

CROMWELL SCHOOL MEDICAL POLICY

This document is a statement of the aims and objectives for the management of medical issues within the school.

This policy is written in compliance with and should be read in conjunction with:

Medication Guidance for Birmingham Schools 2012.

Birmingham Community Healthcare NHS Trust Asthma Guidance for Staff Working in Birmingham Schools, Early Years settings and Play Service 2014 Managing Medicines in School and Early Years Settings, DfES/DH, March 2005 (Revised Nov 2007) available

from; www.education.gov.uk/schoolspupilsupport/pastoralcare/b0013771managing-medicines-in-school

Schools Policy Guidelines, Asthma UK, 2006 DfE Supporting Pupils at School with Medical Conditions 2014

It will be reviewed regularly according to the schools rolling programme for curriculum review.

Management of Medicines in School

Aims

The aims of this document are as follows:

- Pupils Cromwell Primary School with medical conditions should be properly supported so that they have full access to education, including school trips and physical education.
- To fully consult with staff to ensure that a policy is in place for the appropriate care of children, that is practical, and gives reassurance to staff carrying out these duties.
- To develop a policy that is available to governors and all staff.
- The school governing body **must** ensure that arrangements are in place within school to support pupils with medical conditions.
- The governing body should ensure that senior school management consult health and social care professionals, pupils and parents to ensure that the needs of children with medical conditions are effectively supported.

- To provide information about the administration and management of medicines in our school.
- To have due regard for the individual needs of the pupil.
- To ensure that the Local authority's inclusion policies and procedures are met.

Policy Statement

- We would ask parents/carers to ask their doctor wherever possible to prescribe medication, which can be taken outside the school day. However we recognise that there are times when it may be necessary for a pupil to take medication during the school day.
- As a school, we are prepared to take responsibility for these occasions in accordance with the guidelines laid down in this policy, i.e. we will only administer prescribed medication.

Children with Additional Medical Needs

- On occasions Cromwell Primary School is asked to admit children with special medical needs. As a school we will work in partnership with parents, health professionals and agencies including the Central Birmingham School Nursing Team to discuss the individual needs of the child.
- The school recognises that children with medical needs can have special educational needs due to their condition (Revised Special Educational Needs Codes of Practice 2014).
- Where children have special educational needs due to a health condition, an initial meeting will take place with parents to ensure that the school has a complete picture of the child's needs.
- The pupil will then be monitored regularly to ensure that the child's medical needs are appropriately met and that they are not falling behind with their learning. Attendance will also be closely monitored.

On Admission to School

 All parents/carers will be asked to complete an admissions form giving full details of medical conditions, regular medication, emergency contact numbers, name of family doctor, details of hospital consultants, allergies, special dietary requirements etc. (Appendix 1 Admission Form)

Administration of medicines in school

 Should a pupil need to receive prescribed medication during the school day, parents/carers will be asked to come into school personally and hand over the medication to a senior leader.

- The medication should be in the container as prescribed by the dispensed by the pharmacist, with the child's name and instructions for administration printed clearly on the label. As well as a clearly dated expiry date. The Senior Leader accepting the medication will ensure that the medication is appropriately Labelled and will then store the medication in the first aid cupboard in the office.
- The form "School Medication Consent Form" should be completed by the parent/carer when medicine is brought into school and the administration of the medication has been agreed by a member of the SLT. This form will be kept by the office staff. (Appendix 2).
- When medication is given, of the administration of each dose will be kept and signed on the "Record of Medication Form". This form will normally be kept with the Medicine record form. (Appendix 3).
- If medication needs to be changed or discontinued before the completion of the course or if the dosage changes, the school should be notified in person by the parent or carer.

Storage and Disposal of Medication

- All medication with the exception of emergency medication will be kept in the fridge located in the staff room or first aid box in the secretaries office which may only be accessed by designated personnel.
- A regular check will be made of medication every term and parents will be asked to collect any medication which is not complete, out of date or not clearly labelled.

Out of School Activities

- Before pupils take part in out of school activities a full risk assessment is undertaken in respect of the possible administration of medicines and medical treatment to pupils.
- The Head Teacher will ensure that appropriate arrangements are made to take account of the administration of medicines to any pupils who are involved in an educational visit. The staff members involved in the activity are responsible for ensuring they are aware of the need for medication and what they should do should a medical emergency arise. The staff involved in the activity must consider the accessibility of medication, particularly for use in an emergency.

Management of Prescribed Medication

 All requests for prescribed medicines to be administered will be considered on an individual basis in line with school policy. The school may be requested to administer prescribed medicines but they cannot be directed to do so. • The administering of prescribed medicines in school is entirely voluntary and is not a contractual duty. Whether agreeing or refusing to administer medicines in school the Head's decision is regarded as defensible if it is clear that she has acted reasonably.

Roles and Responsibilities

- At Cromwell School we believe that there must be a partnership between parents/carers and the school, for the administration of prescribed medicines to work effectively.
- This partnership will place responsibilities not only on the parents/carers but also in some circumstances the pupil.

Headteacher/Governors

The Head Teacher/ Governors are responsible for ensuring that:

- An agreed administration of prescribed Medicine Policy is in place
- The policy is discussed, agreed and formally adopted by the governing body
- The policy is regularly reviewed in line with the school's rolling programme for policy review
- All staff are fully aware of the school's policy
- All staff who administer prescribed medication are given appropriate training
- Training relating to emergency medication and management of relevant medical conditions is given as appropriate
- Parents/carers are made aware of the school's policy on medicines and a written copy is available on request.
- At Cromwell School the administering of prescribed medication is usually overseen by a member of the SLT. The school has separate guidelines for the administration of medication for asthma.

Parents/Carers

It is the responsibility of parents/carers to ensure that they:

- Fully co-operate with the school to ensure the safety and well-being of their child.
- Complete a general consent form, which is signed and dated. Verbal instructions will not be accepted
- Complete a new consent form whenever there are any changes to the administration instructions

- Ensure that there is sufficient medicine to be administered and that it is within the expiry date.
- Ensure that medicine is provided to the school in the original container from the pharmacy and clearly labelled with:
 - √ The child's name
 - √ Name of medicine
 - √ How much to give i.e. dosage
 - ✓ When it is to be given
 - √ Expiry date
 - ✓ Any other instructions

Infectious Diseases

As already stated the aim of this policy is to keep ill children in school but in the following cases where the conditions are infectious the Head teacher has to enforce exclusions on the following medical criteria:

Ringworm-scalp

 Child to be excluded until oral treatment and shampoo treatment commences. Where shampoo treatment is not recommended by the GP the child is to be excluded for 14 days from commencement of oral treatment.

Ringworm-body

 Child to be excluded until treatment commences. Child not to be included in P.E. or swimming sessions until affected area has healed. Affected areas to be covered by dry dressing at all times.

Conjunctivitis

• Child to be excluded until treatment commences.

Measles

Child to be excluded for 5 day period from onset of rash

Chickenpox

• Child to be excluded until scabs have formed on all spots

Mumps

Child to be excluded for 9 days from onset of swelling

Whooping cough

Child to be excluded until they have received antibiotics for a 5 day period.

Rubella

• Child to be excluded for at least 4 days from onset of rash

Scabies

• Child to be excluded for 24 hours once treatment commences

Impetigo

 Child to be excluded for 48hours once treatment commences. All sores on exposed areas must be covered. If sores can not be covered child to remain at home

Meningitis

Child to remain away from school until pronounced medically fit to return.
Head Teacher to inform the Health Protection Agency (HPA) and work alongside them and the Local Authority

Head Lice

• Whilst child cannot be excluded, school will issue a standard letter and advice to parents that an unnamed child in the class has head lice.

Management of the Unwell Child

- While symptoms vary according to the nature of illness there are certain symptoms that should always give rise to suspicion that a person is suffering from an infectious disease. These include diarrhoea and/or vomiting, fever (high temperature, shivering, shaking) and rash or skin spots.
- Segregate the child, as far as possible from others in the class, but do not leave the child unattended. Contact the parent/carer where possible.
- Seek advice from the School Nurse if required.
- Ask the child to cover their nose and mouth when coughing.
- Cover skin lesions which are discharging with a waterproof dressing.
- Adults and children should wash their hands after touching the ill child.

Birmingham Local Authority

• The Birmingham Local Authority indemnifies its staff against claims of alleged negligence when administering prescribed medicines provided that

- they are acting in a reasonable manner and in the best interests of the pupils and they have received training where appropriate.
- Any claims for alleged negligence would be directed against Birmingham Local Authority and not the individual concerned.

Cromwell School Asthma Policy

Asthma Policy Statement

- Cromwell School recognises that asthma is a recognised medical condition and welcomes students with asthma and recognises their needs.
- The school strives to ensure that students with asthma can and do participate fully in all aspects of school life. This includes P.E. school visits, and outings and other out of hour's activities.
- The school recognises that students with asthma will need immediate access to reliever (blue) inhaler at all times.
- Cromwell School ensures that the whole school environment, including the physical, social and educational environment is favourable to students with asthma.
- The school ensures that all staff, including supply and support staff knows what to do if an asthmatic student has asthma attack.

School Admission

- All parents/carers will be asked to complete an admission form giving full details of the child's asthma, current medication, emergency contact numbers, family G.P. and any relevant hospital details.
- It is the responsibility of all parents/carers of students on the School Roll to notify the school of any changes in their child's treatment details. Treatment details should be accessible at all times.
- Every student with an asthma diagnosis should have access to their reliever inhaler at all times.

In the Event of an Asthma Attack

- All staff must know how to deal with a student experiencing an asthma attack.
- The main symptoms of an asthma attack are: continuous coughing wheezing and increased shortness of breath.
- In the event of an asthma attack staff are to follow the procedure outlined in the asthma attack flow chart.

Safety and Storage of Asthma Inhalers

- A clearly labelled inhaler with the pupils name is held in each pupil's classroom and is stored in a secure box. The inhalers are accessible to the children at all times. Key stage 2 students should be responsible for their inhalers.
- Parents/carers will be notified by written notification if the spare reliever inhaler has been used during the school day.
- It is the responsibility of parents/carers to ensure that their child's medication is in date and replenished as necessary.
- Inhalers should not be stored where there is excessive heat or cold.

Emergency Inhaler Kit

- An emergency inhaler kit is stored in the Deputies office and can be used in cases of emergency if a child does not have their inhaler in school.
- Parents of children suffering with asthma will sign a Parental Consent form on admission to school agreeing to the kit being used in case of emergency (for example if a child does not have their inhaler at school or it is unusable) (Appendix 4)
- If an emergency inhaler is used the staff member administering the inhaler will complete the **Salbutamol Inhaler Log (Appendix 5)**
- The staff member will then inform parents that the emergency inhaler has been used by completing the **Parental notification Letter (Appendix 6)**

Exercise and Activity

- •Students with asthma are encouraged to participate fully in all P.E lessons and sports activities, including swimming.
- Some students with asthma may need to use their reliever inhaler before or after exercising
- •Reliever inhalers must be readily available at all times during the school day and including off site activities, e.g. swimming, trips.

Out of Hours Activities/Residential Activities

• It is important that the school involves students with asthma as much as possible in after school activities. (See Educational Visits Policy).

School Environment

- The school does all that it can to ensure that the school environment is favourable to pupils with asthma.
- The school does keep furry and feathered animals, however these are limited to the corridors and Reception playground and the wooded area of the main playground. All the animals are kept in the appropriate accommodation.
- There is a no smoking policy that is strictly enforced in line with local authority and statutory policies and protocol.

Training

- All staff access asthma awareness training every 2 years and receive Regular updates so that they can recognise and know how to manage a student experiencing an asthma attack.
- They must know when and how to call a Paramedic ambulance and what to do whilst waiting for the ambulance to arrive.
- The last asthma awareness training was completed in May 2015

Access and Review of Policy

 Cromwell School policy will be accessible to all staff and the school community through the school website. Hard copies can be obtained through the school office.

First Aid Policy

Aims

The aims of this policy are to provide:

 The children with a happy, safe environment when hurt or unwell in the same way as a reasonable parent would do, (Locum Parentis)

Medical emergencies

- 1. In the event of a medical emergency send for a first aider and telephone 999 requesting a **PARAMEDIC AMBULANCE**
- 2. A member of the Senior Leadership Team is to be informed as soon as possible. The first priority is **always** the casualty.
- 3. Emergency Medication such asthma inhalers and emergency supplies for diabetic pupils are kept in the child's classroom. Epi-pens for children with severe allergies are kept in a central location in the First Aid cupboard in the Reception Office.

- 4. A Paramedic Ambulance must be called for any injury resulting in a loss of consciousness however slight.
- **5.** Children requiring hospital treatment not classified as an emergency and where parents are obtainable should travel in the parents own vehicle or by taxi. If parents are unobtainable, two members of staff must accompany the child to hospital by taxi. **Staff must not use their own vehicles.**
- 6. All attempts possible will be made to contact a parent /carer in the event of a child going to hospital.
- 7. There are a number of trained first aiders within school including staff trained in Paediatric first aid. (Appendix 8) A list of trained first aiders is displayed at key points including the office.

Injuries

- 1. Sick children and walking wounded children (unless having an asthma attack, a severe allergic reaction or a hypoglycaemic attack -diabetics) where appropriate, will be accompanied to the main office where a member of the SLT will make the decision as to whether the child is well enough to remain in school. Where the SLT member of staff makes the decision that the child is too ill to remain, parents will be contacted and asked to collect their child and take them home
- 2. If a child is seriously injured, having an asthma attack, severe allergic reaction, hypo, or a member of staff is unsure, the First Aider must go to the child with the First Aid Box or appropriate medical treatment. (See care plans or asthma policy)
- 3. All medical incidents will be recorded in the **Accident Incident Book** that is located in the School office. A copy will be given to parents.
- 4. The Senior Leadership Team and parents/carers must be informed of any injury to the head regardless of the severity. A **bumped head** letter is completed and given to parents at the end of the day. In serious cases, or where there are visible signs of injury, parents are contacted immediately.
- 5. In the event of a serious accident occurring in the classroom. The class teacher or teaching assistant must alert a member of the SLT to summon assistance.

First Aid Boxes

First Aid boxes are located :-

- In the school office
- The staffroom
- Corridors

The lead First Aider is responsible for ensuring the first boxes and bags are checked half termly. These should be checked regularly and restocked. Completed checklists are to be stored in the medical file in the main office.

- Items must be discarded safely after the expiry date has passed.
- A First Aid bag must be taken on each school trip

The First Aid boxes should contain the following equipment:

- Eye pads
- Medi-wipes
- Scissors x1 (main box)
- Bandages (various)
- 1 box of gloves (main box)
- 1 box of adhesive dressings
- 1 paediatric mask (main box)
- 1 box of plasters (various)

If a piece of equipment is used then Class Teacher's or Teaching Assistants must replace it on return to school in readiness for the next school trip.

Record Keeping

- 1. Any accident or incident in school relating to a pupil must be recorded in the accident book held in the reception office
- 2. The Dinner Supervisors will also record any accidents in the same book.
- **3.** The Medical Emergency Report Form (**Appendix 7**) must be completed when:-
- A pupil has a medical emergency whilst at school and has been given prescribed emergency medication e.g. Epi-pen or Glucogel
- A pupil has been sent to hospital via an ambulance.

The Governing Body and Head Teacher will review this policy every two years.

Revised: June 2016

Review Date: June 2018

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<u>APPENDICES</u>

Appendix 1: Admission form

Appendix 2: School Medicine Record

Appendix 3: Medication Record

Appendix 4: Parental consent form

Appendix 5: Sabutamol inhaler log

Appendix 6: Letter to inform parents

Appendix 7: Medical emergency report

Appendix 8: Trained First Aiders

Appendix 9: Minor Head Injury Information