



BORDESLEY MULTI ACADEMY TRUST

T3-19 First Aid Inc. Management of Medicines Policy

Tier 3 – Model School Statutory Policy

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Prepared by
Authorised by

Shaw Goodwin
CEO

Approved by

Operations and Compliance Standing
Committee

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Author

S Goodwin

S Goodwin

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1. Bordesley Multi Academy Trust Mission Statement

We believe that success is achieved by working in partnership with parents, carers and the wider community. We are committed to working with our partners to ensure the very best outcomes for all our learners, from 3 to 19.

The significant guiding principles of the MAT are based around autonomy, trust, respect, equity and outstanding relationships. We believe that positive and constructive relationships are at the heart of every successful school. This allows the entire community to be valued and challenged to be their best, raising aspirations for all.

2. Statement of intent

Birchensale Middle School is committed to providing emergency first aid provision in order to deal with accidents and incidents affecting staff, pupils and visitors. The arrangements within this policy are based on the results of a suitable and sufficient risk assessment carried out by the school in regard to all staff, pupils and visitors.

The school will take every reasonable precaution to ensure the safety and wellbeing of all staff, pupils and visitors. Details of such precautions are noted in the following policies:

- Health and Safety Policy
- Behavioural Policy
- Child Protection and Safeguarding Policy
- Supporting Pupils with Medical Conditions Policy

The school's administrative team has overall responsibility for ensuring that the school has adequate and appropriate first aid equipment, facilities and personnel, and for ensuring that the correct first aid procedures are followed.

3. Legal framework

3.1 This policy has due regard to legislation and statutory guidance, including, but not limited to, the following:

- Health and Safety at Work etc. Act 1974
- The Health and Safety (First Aid) Regulations 1981
- The Management of Health and Safety at Work Regulations 1999
- DfE (2015) 'Supporting pupils at school with medical conditions'
- DfE (2000) 'Guidance on First Aid for Schools'
- DfE (2018) 'Automated external defibrillators (AEDs)'

4. Aims

- 4.1 All staff will read and be aware of this policy, know who to contact in the event of any illness, accident or injury, and ensure that this policy is followed.
- 4.2 Staff will always use their best endeavours to secure the welfare of pupils.
- 4.3 Anyone on the school premises is expected to take reasonable care for their own and other's safety.
- 4.4 The aims of this policy are to:
 - Ensure that the school has adequate, safe and effective first aid provision for every pupil, member of staff and visitor to be well looked after in the event of any illness, accident or injury, no matter how major or minor.
 - Ensure that staff and pupils are aware of the procedures in the event of any illness, accident or injury.
 - Ensure that medicines are only administered at the school when express permission has been granted for this.
 - Ensure that all medicines are appropriately stored.
 - Promote effective infection control.
- 4.5 Nothing in this policy will affect the ability of any person to contact the emergency services in the event of a medical emergency. For the avoidance of doubt, staff should dial 999 in the event of a medical emergency before implementing the terms of this policy and make clear arrangements for liaison with ambulance services on the school site.
- 4.6 To achieve the aims of this policy, the school will have suitably stocked first aid boxes in line with the assessment of needs. Where there is no special risk identified, a minimum provision of first aid items will be as follows:
 - A leaflet giving general advice on first aid
 - 20 individually wrapped sterile adhesive dressings, of assorted sizes
 - 2 sterile eye pads
 - 4 individually wrapped triangular bandages, preferably sterile
 - 6 safety pins
 - 6 medium-sized (approximately 12cm x 12cm) individually wrapped sterile unmedicated wound dressings
 - 2 large-sized (approximately 18cm x 18cm) individually wrapped sterile unmedicated wound dressings
 - 1 pair of disposable gloves
 - Equivalent or additional items are acceptable
 - All first aid containers will be identified by a white cross on a green background
- 4.7 The lead first aider is responsible for examining the contents of first aid boxes, including any mobile first aid boxes for offsite use – these will be frequently checked and restocked as soon as possible after use. Items will be safely discarded after the expiry date has passed.
- 4.8 First aid boxes are in the following areas:
 - The school office
 - The medical room

7. Emergency procedures

- 7.1 If an accident, illness or injury occurs, the member of staff in charge will assess the situation and decide on the appropriate course of action, which may involve calling for an ambulance immediately or calling for a first aider.
- 7.2 If called, a first aider will assess the situation and take charge of first aider administration.
- 7.3 If the first aider does not consider that they can adequately deal with the presenting condition by the administration of first aid, then they will arrange for the injured person to access appropriate medical treatment without delay.
- 7.4 Where an initial assessment by the first aider indicates a moderate to serious injury has been sustained, one or more of the following actions will be taken:
 - Administer emergency help and first aid to all injured persons. The purpose of this is to keep the victim(s) alive and, if possible, comfortable, before professional medical help can be called. In some situations, immediate action can prevent the accident from becoming increasingly serious, or from involving more victims.
 - Call an ambulance or a doctor, if this is appropriate – after receiving a parent's clear instruction, take the victim(s) to a doctor or to a hospital. Moving the victim(s) to medical help is only advisable if the person doing the moving has sufficient knowledge and skill to move the victim(s) without making the injury worse.
 - Ensure that no further injury can result from the accident, either by making the scene of the accident safe, or (if they are fit to be moved) by removing injured persons from the scene.
 - See to any pupils who may have witnessed the accident or its aftermath and who may be worried, or traumatised, despite not being directly involved. They will need to be escorted from the scene of the accident and comforted. Younger or more vulnerable pupils may need parental support to be called immediately.
- 7.5 Once the above action has been taken, the incident will be reported promptly to:
 - The headteacher.
 - The victim(s)'s parents.

8. Reporting to parents

- 8.1 In the event of incident or injury to a pupil, at least one of the pupil's parents will be informed as soon as practicable.
- 8.2 Parents will be informed in writing of any injury to the head, whether minor or major, and be given guidance on the action to take if symptoms develop.
- 8.3 In the event of a serious injury or an incident requiring emergency medical treatment, the admin team will telephone the pupil's parents as soon as possible.
- 8.4 A list of emergency contacts will be kept at the school office.

9. Offsite visits and events

- 9.1 Before undertaking any offsite visits or events, the teacher organising the trip or event will assess the level of first aid provision required by undertaking a suitable and sufficient risk assessment of the visit or event and the persons involved.
- 9.2 A suitably stocked first aid kit must be taken on any offsite visits or events.
- 9.3 Where necessary pupil medication should be taken on any offsite visits or events.

10. Management of Medicines

- 10.1 It is at the Headteacher's discretion if medication is to be administered in school, and by whom. All medicine will normally be administered during breaks and lunchtimes. If, for medical reasons, medicine has to be taken during the day, arrangements will be made for the medicine to be administered at other prescribed times. Pupils will be told where their medication is kept and who will administer it.
- 10.2 Any member of staff, giving medicine to a pupil, will check on each occasion;
- 10.3 At the start of each school year, parents/carers should give the following information about their child's long term medical needs. THE INFORMATION MUST BE UPDATED AS AND WHEN REQUIRED AND AT LEAST ANNUALLY.
 - Details of pupil's medical needs.
 - Medication including any side effects.
 - Allergies.
 - Name of GP/Consultants.
 - Special requirements e.g. dietary needs, pre-activity precautions.
 - What to do and who to contact in an emergency.
 - Cultural and religious views regarding medical care.
- 10.4 It is the parents/carers responsibility to:
 - Complete a 'Parental agreement for school to administer medicine' form

- Provide any medication, in date, in a container clearly labelled with the following:
 - The child's name
 - Name of medicine
 - Dose and frequency of medication
 - Any special storage arrangements
 - Collect and dispose of any medications held in school at the end of each term and ensure that medicines have NOT passed the expiry date.
- 10.5 Prescribed medicine should only be brought to school when it is essential to administer it during the school day and the headteacher has agreed for it to be administered in school. In the vast majority of cases, doses of medicine can be arranged around the school day thus avoiding the need for medicine in school. Antibiotics for example are usually taken three times a day, so can be given with breakfast, on getting home from school and then at bedtime. Occasionally a GP may prescribe that a medicine has to be taken during the school day. Parents may call into the school and administer medicine to their child, or they may request that a family member or friend comes to school to administer the medicine if it is to be administered four times a day. Only medicines to be taken four times a day, and which are for a long-term or re-occurring illness will be administered by school staff.
- 10.6 Only under exceptional circumstances, where it is deemed that their administration is required to allow the pupil to remain in school, the school will administer non-prescription medicines. The school will not administer alternative treatments i.e. homeopathic or herbal potions, pills or tinctures or nutrition supplements unless prescribed or recommended by a Doctor and detailed on an IHP or EHC as part of a wider treatment protocol. As recommended by the Government in 'Supporting Pupils at School with Medical Conditions December 2015' the school will also not administer aspirin unless prescribed. The storage and administration for non-prescription medication will be treated as prescription medicines.
- 10.7 Where the school has agreed it will administer non-prescription travel sickness medication and antihistamine (Piriton) for mild allergic reactions. All other non-prescription medication will not be administered at school and pupils should not bring them to school for self-administration. The majority of medication lasts 4-6 hours, therefore non-prescription medication can be administered at home prior to the start of the school day and it will last the duration of the school day. A parent or guardian may attend school to administer additional doses if necessary.
- 10.8 Controlled Drugs
- The school does not deem a pupil prescribed a controlled drug (as defined by the Misuse of Drugs Act 1971) as competent to carry the medication themselves. Controlled drugs will be stored securely in a non-portable container and only named staff will have access. Controlled drugs for emergency use must also be easily accessible. The administration of a controlled drug will be witnessed by a second member of staff and records kept. In addition to the records required for the administration of any

medication, a record will be kept of any doses used and the amount of controlled drug held in school.

10.9 Pupils with Long-term or Complex Medical Needs

- Parents or carers should provide the head teacher with sufficient information about their child's medical condition and treatment, or special care needed at school. Arrangements can then be made, between the parents, head teacher, school nurse, First Aiders and other relevant health professionals to ensure that the pupil's medical needs are managed well during their time in school. For pupils with significant needs, arrangements will be documented in an Individual Healthcare Plan (IHP) or Educational Health and Care plan (EHC). These plans will be reviewed by the school annually or following a significant change in a pupil's medical condition.
- Impaired mobility
- Providing the approval of the GP or consultant has been given there is no reason why children wearing plaster casts or using crutches should not attend school. Safeguards and restrictions will be necessary on PE, practical work or playtimes to protect the child or others. A risk assessment will need to be completed before the child returns to school. This will usually be completed within 24 hours of notification of the impaired mobility.

10.10 Pupils taking their own medication

- For certain long-term medical conditions, it is important for children to learn how to self-administer their medication, but this will always be supervised by a member of staff. Appropriate arrangements for medication should be agreed and documented in the pupil's Individual health care plan and parents should complete the relevant section of 'Parental agreement for setting to administer medicine' form.

10.11 Storage of medication

- Medicines will always be stored securely and appropriately in accordance with individual product instructions, save where individual pupils have been given responsibility for keeping such equipment with them.
- All medicines will be stored in the original contained in which they were dispensed, together with the prescriber's instructions for administration, and properly labelled, showing the name of the patient, the date of prescription and the date of expiry of the medicine.
- All medicines will be returned to the parent for safe disposal when they are no longer required or have expired.
- An emergency supply of medication will be available for pupils with medical conditions that require regular medication or potentially lifesaving equipment, e.g. an EpiPen.

10.12 Medicines on Educational Visits

- Staff will administer prescription medicines to pupils with long-term conditions when required during educational visits. Parents should ensure they complete a consent form and supply a sufficient supply of medication in its pharmacist's container. Non-prescription medicines (apart from travel sickness medication and antihistamine for a mild allergic reaction) cannot be administered by staff and pupils must not carry them for self-administration.
- Pupils with long-term medical needs shall be included in educational visits as far as this is reasonably practicable. School staff will discuss any issues with parents and/or health professionals in suitable time so that extra measures (if appropriate) can be put in place for the visit.
- All staff will be briefed about any emergency procedures needed with reference to pupils where needs are known and copies of care plans will be taken by the responsible person.

10.13 Record Keeping

- For legal reasons records of all medicines administered are kept at the school until the pupil reaches the age of 24. This includes medicines administered by staff during all educational visits. A parent or guardian will be informed if their child has been unwell during the school day. For record sheets see 'record of medicine administered to an individual child' and 'record of medicine administered to all children'.
- If for whatever reason, there is a mistake made in the administration of medication and the pupil is:
 - Given the wrong medication
 - Given the wrong dose
 - Given medication at the wrong time (insufficient intervals between doses)
 - Given medication that is out of date
 - Or the wrong pupil is given medication
- Incidents must be reported to the Schools Senior Management Team who will immediately inform the pupil's parent/guardian. Details of the incident will be recorded locally as part of the school's local arrangements. Local records must include details of what happened, the date, who is responsible and any effect the mistake has caused. Senior Management will investigate the incident and change procedures to prevent reoccurrence if necessary. NB: Incidents that arise from medical conditions that are being well managed by the school do not need to be reported or recorded locally.

11. Illnesses

- 11.1 When a pupil becomes ill during the school day, the parents will be contacted and asked to pick their child up as soon as possible.
- 11.2 A quiet area will be set aside for withdrawal and for pupils to rest while they wait for their parents to pick them up. Pupils will be monitored during this time.

12. Allergens

- 12.1 Where a pupil has an allergy, this will be addressed via the Health Care Plans on the noticeboard in the staffroom.

13. Consent

- 13.1 Parents will be asked to complete and sign a medical consent form when their child is admitted to the school, which includes emergency numbers, alongside details of allergies and chronic conditions – these forms will be updated at the start of each school year.
- 13.2 Staff do not act ‘in loco parentis’ in making medical decisions as this has no basis in law – staff will always aim to act and respond to accidents and illnesses based on what is reasonable under the circumstances and will always act in good faith while having the best interests of the pupil in mind – guidelines will be issued to staff in this regard.