

RIDGEWAY FARM CE ACADEMY

First Aid Medicine Policy

Date agreed with staff	February 2021
Date agreed by Academy Council	February 2021
Frequency of policy review	Annually
Date next review due	February 2022

Document Version Control

Issue Number	Issue Date	Summary of changes

DIOCESE OF BRISTOL ACADEMIES TRUST

FIRST AID & MEDICINE POLICY

Ridgeway Farm CE Academy

The Buffer

Purton

Wiltshire

SN5 4GT

Reviewed Annually

FIRST AID AND MEDICINES POLICY

REVIEW PROCEDURES

The First Aid and Medicines Policy for Ridgeway Farm CE Academy is to be reviewed annually by the Headteacher¹.

The next review of the Policy Document will be: **February 2022**

AMENDMENTS

The Policy Document has been amended in light of updated guidance on supporting pupils with medical conditions, drafted by the Department of Education for maintained schools and proprietors of academies in England. It is the responsibility of the Head Teacher to ensure that the complete amendment is incorporated into all copies of the document and recorded accordingly on the Amendment Sheet. Copies of pages made redundant by the amendment are to be disposed of immediately and not to be retained for any reason.

amdt No	Date of Issue	Incorporation Details		
		Name	Signature	Date
1				
2				
3				
4				
5				
6				
7				
8				

DIOCESE OF BRISTOL ACADEMIES TRUST

FIRST AID AND MEDICINES POLICY

DISTRIBUTION OF COPIES

Master Copy Headteacher

Copy One School Nurse / Healthcare professional²

Copy Two All First Aiders

Copy Three Staff Room – all staff

The Policy Document will be accessible to parents if requested or deemed necessary

¹ The term Headteacher throughout this document also denotes Principal, Executive Headteacher or Headteacher of a group of Academies.

² To be made available to any visiting Health Care professional as necessary if there is no dedicated resource.

STATEMENT OF INTENT

The Governors and Head Teacher of Ridgeway Farm CE Academy believe that ensuring the health and welfare of staff, pupils and visitors is essential to the success of the school.

We are committed to:

- Providing adequate provision for first aid for pupils, staff and visitors.
- Ensuring that pupils with medical needs are fully supported at school.

Procedures for administering medicines and providing first aid are in place and are reviewed regularly.

We will ensure all staff **(including supply staff)** are aware of this policy and that sufficient trained staff are available to implement the policy and deliver against all individual healthcare plans, including in contingency and emergency situations.

We will also make sure that the School is appropriately insured and that staff are aware that they are insured to support pupils in this way.

In the event of illness, a staff member will accompany the pupil to the school office/medical room. In order to manage their medical condition effectively, the School will not prevent pupils from eating, drinking or taking breaks whenever they need to.

The school also has a Control of Infections Policy which may also be relevant and staff should be aware of.

Name: _____ **Signature:** _____ **Date:** _____

Headteacher

Arrangements

The School Nurse/ Healthcare Professional

The School may be allocated a school nurse or other suitably qualified healthcare professional; this person will have the lead role in ensuring that pupils with medical conditions are identified and properly supported in schools, including supporting staff on implementing a pupil's Healthcare Plan. The School healthcare professional will work with the Headteacher to determine the training needs of school staff. **Suitable cover will be provided in the absence of the school nurse/healthcare professional.**

The First Aid Team

The school will ensure that there are always adequate numbers of first aid trained staff on site and a full list of trained staff is on display in the office.

Trained Staff

The members of staff in the school who are able to administer medicines are: The First Aiders as per the list displayed in the office.

First Aid Boxes

The first aid post is in the main School Office.

Medication

Pupils' medication is stored in the first aid cabinet in the first aid area by the School Office.

First Aid

In the case of a pupil accident, the procedures are as follows:

- The member of staff on duty calls for a first aider; or if the child can walk, takes him/her to a first aid post and calls for a first aider.
- The first aider administers first aid and records details of the accident in our accident book.
- If the child has had a bump on the head, they must be given a "bump on the head" note.
- If the child has to be taken to hospital or the injury is 'work' related then the accident is reported to the Governing Body and DBAT.
- If the incident is reportable under RIDDOR (*Reporting of Injuries, Diseases & Dangerous Occurrences Regulations 2013*), then as the employer the Governing Body will arrange for this to be done.

School Insurance Arrangements

Department for Education RPA

School Visits

In the case of a **residential visit**, a member of school staff trained in first aid will administer First Aid. Reports will be completed in accordance with procedures at the Residential Centre. In the case of **day visits** a trained First Aider will carry a travel kit in case of need.

Administering Medicines in School

Prescribed medicines may be administered in school (by a staff member appropriately trained by a healthcare professional) where it is deemed essential. Most prescribed medicines can be taken outside of normal school hours. Wherever possible, the pupil will administer their own medicine, under the supervision of a member of staff. In cases where this is not possible, the staff member will administer the medicine.

If a child refuses to take their medication, staff will accept their decision and inform the parents accordingly.

In all cases, we must have written parental permission outlining the type of medicine, dosage and the time the medicine needs to be given. These forms are available in the school office.

Staff will ensure that records are kept of any medication given.

Non-prescribed medicines may not be taken in school.

Storage/Disposal of Medicines

Children will be able to access their inhalers in the classroom for self-medication, quickly and easily. Other prescribed medication will be locked away out of the pupil's access. This will be administered and witnessed by a first aider. It is the responsibility of the School to return medicines that are no longer required, to the parent for safe disposal.

Asthma inhalers and spare epi-pens will be held by the school for emergency use, as per the Department of Health's protocol.

Accidents/Illnesses requiring Hospital Treatment

If a child has an incident, which requires urgent or non-urgent hospital treatment, the school will be responsible for calling an ambulance in order for the child to receive treatment. When an ambulance has been arranged, a staff member will stay with the pupil until the parent arrives, or accompany a child taken to hospital by ambulance if required.

Parents will then be informed and arrangements made regarding where they should meet their child. It is vital therefore, that parents provide the school with up-to-date contact names and telephone numbers.

Pupils with Special Medical Needs – Individual Healthcare Plans

Some pupils have medical conditions that, if not properly managed, could limit their access to education. These children may be:

Epileptic
Asthmatic
Have severe allergies, which may result in anaphylactic shock
Diabetic

Such pupils are regarded as having medical needs. Most children with medical needs are able to attend school regularly and, with support from the school, can take part in most school activities, unless evidence from a clinician/GP states that this is not possible.

The School will consider what reasonable adjustments they might make to enable children with medical needs to participate fully and safely on school visits. A risk assessment will be used to take account of any steps needed to ensure that pupils with medical conditions are included.

The School will not send pupils with medical needs home frequently or create unnecessary barriers to pupils participating in any aspect of school life.

However, school staff may need to take extra care in supervising some activities to make sure that these pupils, and others, are not put at risk.

An individual health care plan can help schools to identify the necessary safety measures to support pupils with medical needs and ensure that they are not put at risk. The School appreciates that pupils with the same medical condition do not necessarily require the same treatment.

Parents/guardians have prime responsibility for their child's health and should provide schools with information about their child's medical condition. Parents, and the pupil if they are mature enough, should give details in conjunction with their child's GP and Paediatrician. The school nurse may also provide additional background information and practical training for school staff.

Appendix

Forms

Form 1:	Contacting Emergency Services	
Form 2:	Health Care Plan	Only to be used if one is not supplied by School Nurse
Form 3:	Parental agreement for school to administer medicine	
Form 4:	Record of regular medicine administered to an individual child	
Form 5:	Indication for administration of medication during epileptic seizures	Only to be used if this can't be recorded on Health Care Plan
Form 5A:	Epileptic seizure chart	Only to be used if this can't be recorded on Health Care Plan
Form 6A:	Emergency instruction for an allergic reaction - EpiPen®	Only to be used if this can't be recorded on Health Care Plan
Form 6B:	Emergency Instructions for an allergic reaction - Anapen®	Only to be used if this can't be recorded on Health Care Plan
Form 7:	Record of staff training	

FORM 1

Contacting Emergency Services

Request for an Ambulance

Dial 999, ask for ambulance and be ready with the following information:

- Your telephone number:
01793 677471
- Give your location as follows (*insert school address*)
Ridgeway Farm CE Academy, The Buffer, Purton, SN5 4GT
- State that the postcode is:
SN5 4GT
- Give exact location in the school (*insert brief description*)
On the Ridgeway Farm Estate and NOT in Purton village
- Give your name: _____
- Give name of child and date of birth/age and a brief description of child's symptoms

- Inform Ambulance Control of the best entrance and state that the crew will be met and taken to the casualty

Speak clearly and slowly and be ready to repeat information if asked

Put a completed copy of this form by the telephone

Health Care Plan

School	
Pupil Name & Address	
Date of Birth	
Class	
Medical Diagnosis	
Triggers	
Who Needs To Know About Pupils Condition & What constitutes and Emergency	
Action to Be Taken in Emergency and by whom	
Follow Up Care	
Family Contacts Names Telephone Numbers	
Clinic/Hospital Contacts Name Number	
GP Name Number	
Description of medical needs and signs and symptoms	
Daily Care Requirements	
Who is Responsible for Daily Care	
Transport Arrangements <i>If the pupil has life-threatening condition, specific transport healthcare plans will be carried on vehicles</i>	
School Trip Support/Activities Outside School Hours (e.g. risk assessments, who is responsible in an emergency)	
Form Distributed To	

Date _____

Review date _____

This will be reviewed at least annually or earlier if the child's needs change

Arrangements that will be made in relation to the child travelling to and from School. *If the pupil has life-threatening condition, specific transport healthcare plans will be carried on vehicles*

FORM 3 - Parental agreement for setting to administer medicine

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/setting	Lydiard Millicent CE Primary School
Name of child	
Date of birth	
Class	
Medical condition or illness	

Medicine

Name/type of medicine (as described on the container)	NB: Medicines must be in the original container as dispensed by the pharmacy
Dosage and method	
Timing	
Special precautions/other instructions	
Are there any side effects that the school/setting needs to know about?	
Self-administration	Yes / No
Does this medicine need to be taken with child if going offsite?	Yes / No
Procedures to take in an emergency	

Contact Details

Name	
Daytime telephone no.	
Relationship to child	
Address	
I understand that I must deliver the medicine personally to	School Office

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school staff administering medicine in accordance with the school 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 _____

FORM 4

Record of medicine administered to an individual child

Name of school	Lydiard Millicent CE Primary School
Name of child	
Class	
Name and strength of medicine	
Dose and frequency of medicine	

Medicine Received	
Date/Time	
Quantity	
Expiry Date	
Staff Signature	
Staff Name	
Parent/Carer Signature	
Parent/Carer Name	

Medicine Returned	
Date/Time	
Quantity	
Expiry Date	
Staff Signature	
Staff Name	
Parent/Carer Signature	
Parent/Carer Name	

Date/Time	
Quantity	
Expiry Date	
Staff Signature	
Staff Name	
Parent/Carer Signature	
Parent/Carer Name	

Date/Time	
Quantity	
Expiry Date	
Staff Signature	
Staff Name	
Parent/Carer Signature	
Parent/Carer Name	

Date/Time	
Quantity	
Expiry Date	
Staff Signature	
Staff Name	
Parent/Carer Signature	
Parent/Carer Name	

Date/Time	
Quantity	
Expiry Date	
Staff Signature	
Staff Name	
Parent/Carer Signature	
Parent/Carer Name	

FORM 5

INDICATION FOR ADMINISTRATION OF MEDICATION DURING SEIZURES

Name _____ D.O.B. _____

Initial medication prescribed: _____

Route to be given: _____

Usual presentation of seizures: _____

When to give medication: _____

Usual recovery from seizure: _____

Action to be taken if initial dose not effective: _____

This criterion is agreed with parents consent. Only staff trained to administer seizure medication will perform this procedure. All seizures requiring treatment in school will be recorded. These criteria will be reviewed annually unless a change of recommendations is instructed sooner.

FORM 6A

EpiPen®

EMERGENCY INSTRUCTIONS FOR AN ALLERGIC REACTION

Child's Name: _____

DOB: _____

Allergic to: _____



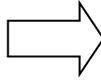
ASSESS THE SITUATION

Send someone to get the emergency kit, which is kept in:

IT IS IMPORTANT TO REALISE THAT THE STAGES DESCRIBED BELOW MAY MERGE INTO EACH OTHER RAPIDLY AS A REACTION DEVELOPS

MILD REACTION

- Generalised itching
- Mild swelling of lips or face
- Feeling unwell/Nausea
- Vomiting

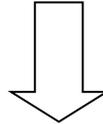


ACTION

- Give _____ (Antihistamine) immediately
- Monitor child until you are happy he/she has returned to normal.

SEVERE REACTION

- Difficulty breathing/choking/coughing
- Severe swelling of lips/eyes/face
- Pale/floppy
- Collapsed/unconscious



ACTIONS

1. Get _____ EpiPen® out and send someone to telephone 999 and tell the operator that the child is having an **'ANAPHYLACTIC REACTION'**
2. Sit or lay child on floor.
3. Take EpiPen® and remove grey safety cap.
4. Hold EpiPen® approximately 10cm away from outer thigh.
5. Swing and jab black tip of EpiPen® firmly into outer thigh. **MAKE SURE A CLICK IS HEARD AND HOLD IN PLACE FOR 10 SECONDS.**
6. Remain with the child until ambulance arrives.
7. Place used EpiPen® into container without touching the needle.
8. Contact parent/carers as overleaf.

Emergency Contact Numbers

Mother: _____

Father: _____

Other: _____

Signed Head teacher: _____ Print Name: _____

Signed parent/guardian: _____ Print Name: _____

Relationship to child: _____ Date agreed: _____

Signed Pediatrician/GP: _____ Print Name: _____

Care Plan written by: _____ Print Name: _____

Designation: _____

Date of review: _____

Date	Time	Given by (print name)	Observation/evaluation of care	Signed/date/time

Check expiry date of EpiPen® every few months

FORM 6B

ANAPEN®

EMERGENCY INSTRUCTIONS FOR AN ALLERGIC REACTION

Child's Name: _____

DOB: _____

Allergic to: _____



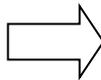
ASSESS THE SITUATION

Send someone to get the emergency kit, which is kept in: First Aid Cabinet in the First Aid Room

IT IS IMPORTANT TO REALISE THAT THE STAGES DESCRIBED BELOW MAY MERGE INTO EACH OTHER RAPIDLY AS A REACTION DEVELOPS

MILD REACTION

- Generalised itching
- Mild swelling of lips or face
- Feeling unwell/Nausea
- Vomiting

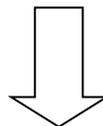


ACTION

- Give _____ (Antihistamine) immediately
- Monitor child until you are happy he/she has returned to normal.

SEVERE REACTION

- Difficulty breathing/choking/coughing
- Severe swelling of lips/eyes/face
- Pale/floppy
- Collapsed/unconscious



ACTIONS

1. Get _____ ANAPEN® out and send someone to telephone 999 and tell the operator that the child is having an
'ANAPHYLACTIC REACTION'
2. Sit or lay child on floor.
3. Get ANAPEN® and remove black needle cap.
4. Remove black safety cap from firing button.
5. Hold ANAPEN® against outer thigh and press red firing button.
6. Hold ANAPEN® in position for 10 seconds.
7. Remain with the child until ambulance arrives. Accompany child to hospital in ambulance.
8. Place used ANAPEN® into container without touching the needle.
9. Contact parent/carer as overleaf.

Useful Contacts

Allergy UK

Allergy Help Line: (01322) 619864
Website: www.allergyfoundation.com

The Anaphylaxis Campaign

Helpline: (01252) 542029
Website: www.anaphylaxis.org.uk and www.allergyinschools.co.uk

Association for Spina Bifida and Hydrocephalus

Tel: (01733) 555988 (9am to 5pm)
Website: www.asbah.org

Asthma UK (formerly the National Asthma Campaign)

Adviceline: 08457 01 02 03 (Mon-Fri 9am to 5pm)
Website: www.asthma.org.uk

Council for Disabled Children

Tel: (020) 7843 1900
Website: www.ncb.org.uk/cdc

Contact a Family

Helpline: 0808 808 3555
Website: www.cafamily.org.uk

Cystic Fibrosis Trust

Tel: (020) 8464 7211 (Out of hours: (020) 8464 0623)
Website: www.cftrust.org.uk

Diabetes UK

Careline: 0845 1202960 (Weekdays 9am to 5pm)
Website: www.diabetes.org.uk

Department for Education and Skills

Tel: 0870 000 2288
Website: www.dfes.gov.uk

Department of Health

Tel: (020) 7210 4850
Website: www.dh.gov.uk

Disability Rights Commission (DRC)

DRC helpline: 08457 622633
Textphone: 08457 622 644
Fax: 08457 778878
Website: www.drc-gb.org

Epilepsy Action

Freephone Helpline: 0808 800 5050 (Monday – Thursday 9am to 4.30pm, Friday 9am to 4pm)

Website: www.epilepsy.org.uk

Health and Safety Executive (HSE)

HSE Infoline: 08701 545500 (Mon-Fri 8am-6pm)

Website: www.hse.gov.uk

Health Education Trust

Tel: (01789) 773915

Website: www.healthedtrust.com

Hyperactive Children’s Support Group

Tel: (01243) 551313

Website: www.hacsg.org.uk

MENCAP

Telephone: (020) 7454 0454

Website: www.mencap.org.uk

National Eczema Society

Helpline: 0870 241 3604 (Mon-Fri 8am to 8pm)

Website: www.eczema.org

National Society for Epilepsy

Helpline: (01494) 601400 (Mon-Fri 10am to 4pm)

Website: www.epilepsynse.org.uk

Psoriasis Association

Tel: 0845 676 0076 (Mon-Thurs 9.15am to 4.45pm Fri 9.15am to 16.15pm)

Website: www.psoriasis-association.org.uk/