each key stage as the school site is split.

The emergency asthma kit will be maintained by the Administrative Assistant and the Senior Administrator as follows:-

- On a monthly basis, the inhalers and spacers are present and in working order and the inhaler has sufficient number of
 doses available.
- Replacement inhalers are obtained when expiry dates approach.
- Replacement spacers are available following use.

- The plastic inhaler housing has been cleaned, dried and returned to storage following use.
- The plastic spacer should not be re-used.

The emergency asthma kits will be kept in the School Office and Year 2 classroom in boxes labelled 'Emergency Asthma Kit' but will be kept out of sight of pupils.

Spent inhalers should be returned to the pharmacy to be recycled.

(b) Pupils who can use an inhaler

The Emergency Asthma kit should only be used by pupils:-

- Who have been diagnosed with asthma and prescribed a reliever inhaler OR
- Who have been prescribed a reliever inhaler AND
- For whom written parental consent for the use of the Emergency Asthma kit has been given

A child may be prescribed an inhaler for their asthma which contains an alternative reliever medication to Salbutomol eg. Trebutaline). The Salbutomol inhaler can still help to relieve their asthma and could save their life.

The Medication folder will include – with parental consent – a photographic record of each child to allow a visual check to be made.

Appendix 1: Contacting Emergency Services

Appendix 2: Individual Healthcare Plan - Any medical condition

Appendix 3: Individual Healthcare Plan - Anaphylaxis

Appendix 4: Individual Healthcare Plan - Asthma

Appendix 5: Parental agreement for school to administer medication

Appendix 6: Record of medicine administered to an individual child

Appendix 7: Summary guidance for staff on First Aid and Administration of Medication

Dial 999 and ask for ambulance and be ready with the following information
 Our telephone number

 01279 429427

 Our location

 Fawbert and Barnard's Primary School
 London Road
 Old Harlow
 Essex
 CM17 0DA

 Give the exact location of the school
 Opposite East Park estate
 Give your name
 Give the name of the child and a brief description of the child's symptoms

Inform the ambulance control of the best entrance and that the crew will be met at......

Request for an ambulance

PPENDIX 2	
IEALTHCARE PLAN FOR	
РНОТО	Any medical condition
AWBERT AND BARNARD'S PRIMARY SCHO	OOL
CONTACT INFORMATION	
	Family Cantage 2
Family Contact 1:	Family Contact 2:
Clinic/Hospital Contact:	G.P. Contact:
WHAT CONSTITUTES AN EMEDGEN	ICY AND ACTION TO TAKE IF THIS OCCURS?
Symptoms of a Severe attack requiring emergent reatment:	ncy Action to be taken:
WHO IS DESPONSIBLE IN A NEW TOP	CIENCE/O
WHO IS RESPONSIBLE IN AN EMERO	GENCY?
WHO IS RESPONSIBLE IN AN EMERO	GENCY?

MAIN BODY OF CARE PLAN

<u>Description of medical condition, medication and details of pupil's individual symptoms:</u>

Daily care requirements/risk assessment:				
Medication:				
Mild reaction:	Treatment:			
Intermediate reaction	Action to be taken: Call parent for child to go home			
	If not close by parents will instruct to call hospital			
Severe attack requiring emergency treatment:	Action to be taken:			
See page 1	See page 1			
Specific support for Pupil's educational, social and emotional needs				
Specific support for Fupir's educational, social and emotional needs				
Arrangements for school visits/trips etc				
Plan developed with:				
Staff training needed. State which training for whom and date of course	2			
I agree to the procedures detailed in this plan being administered in school and to my child's photo and condition being displayed in the staffroom				
and the class Medication Folder to ensure that all relevant parties are aware the school will follow advice received from the health professionals in sumr				
Signatures of those who agree to the above statements and proposed car				
Signatures of mose who agree to the upone suitements and proposed ear	- untungenemer			
(on behalf of all adults working with this pupil)				
FORM COPIED TO				
Parents Class Teacher	Class medical File			
Pupil file SENCo	Office medical File			

PPENDIX 3	
EALTHCARE PLAN FOR	
РНОТО	Anaphalaxis
AWBERT AND BARNARD'S PRIMARY SCHOOL	
ONTACT INFORMATION	
amily Contact 1:	Family Contact 2:
linic/Hospital Contact:	G.P. Contact:
Symptoms of a Severe attack requiring emergency	AND ACTION TO TAKE IF THIS OCCURS? Action to be taken:
treatment: Difficulty in breathing or choking sensation Extreme paleness/grey colour/clammy skin Difficulty in talking	 Administer Epipen to the thigh and hold and count for 10 seconds – rub area for 10 seconds – take note of time Sit/lay down and raise legs if possible
	Dial 999 for an ambulance, stay on the line and follow their
Severe swelling to any part of the body Weakness and possible collapse	advice (you may be required to administer a second dose)
Severe swelling to any part of the body Weakness and possible collapse Loss of consciousness	 advice (you may be required to administer a second dose) Phone parent to inform them of the event
Weakness and possible collapse	

MAIN BODY OF CARE PLAN

<u>Description of medical condition, medication and details of pupil's individual symptoms:</u>

No. 11. of the Control of the Contro				
Medication: Epinephrine autoinjector, Piriton Mild reaction:	Treatment:			
Eyes may become puffy	Give 5mls of Piriton by mouth			
Red blotches/rash may appear	Call parent for child to go home			
Pain in the throat				
Itching/sneezing				
Feeling unwell/restlessness				
Intermediate reaction	Action to be taken:			
Nausea /vomiting/diarrhoea	Call parent for child to go home			
	If not close by parents will instruct to call hospital			
Severe attack requiring emergency treatment:	Action to be taken:			
See page 1	See page 1			
Daily care requirements/risk assessment:				
Dany care requirements/risk assessment:				
Care to be taken at all times with regard to any contact with nuts of	or substances containing nuts			
 Care to be taken at all times with regard to any contact with nuts of All staff to be aware of needs of any child with anaphylaxis 	or substances containing nuts			
 Measures to be put in place re school trips, cooking lessons etc 				
Medication should be given as prescribed				
 Parents to ensure the school is supplied with medication, Piriton a 	nd Epipen			
Parents responsibility to keep these medicines in date				
Specific support for Pupil's educational, social and emotional needs				
Arrangements for school visits/trips etc				
Plan developed with:				
Staff training needed. State which training for whom and date of course				
I agree to the procedures detailed in this plan being administered in school	and to my shild's photo and condition being displayed in the staffroom			
and the class Medication Folder to ensure that all relevant parties are aware				
the school will follow advice received from the health professionals in sumr				
Signatures of those who agree to the above statements and proposed car	e arrangements:			
(on behalf of all adults working with this pupil)				
(on behalf of all adults working with this pupil)				
(on behalf of all adults working with this pupil)				
(on behalf of all adults working with this pupil) FORM COPIED TO				
	Class medical File			
FORM COPIED TO Parents Class Teacher	Class medical File Office medical File			
FORM COPIED TO Parents Class Teacher				

PENDIX 4	
EALTHCARE PLAN FOR	
РНОТО	
	Asthma
WBERT AND BARNARD'S PRIMARY SCHOOL	
ONTACT INFORMATION	
mily Contact 1:	Family Contact 2:
	AND ACTION TO TAKE IF THIS OCCURS?
Symptoms of a Severe attack requiring emergency reatment:	Action to be taken:
Distressed and struggling to breathe Cannot complete a sentence Showing signs of fatigue or exhaustion Pale sweaty and may be blue around lips Reduced level of consciousness	 Dial 999 for an ambulance Follow instructions given by ambulance staff Stay with child Give reassurance If possible, call parents/carers While waiting for ambulance, continue medication,puffs/minute for as long as instructed Do not attempt any physical contact Do help child to breathe slowly, sit upright, lean forward an loosen clothing
YHO IS RESPONSIBLE IN AN EMERGEN	· -

MAIN BODY OF CARE PLAN

Description of medical condition, medication and details of pupil's individual symptoms:

Description of medical condition, medication and details of	pupil's individual symptoms:
Medication:	
Mild reaction:	Treatment:
	II-le shild de .
Increase in coughing	Help child to:
Slight wheeze	Breathe slowly
No difficulty in talkingNot distressed	Sit upright
Not distressed	Loosen tight clothing
May present as tummy ache	• Give puffs of Preferably
	through a spacer and repeat as required up to
	puffs maximum until symptoms resolve.
	Notify parents Yes/No
Intermediate reaction	Action to be taken:
	Call parent for child to go home
Covere officely recently a survey of the second	If not close by parents will instruct to call hospital
Severe attack requiring emergency treatment: See page 1	Action to be taken: See page 1
-	
aily care requirements/risk assessment:	
Parents responsibility to keep these medicines in da pecific support for Pupil's educational, social and emotion	
arrangements for school visits/trips etc	
Plan developed with:	
-	
Staff training needed. State which training for whom and d	ate of course
and the class Medication Folder to ensure that all relevant part	red in school and to my child's photo and condition being displayed in the staffroon ties are aware. In the event that these procedures cannot be implemented at any time conals in summoning the emergency services where appropriate.
Signatures of those who agree to the above statements and p	proposed care arrangements:

(on behalf of all adults working with this pupil)						
FORM COPIED TO						
	Parents		Class Teacher		Class medical File	
	Pupil file		SENCo		Office medical File	
	Epipen storage boxes X2					

Appendix 5: Parental agreement to administer prescribed medication

The school will not give your child medicine unless you complete and sign this form, and the school has a policy that the staff can administer medicine.

Date for review to be initiated by	
Name of school	Fawbert & Barnard's Primary School
Name of child	
Date of birth	
Class	
Medical condition or illness	
Prescribed 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 needs to know about?	
Self-administration – yes/no	
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 and collect the medicine personally to	The Office staff			
I agree to the procedures detailed in this plan being administered in school and to my child's photo and condition being displayed in the staffroom and the class Medication Folder to ensure that all relevant parties are aware. In the event that these procedures cannot be implemented at any time, the school will follow advice received from the health professionals in summoning the emergency services where appropriate.				
Signature(s)	Date			

Appendix 6: Record of medication administered to an individual child

Name of school/setting			
Name of child			
Date medicine provided by pa	arent		
Group/class/form			
Quantity received			
Name and strength of medicin	ne		
Expiry date			
Quantity returned			
Dose and frequency of medici	ine		
Staff signature		 Date	
Signature of parent		 Date	
		I	I
Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			
		Г	Г
Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			
ъ.			
Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			
Date			
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Appendix 7: Summary guidance for staff induction on administering medication

- Schools and settings should only accept medicines that have been prescribed by a doctor, nurse or pharmacist prescriber. Medication must be in the original container with instructions. All such medications must be kept in the school office and should always be brought in by the parent/carer and a medical consent form completed for medication that needs to be taken 4 times a day or more and a care plan completed for medication that is required for a serious medical condition such as asthma.
- A central Medical Register with the IHCP for each individual child is kept in the school office and the classroom. The
 IHCP should always be referred to prior to the administration of medication then the pupil's individual medication log
 completed. A separate file for pupils who require medication on an ad hoc basis with a parental permission form is
 located in the School Office. This should be referred to prior to the administration of medication and the pupil record
 sheet completed afterwards by the adult.
- If a child refuses to take the prescribed medicine staff should <u>not</u> force them to do so but should note on records and contact parents. If a refusal to take medicines results in an emergency the school should follow emergency procedures.
- Serious medical conditions
 - All teachers, class TAs, LSAs and class MDAs should make themselves aware of the medical needs of pupils in their class; especially pupils who have an IHCP. Individual inhalers and Epipens are kept in a plastic box in each classroom. The folder in each classroom contains a copy of each child's IHCP with an individual recording form which should be used by the adult each time the child receives medication. The adult should check the required dose prior to the child administering their medication. The child should be supervised and assisted if required. The initial of the adult, time, date and dose should be recorded.
- If it is noticed that the medication/asthma pump is out of date then this should be brought to the attention of the office who will make contact with the parent so that they can contact their doctor for a replacement.
- Children must never be given their medication to be carried with them in school. It is up to the parent/carer to sign it in and out at the office so that the correct medical school procedure can be followed.
- General basic first aid can be administered by all adults at school.
- For more serious incidents or where a second opinion is required, then a paediatric trained member of staff should be called for. These staff members are identified on the First Aid posters around school.
- More serious incidents and accidents must be recorded in the main accident book in the office. This is a carbonated
 record book whereby the white sheet goes home and the pink carbonated copy remains in school. In addition, it may be
 decided to call the parent to alert them or to advise that their child may need to be collected or to seek further medical
 advice.
- Each class has been allocated a First Aid kit with general medical supplies in it.
- It is essential that gloves are worn for all spillages of blood or bodily fluids.
- Ice packs and heat packs are available from the office fridge.
- DO NOT SEND A CHILD TO THE OFFICE ON THEIR OWN. ALWAYS SEND AN ADULT or CHILD WITH THEM.
- All children should know what to do in the event of an emergency i.e. tell a member of staff.

- All staff should know how to call the emergency services.
- Staff should <u>never</u> take children to hospital in their own car. Al<u>ways</u> call an ambulance.