



Jewell Academy
an Aspirations Academy

Medical Policy

Supporting Pupils with medical conditions and managing medicines

Latest version:	May 2022	Review period:	2 years
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Type of policy:	Network	Approval level:	RB



Medical Policy for supporting pupils with medical conditions and managing medicines

This policy has been structured based upon the most recent government advice [“Supporting pupils at school with medical conditions” \(DfE - December 2015\)](#), [“First aid in schools, early years and further education”\(DfE February 2022\)](#), the [“Guidance and Code of Practice - First Aid at Work” \(April 2017\)](#) provided by Dorset County Council as well as guidance from our School Nurse and other Health Professionals.

Jewell Academy adheres to the duty as stated in the Children and Families Act 2014 that children attending the school with medical conditions will have the same right of admission to our school as other pupils and will not be refused admission or excluded from school on medical grounds. Appropriate levels of assessments will be undertaken to establish and determine what support children with medical conditions require. This will be done in partnership with parents and health professionals.

The prime responsibility for a child’s health rests with parents. It is anticipated that parents/carers will ensure that appropriate information is provided for the school that enables proficient management and a good understanding of their child’s medical condition; this includes working in partnership in the management of any medicines administered at school.

The school takes advice and guidance from a range of sources, including the School Nurse, Paediatric Consultants, and other Health professionals in addition to the information provided by parents in the first instance. This enables us to manage support effectively and to minimise any disruption to learning.

Key Personnel

The designated person with overall responsibility to implement this policy is:
Alex Waddington, Principal

This person will also ensure that staff are appropriately aware of the medical condition of children with whom they work and that any confidential information pertinent to the medical condition is entrusted to individual staff.

The person responsible for developing Individual Healthcare Plans is: Ali Sinclair, Vice Principal

AIMS

The school is committed to assisting children and young people with long-term or complex medical conditions and working in partnership with their parents/carers and other medical professionals involved.

Our aims are:

1. To ensure that children attending this school with short or long term medical conditions are properly supported so that they have full access to education, including off-site activities, residential visits and physical education.
2. To make arrangements for staff to ensure that they receive adequate and appropriate training so as to support children with medical needs.
3. To ensure that parents and children have confidence in the medical support arranged at school.
4. To work in partnership with Health Service colleagues.
5. To be fully compliant with the Equality Act 2010 and its duties.
6. To manage medicines within school in accordance with government and local advice.
7. To keep, maintain and monitor records as detailed in this policy.
8. To write and to monitor Individual Healthcare Plans, in partnership with health professionals.
9. To ensure that the children in our school are safe and are able to attend school regularly with their medical condition.
10. To support children with complex medical conditions and or long term medical needs in partnership with Health professionals and parents to enable their access to education.
11. To adhere to the statutory guidance contained in [“Supporting pupils at school with medical conditions” \(DfE - December 2015\)](#), [“First aid in schools, early years and further education”\(DfE February 2022\)](#), [Ensuring a good education for children who can not attend school due to health needs \(january 2013\)](#) and [“Multi-Agency Guidance for the Management of Long Term Health Conditions for Children and Young People” \(DSCB 2011\)](#) as set out and agreed with the school’s Regional Board.

INDIVIDUAL HEALTHCARE PLANS

Individual Healthcare Plans will be developed for children with medical conditions in accordance with the advice contained in “Supporting pupils at school with medical conditions” (DfE – December 2015). Individual Healthcare Plans will set out the support that is needed so that the impact on school attendance, health, social well-being and learning is minimised. Not all conditions will require an Individual Healthcare Plan. In some cases, the agreement request to administer medicines will be sufficient to cover short term conditions and treatment. The plan will include the names of the members of staff who are appropriately trained and providing the agreed support.

The school will use the recommended DfE Templates or develop their own versions in line with the advice provided by the DfE to capture relevant information that will enable an appropriate plan to be structured. The Templates cover a range of issues for which governors have responsibility. Health professionals may also be involved in the development of Individual Healthcare Plans in addition to parents and children.

The Individual Healthcare Plans will be tailored to meet the needs of short term, long term and/or complex medical conditions. The plans will be kept under review by the designated person and revised as required, or at least annually, to ensure that they reflect current medical needs (e.g., changes in medication). Individual Healthcare Plans will include details on emergency arrangements and these will be shared with all relevant staff, First Aiders and school office staff as applicable.

Where pupils have been issued with an Education and Health Care (EHC) Plan by the local authority, any Individual Healthcare Plan will be linked to, or become part of that EHC Plan.

ROLES AND RESPONSIBILITIES

Parents

Parents are asked to provide the school with sufficient and up-to-date information about their child's medical needs and medication using a standard form (Appendix 2) so that arrangements to manage their short or long term medical conditions can be implemented in partnership. It is recognised that staff do not have any obligation under their contract to administer medication to pupils. There is a requirement however under the DfE to assist pupils with medical needs and ensure that they have the support they need to fulfil their potential. The Academy has a policy that it will not, as a rule, administer medication to pupils unless there has been specific instructions from a GP or medical professional, prescription or medically labelled box. Parents or carers will then sign a health care plan or academy medical form to agree to the administration of the medication. Parents and carers have a responsibility to provide the appropriate medication that is in date and for the nature of the medical condition

Parents are required to deliver medicine into school if it is not possible for this to be administered outside the school day. Medicine should be provided in the original container(s) with the original prescription label. The prescription label should state the correct way to administer and contain any other equipment required to administer the correct dosage e.g. a syringe, measured spoon, measured cup etc. Parents should ensure that the medicine is in date and provide information on how it should be stored. All medicines must be marked with the following information clearly indicated:

- the child's name on the medicine;
- when the medicine should be given and expiry date;
- the prescribed dose and pharmacist's instruction, e.g., after meals.
- Any additional equipment required to give the correct dose

Parents are expected to notify the school immediately (in writing) of any changes or alteration to a prescription or recommended treatment so that adjustment can be made to Individual Healthcare Plans or previous agreement. It is important that the school is aware and informed by parents about other issues or symptoms their child may have experienced over night or before school; this is particularly important for asthma conditions

It must be remembered that the prime responsibility for a child's health rests with parents/carers.

Where a pupil needs prescribed medication the following is assumed:

Most medication is prescribed three times a day. Parents can therefore administer medication before school, after school and before bed. Medication should not normally be required during the school

day. However, if medication (such as antibiotics) is required at lunchtime, parents are asked to come into school to administer the medication. Children requiring inhalers or cream for eczema are supervised by staff whilst administering their own medication. Parents of children who are at risk of life-threatening reactions or on-going diagnosed medical conditions are required to give consent, allowing named and trained staff to administer treatment in the event of an emergency (as directed in a medical care plan). All such medication is kept in the office or medical room in a lockable cupboard.

The Principal will ensure the following:

- that staff are informed about the implementation and effectiveness of this policy;
- that arrangements are made with staff supporting children with medical conditions, and for any medicines required in delivering that support to be stored safely and in line with guidance provided by the local authority;
- suitable arrangements are agreed in partnership and liaison with parents/carers to support the medical needs of pupils;
- that appropriate training has been provided for staff that enables them to carry out agreed procedures;
- that staff will not be directed to administer medicines - they can choose to volunteer to do so if they so wish (all staff will be advised to refer to advice from their professional associations before volunteering to administer medicines);
- liaison with governors in the review of this policy at appropriate intervals, in line with local and national advice;
- that all staff and parents/carers are aware of this policy and the procedures for dealing with medical needs at the school;
- make arrangements through the designated teacher to manage the following:
 - prescription medicines in school;
 - prescription medicines on trips and outings, including school transport;
 - accurate record keeping when administering medicines;
 - the safe storage of medicines;
 - procedures for access to medicines during emergency situations;
 - adhering to risk management procedures involving medicines;
- that risk assessments and arrangements for off-site visits are checked and that governors are informed of the details.

The Designated Teacher will ensure the following:

- staff work in partnership with parents/carers to ensure the well-being of children and young people;
- that interruption to school attendance for medical reasons will be kept to a minimum;
- staff who have agreed to administer medicines will receive the appropriate training;
- adherence to Individual Healthcare Plans;
- all cultural and religious views, made known to the school in writing, will be respected;

- ensure a register is kept of all children in the Academy with specific Health Care Plan medical conditions, and this register is distributed to all staff on the Staff Room medical board. This information is also easily accessible through our MIS system - SIMS that all teachers have access to. The school office updates this register regularly and when new children join the academy. When medication is administered, a form is completed by staff on each occasion.

STAFF TRAINING AND SUPPORT

Most medicines to be administered will not require professional training; however, the school will ensure that staff supervising the administration of medicines will understand that accurate records are to be kept and are completed at the time of being administered.

Staff who maintain these records should be clear about what action to take, (such as referring to the Designated Safeguarding Lead) if they become concerned about the welfare of an individual pupil. If a child or young person is provided with an Individual Healthcare Plan, additional training must be given by a nominated Health professional, e.g. use of a nebuliser, using Epipens. Training received or cascaded from parents will not be accepted unless otherwise instructed by a health professional. Record of Training Forms must be completed and maintained (see DfE Template E: staff training record).

(Also see “Multi-Agency Guidance for the Management of Long Term Health Conditions for Children and Young People” (DSCB 2011); section 3.3 and 3.4 including Chart E.)

REASONABLE ADJUSTMENTS

The school understands its duties under the Equality Act 2010 to make reasonable adjustments and enable children and young people to have equitable access to education. Children and young people with complex or significant medical needs will be included in activities for as much as their health permits.

CHILDREN WITH HEALTH NEEDS WHO CAN NOT ATTEND SCHOOL

Jewell Academy's policy intention is that all pupils should have the best possible start in life through a high-quality education, which allows them to achieve their full potential. A child who has health needs should have the same opportunities as their peer group, including a broad and balanced curriculum. As far as possible, children with health needs and who are unable to attend school should receive the same range and quality of education as they would have experienced at their home school. As a result, alternative provision and the framework surrounding it will offer a good quality education on par with that of mainstream schooling, along with the support pupils need to overcome barriers to attainment. For further information, please see Jewell Academy's additional policy on 'Children with health needs who can not attend school'. This can be found on the school website or on request from the school office.

MANAGING MEDICINES ON SCHOOL PREMISES AND ON OFF-SITE ACTIVITIES

Jewell Academy will ensure that:

- records are maintained detailing an accurate history of the administering of medicines as far as possible – this will not include self-administering of over the counter medicines for older pupils for whom parents have requested permission using the appropriate Template;
- DfE Templates C and/or D (or an appropriate equivalent) will be used to log administering of medicines;
- suitable back-up systems are in place to cover administering of medicines in the event of staff absence;
- if there are any doubts or confusion about arrangements for administering medicines, staff must consult with the parents and the designated member of staff;
- no child or young person under 16 will be given medicines or be permitted to self-medicate without their parents' written request.

Jewell Academy has a defibrillator that may be used in an emergency in accordance with the manufacturer's instructions and in line with the [Automated external defibrillators \(AED\) \(DfE: October 2019\)](#).

Automated External Defibrillator

Make and Model: iPad AED

Manufacturing Date of AED: 19/ 08 / 2021 (5-year approximate battery life)

Expiry Date of AED Pads: 06/24 and 11/24

The Automated External Defibrillator is located outside the staff room on the wall.

Ali Sinclair is responsible for ensuring Automated External Defibrillator and AED pads are in date and will check the defibrillator every term. The iPad AED also has a visible digital screen to inform battery life.

STORAGE OF MEDICINES

The school will adhere to the advice contained in "Guidance and Code of Practice - First Aid at Work" and local guidance provided by Dorset County Council's Health & Safety Team and the local authority's Physical and Medical Needs Service.

REFUSAL OR TOO UNWELL TO TAKE MEDICINES

If a child refuses to take medicine as prescribed and as requested by parents, the records (DfE Template C or D or appropriate equivalent) must state 'REFUSED' clearly and the parents/carer informed immediately. Children/young people will not be forced to receive medicine if they do not wish to do so.

If a child or young person is ill/injured and therefore unable to receive the agreed prescribed medication, the person designated to supervise the taking of medicine will consult with parents/carers immediately and advise the Principal of their actions. If the child vomits or has diarrhoea soon after receiving medication, parents must be contacted so that they can seek further medical advice.

SELF MANAGEMENT OF MEDICINES

In some cases, it might be appropriate that children self-administer medicines, e.g., inhalers, cream. The school will encourage those with long term medical conditions to take responsibility for administering their own medication but continue to ask staff to supervise so that the appropriate records can be completed for safeguarding purposes.

Some children may carry 'over the counter medicines' (non-prescribed medicines) for their own use and can self-administer when appropriate and as directed by parents. We recommend that only a limited dose should be brought to school at any one time in order to reduce potential risk of medicines being abused. This medication will be stored in the office medical box or in the classroom cupboard.

OFF-SITE ACTIVITIES/SCHOOL TRIPS

All arrangements for medicines, including the storage of medicines, Individual Healthcare Plans, and Risk Management programmes will apply for all off-site activities or school trips. A member of staff will be designated to ensure there are suitable off-site arrangements for storage, and recording of the medicines when assessing any risks associated with the trip, particularly for those children and young people with long term or complex health conditions. All plans and risk assessments will be discussed with parents/carers in preparation for the activity in advance of the departure day and agreed with the Principal.

All off-site activities will be evaluated in terms of proximity and accessibility to emergency services and any implications for those with short or long term medical conditions before receiving approval to go ahead from the Principal.

EMERGENCY PROCEDURES

Care is taken to ensure that all pupils are safe. The school has a minimum of two 'First Aid at Work' qualified first aiders, a minimum of 5 'Paediatric First Aid' qualified first aiders.

Children with life threatening medical conditions or that require close monitoring/supervision may have Individual Healthcare Plans developed by school staff and Health professionals that provide contact details for emergency situations, e.g., anaphylaxis, diabetes, or epilepsy.

All cases deemed 'complex' or 'serious' medical conditions have emergency contact details held in the school office and accessible on the SIMs database.

Asthma can also be life threatening; the school will follow the "Guidance on the use of emergency salbutamol inhalers in schools" issued by the Department of Health (*September 2014*).

BEST PRACTICE

The school will endeavour to eliminate unacceptable situations by promoting best practice in supporting children with medical conditions. In doing so we will:

- ensure that children have access to the medicine they need as arranged with parents;
- where necessary, manage each medical condition through an Individual Healthcare Plan;
- listen to the views of children and their parents and take advice from medical professionals in planning the support needed;
- ensure that pupils with medical conditions are supervised appropriately and not left alone when ill;
- support access to the full curriculum or as much as medical consultants recommend;
- work in partnership with health services to ensure swift recovery or access to treatment;
- facilitate opportunities to manage medical conditions with dignity;
- manage medical needs such that parents are not required to support their child in school;
- include all children in school on and off-site activities, meeting their medical needs in the best way possible.

FIRST AID

There are a number of qualified first aiders at Jewell Academy and they have either a Full Paediatric First Aid Certificate or an Emergency Paediatric First Aid Certificate. Training is carried out every 3 years by an external company and this includes defibrillator training. Certificates identifying the completion of training are held in the school office. All first aid administered (minor accidents, see below for more severe accidents) is recorded in our First Aid forms, a copy of the first aid slip is kept in school and the original slip is sent home to parents (Appendix 5 'First Aid Pink Slips'). Parents are notified if there has been a head bump or if the academy feels that the child should recuperate at home. Class teachers are also notified of first aid incidences. If the medical treatment required exceeds the abilities of the academy's First Aiders then an ambulance will be called, the parents informed and the incident logged on Smart Log. If a child has a broken limb, crutches etc. that may impede on their ability to move around the academy, a risk assessment form will be completed.

Blood and Avoiding Contamination

All staff should be familiar with this procedure before treating incidents where blood is visible. In most cases, a first aider will be called to treat the wound:

- Wash hands first
- Put on disposable gloves
- Clean the wound
- Dress any wound if necessary
- Dispose of the gloves and any wipes or contaminated material in a sealed or knotted plastic bag, and dispose of in the medical waste bin (yellow)
- Clean any spillages or leaks from the environment
- Wash hands thoroughly again
- Record incident in the first aid slips or Smart Log as appropriate
- Contact parents or emergency services as necessary and let the class teacher know

Asthma and Other Medical Conditions

All staff must be aware of children in their care with medical conditions. Details and photographs of all children in school with medical conditions (Health Care Plans) are shared on the Staff Room Medical Board and in the Kitchen. It is the responsibility of the class teacher to inform any visiting teachers or volunteers who may be working with children on the medical list to ensure continuity of care.

Asthma

The school recognises that pupils with asthma are entitled to participate fully in all aspects of school life, and it is our policy to help and encourage children with asthma to achieve this. The school aims to ensure that the physical environment is favourable to children with asthma, and to ensure that other children and all staff understand and support asthmatic children. In common with many schools we have a number of children who suffer from asthma and who have inhalers at school. These are kept in the child's classroom grab bag and are given out to children by classroom staff. The level of use is monitored and recorded. If any change in the pattern of need is noticed or staff have any concerns then parents will be informed. Inhalers are taken with the children on all school trips and outings.

Anaphylaxis

Anaphylaxis is a severe allergic reaction of rapid onset with circulatory collapse and hypertension (low blood pressure) and is life threatening. Almost any food can cause anaphylaxis but the foods most commonly responsible are nuts, fish, shellfish, cow's milk and eggs. Symptoms are often first noted in the mouth, with a sensation of burning, itching or irritation in the lips, mouth or throat. In severe cases these symptoms are followed by a loss of consciousness and suffocation. It is Academy policy that a clear agreement (Health Care Plan) is drawn up between the school and the parent of each child known to suffer from anaphylactic shock, authorising one or more named individuals to administer treatment. These adults will be trained by the school nurse to administer Epi Pens etc as required. This training happens annually. Epi pens are also stored in a medical cupboard close to the child's classroom. All teaching staff are informed of children with chronic illnesses or anaphylaxis. It is the responsibility of the class teacher to pass on this information to other adults working in the classroom and ensure that these adults are aware of procedures. The school office updates the medical registers regularly.

Diabetes

This is a disorder in which the body is unable to control the amount of sugar in the blood. Insulin injections are the most common way of regulating blood sugar levels. It is the policy of the school that for each diabetic child there should be a written agreement (Health Care Plan) between the school and the parent, detailing arrangements for the administration of insulin and the monitoring of blood sugar levels, either by the parent or by a named staff member. The school nurse will carry out the appropriate training with staff. Regular meetings will be held with parents and the school nurse to update care plans as needed.

Epilepsy

This is a tendency to have recurrent seizures or fits, and it affects one in every 200 people. Some seizures involve 'petit mal' which is a brief interlude of unconsciousness. Witnessing a seizure can be frightening if they are convulsive, and other children should be prepared to avoid undue panic. It is the policy of the school that all teachers with known children with epilepsy in their classes should have up to date training in emergency procedures and that these should be written down and available to all adults working with or near the class in question. Medical care plans will be in place and updated regularly alongside parents and the school nurse.

Other medical conditions

Medical conditions are varied and individual to each child. In all cases, discussions with parents and the school nurse or hospital practitioner will be undertaken and care plans put in place. These will be regularly reviewed and training put in place as needed.

Accident Procedures

All accidents should be reported to the Principal. All accidents should be recorded in the Academy accident book (First Aid Slips or Smart Log), in accordance with this policy. A report form should be completed by the member of staff treating the child / children. This form should be given to the Assistant Principal, Vice Principal or Principal and actioned accordingly. The Smart Log recording should contain the following information:

- Name and class of injured person
- Time, date and place of the injury
- What happened to cause the injury
- The injury sustained and treatment given
- Name of any witnesses
- Any other relevant information In the event of a child suffering a head bump, a letter or personal verbal message to parents is sent home/given on the day to advise the parent.

The child is then monitored closely to ensure no further reactions happen as a consequence. The class teacher is informed. If the head bump is felt to be serious, the child will be sent home and medical advice advised to the parent or carer. All accidents will be investigated to try to prevent them from recurring. This investigation will be documented. All accidents to pupils and any accidents to staff, visitors, or contractors should be notified without delay to the Principal and recorded in the appropriate record file (Smart Log - online platform). Notifiable injuries (RIDDOR), should be declared to the Health and Safety Executive by the most expedite means. A form is to be completed and submitted to the HSE and BCP authority informed. Where a child is taken directly to hospital from the Academy, parents must be informed at the first opportunity. The Health and Safety Executive will be notified by the most expedite means if the incident meets the threshold. A form F2508 is to be completed and submitted to the HSE to comply with RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations)

Serious Accident Procedures

Serious Accidents Definition: Any accident or incident leading to a fatality or serious injury.

- All serious accidents in the Academy should be reported to the Principal or the Senior Member of staff on site immediately.
- Trained staff to administer first aid.
- Office staff to call ambulance.
- Office staff/Principal/senior leader to inform parents/emergency contact.
- Staff to complete accident report forms.

All serious accidents should be investigated and actions put in place to try and ensure that the possibility of such an incident happening again is reduced as far as possible.

Serious accidents on visits / trips and sporting events

Staff will be made aware of how the activity could impact on the child's medical condition. They will have read the child's medical Health Care Plan and the risk assessment documents for the activity. Minor Accidents (injuries or illnesses requiring first aid treatment and no immediate professional medical care) will be dealt with by a First Aider (each trip will have assigned First Aiders identified within the risk assessment). Academy staff will take a first aid ruck sack bag and medical equipment needed by individual children to all trips and visits. In the case of a more serious accident, if the child

cannot be moved, the First Aider will contact the Principal or senior member of staff and a decision will be made as to the most appropriate action to take.

Informing Parents / Carers

Parents or carers will be informed of minor medical or first aid incidents through the First Aid Pink Slip at the end of the day (or given to the child to give to you if walking home - Year 6 only).

Parents or carers will be informed about a medical or first aid issue by phone call, text or letter to go home with their child on the day or for the parent to come and collect their child if they have:

- A serious wound or injury
- A reaction by a child as identified in a care plan that warrants parental input or support
- Any reactions to the medical conditions shown above
- Head bumps
- Swollen limbs
- Felt faint for a prolonged period or have a bad headache
- Felt sick for a prolonged period or have been sick (if a child has vomited, they should not return to school for 48 hours)
- A significantly raised temperature
- Unexplained rashes
- Difficulty breathing or unexplained chest pains
- Symptoms of COVID

School staff will contact a parent to come into school to agree the next course of action if staff are unsure about how a child is responding to treatment.

Parents or carers will not be informed about these medical or first aid issues:

- A minor scrape or bump with no obvious mark or wound
- A minor scrape or bump where a slight mark is present but is not painful or indicating any other injury
- A mild headache or sore throat which improves with a drink or short quiet period
- A mild cough or cold

COMPLAINTS

Should parents or carers be dissatisfied with the support provided by Jewell Academy, they should discuss their concerns directly with staff. If for whatever reason this does not resolve the issue, they may make a formal complaint via the school's complaints procedure (please see the academy website).

LIABILITY AND INDEMNITY

Jewell Academy has made arrangements through the Risk Protection Arrangement (RPA - established by the Department for Education) for Academy schools to cover staff in the arrangements made to support children, with medical conditions for whom particular training has been given.

No child will be administered medication without parental consent. A Long Term or Short Term Administration or Medicine/Treatment form must be completed with full details of the medication/treatment and these must match that of the prescription label and manufacturer's instructions. All parents sign to give consent and understand that they must deliver the medication personally to the School Office. Procedures are in place to ensure all medication and treatment is given daily, however parents also sign and accept that it is a service which the school is not obliged to undertake and will not complain if the medication is not administered during the day.

EQUALITY STATEMENT

Jewell Academy is mindful of its Equality Duties; respecting religious belief and ensuring that support is provided for those with disability needs that might be affected by this policy. Where there are language or communication issues, and to avoid any misunderstanding, the parents/carers and Principal will agree on an appropriate course of action. The Principal will engage interpreters or signers when required to ensure that full understanding of a pupil's medical needs are determined accurately.

With regard to off-site visits and residential opportunities, Jewell Academy will ensure that reasonable adjustments enabling pupils to be included are appropriate and made in consultation with parents/carers.

Appendices

Appendix 1: Administering Medicine Staff Flow Chart

Appendix 2: Short and Long Term Administration of Medicine/ Treatment Forms

Appendix 3: DfE Template C

Record of medicine administered to an individual child

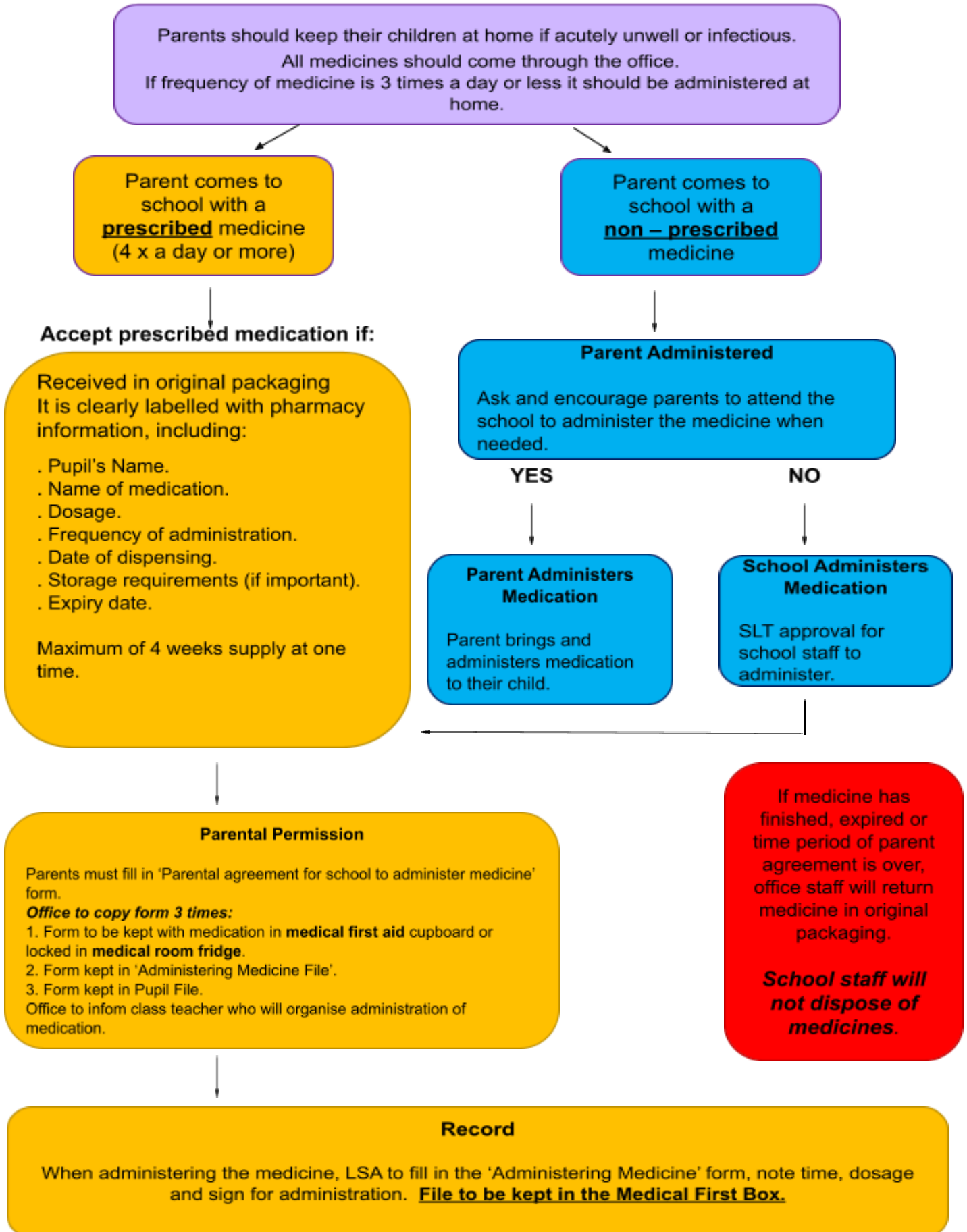
Appendix 4: DfE Template D:

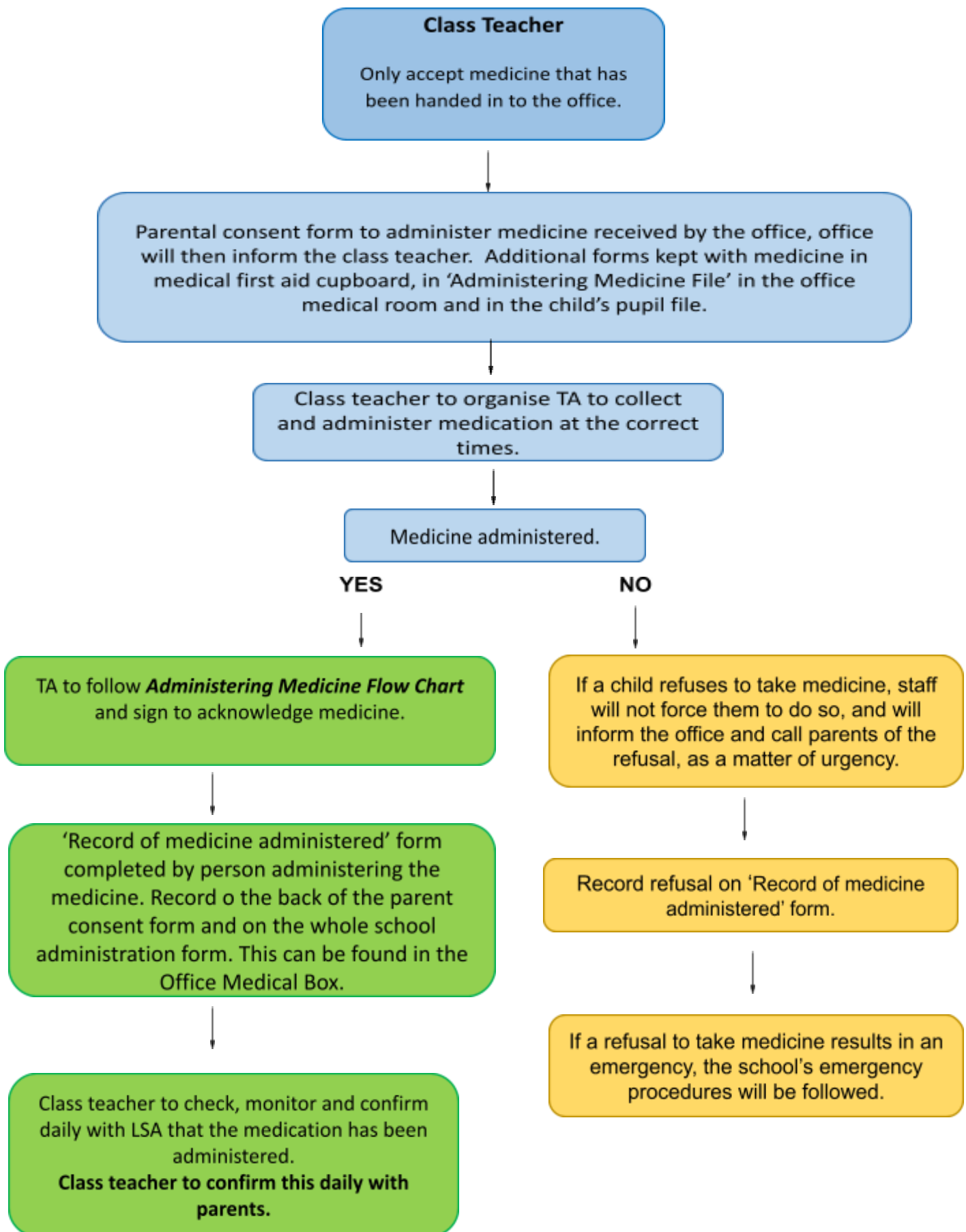
DfE Template D: Record of medicine administered to all children

Appendix 5: First Aid 'Pink Slip'

Appendix 1: Administering Medicine Staff Flow Chart

OFFICE





ADMINISTERING MEDICINE

Read 'Parental agreement for school to administer medicine' form.

YES

Ensure you have the right child and that their name matches that on the medicine.

NO

YES

Check that the medicine is still in date and that the dose that you are to give is clear and unambiguous.

NO

YES

Ensure that there is enough medicine left to give the prescribed dose.

NO

YES

Give the dosage prescribed to the child.
Record and sign that the medicine has been administered on the individual child's 'Record of Medicine Administered' found on the back of the purple 'Parent agreement form' found in the Administering Medicine File.
This will be stored in the Office Medical Room.

YES

Record and sign that you have administered medicine on the daily Administering Medication Record – found in the First aid cabinet in the Office.

DO NOT administer medicine.

Check information in 'Administering Medicine' file.
Check with class teacher and office.
Contact parents.

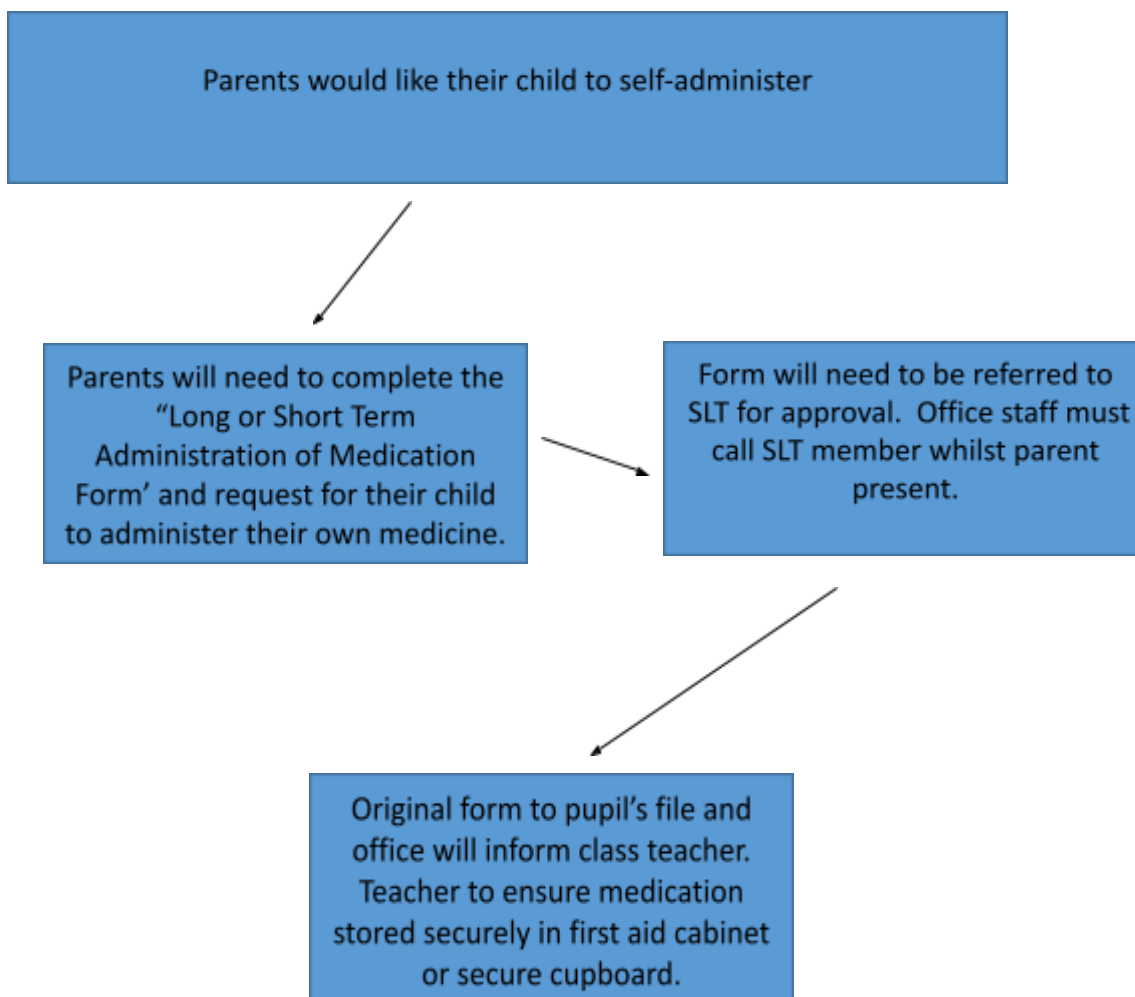
DO NOT administer medicine.

Contact parents.

IF A CHILD NEEDS LONG TERM MEDICATION

If a child requires long term medication then a Healthcare Plan needs to be drawn up by school staff, medical professionals and the parent/ guardian(s). The School point of contact is Ali Sinclair, Vice Principal. If the child requires medication two times daily this should be administered at home morning and night.

If a child requires medication 4 times per 24 hours, then it is vital that parents inform the school of the time the child would require medication. They should also inform the school of the time parents last gave the medication on the medicine consent form. It is also important to remind parents that they should inform the school if they have given their child any medication before arrival to school on Health & Safety grounds.



Appendix 2

PARENTAL CONSENT FORM
SHORT TERM ADMINISTRATION OF MEDICINE/TREATMENT

The school will not give your child medication unless you complete and sign this form. We strongly recommend all parents/carers administer medication to their child themselves.

Child's name:..... Class D.O.B

Name of person with Parental Responsibility:

Home / Mobile telephone numbers: Work telephone number:

Please tick appropriate box:

- My child will be responsible for the self-administration of medication as directed below.
- I agree to designated members of staff administering medicines/providing treatment to my child as directed below or, in the case of an emergency, as staff consider necessary.

Name of Medicine	Dates	Dose	Times to be given	Expiry
	Start:			
	Finish:	Amount received:		

Special Instructions:

Allergies:

I understand that I must deliver the medication personally to the School Office and if there are any changes in medication, timings or dosages I will inform the school immediately. I understand this is a service which the school is not obliged to undertake and accept that on occasion, the medication may not be able to be administered.

Signed: (Parent/Carer) Date:

School Staff Administration

Date received: Staff initials:

- Inform Class Teacher.
- Copy attached to the medication and put in the office medical box.
- Copy in child's personal file.

Copy in green 'Administering Medication File' in the Office medical cupboard.

----- **MEDICATION RETURNED** -----

Date medication returned: Parent signature:
.....

PARENTAL CONSENT FORM
LONG TERM ADMINISTRATION OF MEDICINE/TREATMENT

The school will not give your child medication unless you complete and sign this form. We strongly recommend all parents/carers administer medication to their child themselves.

Child's name:..... Class D.O.B
.....

Name of person with Parental Responsibility:
.....

Home / Mobile telephone numbers: Work telephone number:
.....

Please tick appropriate box:

- My child will be responsible for the self-administration of medication as directed below.
- I agree to designated members of staff administering medicines/providing treatment to my child as directed below or, in the case of an emergency, as staff consider necessary.

Name of Medicine	Dates	Dose	Times to be given	Expiry
	Start: Finish:	Amount received:		

Special Instructions:
.....
.....

Allergies:
.....
.....

I understand that I must deliver the medication personally to the School Office and if there are any changes in medication, timings or dosages I will inform the school immediately. I understand this is a service which the school is not obliged to undertake and accept that on occasion, the medication may not be able to be administered.

Signed: (Parent/Carer) Date:

School Staff Administration

Date received: Staff initials:

- Inform Class Teacher.
- Copy attached to the medication and put in the office medical box.
- Copy in child's personal file.
- Copy in green 'Administering Medication File' in the Office medical cupboard.

----- **MEDICATION RETURNED** -----

Date medication returned: Parent signature:
.....

Appendix 3:

DfE Template C: Record of medicine administered to an individual child

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date

Time given

Dose given


Name of member of
staff


Staff initials

Appendix 5:

First Aid ‘Pink Slips’

Pink original copy shared with Parents/Carers and carbon copy kept for school records.

Date:		Time:		Child's name:				Class:				Location of incident:					
												Playground	Classroom	Field	Other		
Details of incident and treatment:																	
Bump/Bruise (Visible)	Bump/Bruise (Not Visible)	Vomiting/Nausea	Headache	High temperature	Neck/Head injury	Rash	Cut/Graze	Asthma	Teeth checked	Other	Ice pack applied	Parent contacted	Unable to contact parent	Child was well enough to stay following First Aid	Child was collected from School	SMART Log Accident Form	Name of parent / carer contacted if applicable:
																	Mobile or Home contacted (circle)
																	First aider signature:
																	Class teacher signature:
 Jewell Academy <small>an Aspirations Academy</small>		INCIDENT/ILLNESS REPORT SLIP Should your child suffer any drowsiness, vomiting, impaired vision or excessive pain after returning home please consult your doctor or local hospital.															

Date:		Time:		Child's name:				Class:				Location of incident:					
												Playground	Classroom	Field	Other		
Details of incident and treatment:																	
Bump/Bruise (Visible)	Bump/Bruise (Not Visible)	Vomiting/Nausea	Headache	High temperature	Neck/Head injury	Rash	Cut/Graze	Asthma	Teeth checked	Other	Ice pack applied	Parent contacted	Unable to contact parent	Child was well enough to stay following First Aid	Child was collected from School	SMART Log Accident Form	Name of parent / carer contacted if applicable:
																	Mobile or Home contacted (circle)
																	First aider signature:
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 Jewell Academy <small>an Aspirations Academy</small>		INCIDENT/ILLNESS REPORT SLIP Should your child suffer any drowsiness, vomiting, impaired vision or excessive pain after returning home please consult your doctor or local hospital.															