

**Featherstone Primary School**  
**Medical Policy**

**Governing Board approval date:** February 2024

**Monitoring, evaluation and review:** Yearly



Aspire, Believe, Succeed

**POLICY STATEMENT**

**Featherstone Primary School:**

- Welcomes pupils with any medical need or condition and recognises their need.
- Expects and encourages Parents/Carers to give appropriate information to the school regarding their child's medical need/s or condition.
- Will encourage and help children who have any medical needs or conditions to participate fully in all aspects of school life.
- Will manage day to day first aid with skill and proficiency.

This policy will cover how Featherstone Primary School approaches all elements of medical needs and conditions, including;

**Section 1 – First Aid**

**Section 2 – Allergies**

**Section 3 – Asthma**

**Section 4 - Supporting Pupils with Medical Conditions including administering medication**

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

The Health and Safety (First Aid) Regulations 1981 and approved code of practice and guidance  
Health and Safety at Work etc. Act 1974 and subsequent regulations and guidance.

All staff should read and be aware of this policy, know who to contact when needed and ensure this policy is followed.

All staff will use their best endeavours, at all times, to secure the welfare of the pupils.

**Section 1 - First Aid**

Anyone on the school premises is expected to take reasonable care for their own and others' safety.

The aim of this section is to:

- Ensure that the school has adequate, safe and effective first aid provision in order 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 all 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.

Nothing in this policy should 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 for the emergency services 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.

To achieve the aims of this policy, the school will have suitably stocked first aid boxes. Where there is no special risk identified, a minimum provision of first aid items would be:

- Individually wrapped sterile adhesive dressings (assorted sizes);
- Sterile eye pads;
- Individually wrapped triangular bandages (preferably sterile)
- Sterile gauze wound dressings of various sizes.
- Eye Wash
- One pair of disposable gloves.
- Equivalent or additional items are acceptable.
- Microporous Tape.
- Sterile eye bandage.
- Assorted plasters.

The lead first aider is responsible for examining the contents of Class First Aid boxes at the end of every half term but classroom staff must replenish these as soon as possible after use. Items should be discarded safely after the expiry date has passed.

First aid boxes are located in the following areas: Classrooms / Main office / Staffroom/Art room/Hall.

### **First aiders**

The main duties of first aiders are to give immediate first aid to pupils, staff or visitors and to ensure that an ambulance or other professional medical help is called, when necessary.

All school staff will receive first aid training. First aiders are to ensure that their first aid certificates are kept up-to-date through liaison with the **First Aid Leader ( M.Blair)**

The current first aid appointed person(s) are: Mrs M Blair and Mrs T Williamson

### **Emergency procedure in the event of an accident, illness or injury**

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.

If called, a first aider will assess the situation and take charge of first aid administration.

In the event that the first aider does not consider that he/she can adequately deal with the presenting condition by the administration of first aid, then he/she should arrange for the injured person to access appropriate medical treatment without delay.

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 accident victim(s) alive and, if possible, comfortable, before professional medical help can be called. Also, in some situations, action now can prevent the accident from getting more 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 accident 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 make the move without making the injury worse.
- Make sure 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 children who may have witnessed the accident or its aftermath and who may be worried, or traumatised, in spite of not being directly involved. They will need to be taken away from the accident scene and comforted. Younger or more vulnerable children may need parental support to be called immediately.
- When the above action has been taken, the incident must be reported to:
  - The Headteacher / or in their absence a member of the Senior Leadership Team
  - The parents/carer of the victim(s)

### **Reporting to parents**

In the event of incident or injury to a pupil, where first aid has been administered, at least one of the pupil's parents must be informed as soon as practicable. This is done via an Evolve email.

Parents must be informed via an Evolve e-mail and a telephone call of any injury to the head (neck and above), minor or major, and be given guidance on action to take if symptoms develop.

In the event of serious injury or an incident requiring emergency medical treatment, the pupil's parents must be informed as soon as possible.

A list of emergency contact details is kept at reception/admin office.

### **Visits and events off-site**

Before undertaking any off-site 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 event and persons involved. This will be reviewed by the school Educational Visits Coordinator before the event is organised.

Please see the separate Educational Visits and School Trips Policy for more information about the school's educational visit requirements.

### **Illness**

When a child becomes ill during the day, the parents/carer will be contacted and asked to pick their child up from school as soon as possible.

A quiet area will be set aside for withdrawal and for pupils to rest while they wait for their parents/carer to arrive to pick them up. Pupils will be monitored during this time.

### **Consent**

Parents will be asked to complete and sign a medical consent form when their child is admitted to the school, which includes emergency numbers, details of allergies and chronic conditions, and consent for the administration of emergency first aid – these forms will be updated periodically.

Staff do not act 'in loco parentis' in making medical decision as this has no basis in law – staff always aim to act and respond to accidents and illness based on what is reasonable under the circumstances and will always act in good faith while having the best interests of the child in mind – guidelines are issued to staff in this regard.

## **Section 2 – Allergies**

An allergy is a reaction of the body's immune system to substances that are usually harmless. The reaction can cause minor symptoms such as itching, sneezing or rashes but sometimes causes a much more serious reaction called anaphylaxis. Anaphylaxis is a serious, life-threatening allergic reaction. It is at the extreme end of the allergic spectrum. The whole body is affected often within minutes of exposure to the allergen, but sometimes it can be hours later. Causes can include foods, insect stings, and drugs. Most healthcare professionals consider an allergic reaction to be anaphylaxis when it involves difficulty breathing or affects the heart rhythm or blood pressure. Anaphylaxis symptoms are often referred to as the ABC symptoms (Airway, Breathing, Circulation). It is possible to be allergic to anything which contains a protein, however most people will react to a fairly small group of potent allergens. Common UK Allergens include (but are not limited to):- Peanuts, Tree Nuts, Sesame, Milk, Egg, Fish, Latex, Insect venom, Pollen and Animal Dander.

This section sets out how Featherstone Primary School will support pupils with allergies, to ensure they are safe and are not disadvantaged in any way whilst taking part in school life.

## **Responsibilities**

### Parent/Carer Responsibilities

- On entry to the school, it is the parent's responsibility to inform the school office of any allergies. This information should include all previous serious allergic reactions, history of anaphylaxis and details of all prescribed medication.
- Parents are to supply a copy of their child's Allergy Action Plan (BSACI plans preferred) to school. If they do not currently have an Allergy Action Plan this should be developed as soon as possible in collaboration with a healthcare professional e.g. School nurse/GP/allergy specialist.
- Parents are responsible for ensuring any required medication is supplied, in date and replaced as necessary.
- Parents are requested to keep the school up to date with any changes in allergy management. The Allergy Action Plan will be kept updated accordingly.

### Staff Responsibilities

- All staff will work to ensure that Featherstone Primary School is a **nut free** school
- All staff will complete anaphylaxis training. Training is provided for all staff on a yearly basis and on an ad-hoc basis for any new members of staff.
- Staff must be aware of the pupils our setting who have known allergies as an allergic reaction could occur at any time and not just at mealtimes.
- Staff leading school trips will ensure they carry all relevant emergency supplies. Pupils with medical conditions will be placed in a group with the trip leader/lead teacher. This adult will then carry all emergency medication with them. All accompanying staff will be informed about pupils with medical needs/allergies and which adult has the emergency medication.
- School's Medical leader will ensure that the up-to-date Allergy Action Plan is kept with the pupil's medication.
- It is the parent's responsibility to ensure all medication is in date however the School's Medical Lead will check medication kept at school on a termly basis and send a reminder to parents if medication is approaching expiry.
- School's Medical Lead keeps a register of pupils who have been prescribed an adrenaline auto-injector (AAI) and a record of use of any AAI(s) and emergency treatment given.
- Any food-related activities must be supervised with due caution. School staff will ensure that any activities involving food preparation will be risk managed to ensure common allergens eg nuts, are not being used. School staff will ensure any food products used are nut free and do not contain traces of nuts.
- On birthdays/special occasions, children who bring in food items to share with their friends will not be handed out.

## **Emergency Treatment and Management of Anaphylaxis**

What staff look for: Symptoms usually come on quickly, within minutes of exposure to the allergen. Mild to moderate allergic reaction symptoms may include:

- a red raised rash (known as hives or urticaria) anywhere on the body

- a tingling or itchy feeling in the mouth
- swelling of lips, face or eyes
- stomach pain or vomiting.

More serious symptoms are often referred to as the ABC symptoms and can include:

- AIRWAY - swelling in the throat, tongue or upper airways (tightening of the throat, hoarse voice, difficulty swallowing).
- BREATHING - sudden onset wheezing, breathing difficulty, noisy breathing.
- CIRCULATION - dizziness, feeling faint, sudden sleepiness, tiredness, confusion, pale clammy skin, loss of consciousness.

Action:

- staff will Keep the child where they are, call for help and will not leave them unattended.
- LIE CHILD FLAT WITH LEGS RAISED – they can be propped up if struggling to breathe but this should be for as short a time as possible.
- USE ADRENALINE AUTO-INJECTOR WITHOUT DELAY and note the time given. AAI's should be given into the muscle in the outer thigh. Specific instructions vary by brand – always follow the instructions on the device.
- CALL 999 and state ANAPHYLAXIS (ana-fil-axis).
- If no improvement after 5 minutes, administer second AAI.
- If no signs of life commence CPR.
- Call parent/carer as soon as possible.

All pupils must go to hospital for observation after anaphylaxis even if they appear to have recovered as a reaction can reoccur after treatment.

### **Supply, storage and care of medication**

It is the responsibility of the child's parents to ensure that the anaphylaxis kit is up-to-date and clearly labelled, however the School First Aider, Mrs Blair, will check medication kept at school on a half termly basis and send a reminder to parents if medication is approaching expiry. Parents can subscribe to expiry alerts for the relevant Adrenaline Auto Injector (AAI's) their child is prescribed, to make sure they can get replacement devices in good time.

Adrenaline Auto Injector (AAI's) will be stored at room temperature, protected from direct sunlight and temperature extremes. Each child will have their prescribed AAI (s) in their classroom, this will move around the school with them, ie for lunch, assemblies and PE. A second prescribed one will be stored in the school office. Additionally, school has an emergency AAI.

Adrenaline Auto Injector (AAIs) are single use only and must be disposed of as sharps. Used AAIs will be given to ambulance paramedics when they arrive (as per actions above, paramedics will have been called to attend a child with anaphylaxis).

The School First Aider is responsible for checking the spare medication is in date on a monthly basis and to replace as needed. Written parental permission for use of the spare AAIs is included in the pupil's allergy action plan. If anaphylaxis is suspected in an undiagnosed individual call the emergency services and state you suspect ANAPHYLAXIS. Follow advice from them as to whether administration of the spare AAI is appropriate.

The named staff member responsible for co-ordinating staff anaphylaxis training and the upkeep of the school's anaphylaxis policy is Mrs Blair. All staff will complete training with Birmingham School Nursing Team at the start of every new academic year. Training is also available on an ad-hoc basis for any new members of staff via The National College, also organised by Mrs Blair.

School is committed to ensuring that all children with medical conditions, including allergies, in terms of both physical and mental health, are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

All food businesses (including school caterers) must follow the Food Information Regulations 2014 which states that allergen information relating to the 'Top 14' allergens must be available for all food products. The school menu is available for parents to view on the school website at <https://www.featherstoneprimaryschool.co.uk/> The School First Aider will inform the Catering Manager of pupils with food allergies. The school adheres to the following Department of Health guidance recommendations:

- Bottles, other drinks and lunch boxes provided by parents for pupils with food allergies should be clearly labelled with the name of the child for whom they are intended.
- The pupil should be taught to also check with catering staff, before purchasing food or selecting their lunch choice.
- Where food is provided by the school, staff should be educated about how to read labels for food allergens and instructed about measures to prevent cross contamination during the handling, preparation and serving of food. Examples include: preparing food for children with food allergies first; careful cleaning (using warm soapy water) of food preparation areas and utensils.
- Food should not be given to primary school age food-allergic children without parental engagement and permission (this included handing our birthday treats from peers)
- Use of food in crafts, cooking classes, science experiments and special events (e.g. assemblies, cultural events) needs to be considered and may need to be restricted/risk assessed depending on the allergies of particular children and their age.
- School trips Staff leading school trips will ensure they carry all relevant emergency supplies. Trip leaders will check that all pupils with medical conditions, including allergies, are grouped with the trip leader, who will carry any relevant medication. Pupils unable to produce their required medication will not be able to attend the excursion. All the activities on the school trip will be risk assessed to see if they pose a threat to allergic pupils and alternative activities planned to ensure inclusion.
- Sporting Excursions Allergic children should have every opportunity to attend sports trips to other schools. The school will ensure that the P.E. teacher/s or accompanying adults are fully

aware of the situation. A member of staff trained in administering adrenaline will accompany the team. This person will carry the medication.

### **Section 3 – Asthma**

#### **On admission to school**

All parents/carers will be asked to complete an admissions form giving full details of their child's asthma, regular medication, emergency contact numbers, family G.P and any other relevant information.

Every child with an asthma diagnosis must have a reliever inhaler (blue) available in school and a spacer device.

#### **Storage and disposal of medication**

All inhaler devices need to be clearly labelled with the child's full name. Inhalers will be kept in an inhaler bag in the classroom under the supervision of the class teacher.

If pupils leave the premises for any activity they must have their reliever (blue) inhaler with them. These will be with the lead teacher as all pupils with medical needs will be grouped with the lead teacher.

#### **Keeping inhalers in date and full of medication.**

Parents/Carers need to keep a check on all reliever inhalers/spacer devices regularly, confirming that the inhalers are in date and are full of medication.

#### **Emergency inhaler in school**

School has an emergency inhaler on site should there be a need. The inhaler is kept clearly labelled in the medical cupboard in the main office. Parents will need to consent to the use of this inhaler and consent is recorded on the Medical Register.

#### **Informing parents**

Most children will not need to use their reliever (blue) inhaler on a daily basis; therefore, if the child has experienced symptoms and has needed to use their inhaler, or had to use it more often than usual, parents/carers will be informed by an alert email from Evolve. The class teacher will also verbally inform the adult who collects the child at the end of the day.

Parents/Carers will always be informed if their child is having a severe asthma attack, following contact with the medical services.

### **Exercise and activity**

Pupils with asthma are encouraged to participate in P.E lessons.

Some pupils with asthma may need to use their reliever inhaler before or after exercising. Reliever inhalers must be readily available at all times. Inhalers will be taken to P.E lessons/school trips etc.

### **Asthma attack**

It is important that all staff know how to manage a child experiencing an asthma attack. In the event of an asthma attack school staff should follow the procedure outlined in the "Asthma Attack Flowchart". This flowchart should be visibly displayed in the staff room/first aid areas/P.E hall.

### **Training**

All staff will receive asthma awareness training and receive annual updates so that they recognise and know how to manage a child having an asthma attack, when and how to call an ambulance and what to do whilst waiting for the ambulance to arrive.

## **Section 4 – Supporting Pupils with Medical Conditions including administering medication**

### **Definitions of Medical Conditions**

Pupils' medical needs may be broadly summarised as being of two types:

- Short-term - affecting their participation in Featherstone Primary School activities because they are on a course of medication
- Long-term - potentially limiting their access to education and requiring extra care and support (deemed special medical needs)

### **Children with Special Medical Needs**

Should we be asked to admit a child to school with medical needs we will, in partnership with the parents/carers, School Nurses and our Medical Advisors, discuss individual needs.

Where appropriate an individual alert card/care plans will be developed in partnership with the parent/carers, School Nurse and/or Medical Advisors.

Any resulting training needs will be managed by the school.

### **On Admission to School**

All parents/carers will be asked to complete an admissions form giving full details of child's medical conditions, regular medication, emergency medication, emergency contact numbers, name of family

doctor, any allergies, special dietary requirements etc. Parents/carers should keep the school informed of any updates.

### **The Role of Staff at Featherstone Primary School**

Some children with medical conditions may be disabled. Where this is the case, governing bodies must comply with their duties under the Equality Act 2010. Some may also have Special Educational Needs and may have a statement, or Education, Health and Care plan (EHCP) which brings together health and social care needs, as well as their special educational provision. For children with SEN, this guidance should be read in conjunction with the SEN Code of Practice and Featherstone Primary School Primary SEN Information Report (See SEN Local offer [www.featherstoneprimaryschool.co.uk](http://www.featherstoneprimaryschool.co.uk)).

If a child is deemed to have a long-term medical condition, the school will ensure that arrangements are in place to support them. In doing so, we will ensure that such children can access and enjoy the same opportunities at school as any other child. The school, health professionals, Parents/Carers and other support services will work together to ensure that children with medical conditions receive a full education, unless this would not be in their best interests because of their health needs.

In some cases this will require flexibility and involve, for example, programmes of study that rely on part time attendance at school in combination with alternative provision arranged by the Local Authority and health professionals. Consideration will also be given to how children will be reintegrated back into school after long periods of absence. Staff must not give prescription medicines or undertake health care procedures without appropriate training (updated to reflect any Individual Health Care Plans).

At Featherstone Primary School, we recognise that a first-aid certificate does not constitute appropriate training in supporting children with medical conditions. Healthcare professionals, including the school nurse, will provide training and subsequent confirmation of the proficiency of staff in a medical procedure, or in providing medication.

### **Procedures to be followed when notification is received that a pupil has a medical condition**

We will ensure that the correct procedures will be followed whenever we are notified that a pupil has a medical condition. The procedures will also be in place to cover any transitional arrangements between schools, the process to be followed upon reintegration, or when a pupil's needs change and arrangements for any staff training or support actioned. For children starting at Featherstone Primary School, arrangements will be in place in time for the start of the relevant school term.

In making the arrangements, we will take into account that many of the medical conditions that require support at school will affect quality of life and may be life threatening. We will also acknowledge that some medical conditions will be more obvious than others. We will therefore ensure that the focus is on the needs of each individual child and how their medical condition impacts on their school life.

Featherstone Primary will:

- Ensure that arrangements give Parents/Carers and pupils confidence in Featherstone Primary the ability to provide effective support for medical conditions in school. The

arrangements will show an understanding of how medical conditions impact on the child's ability to learn, as well as increase their confidence and promote self-care

- Ensure that staff are properly trained to provide the support that pupils need
- Ensure that arrangements are clear and unambiguous about the need to actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so
- Make arrangements for the inclusion of pupils in such activities, with any adjustments as required unless evidence from a clinician such as a GP, states that this is not possible
- Make sure that no child with a medical condition is denied admission or prevented from attending school because arrangements for their medical condition have not been made. However, in line with our Safeguarding duties, we will ensure that pupils' health is not put at unnecessary risk from for example, infectious diseases. Therefore there are times when we will not accept a child in school, where it would be detrimental to the health of that child or others.

Featherstone Primary School does not have to wait for a formal diagnosis before providing support to pupils. In cases where a pupil's medical condition is unclear, or where there is a difference of opinion, judgements will be needed about what support to provide and this will be based on the available evidence. This would normally involve some form of medical evidence and consultation with Parents/Carers. Where evidence conflicts, some degree of challenge may be necessary to ensure that the right support can be put in place. This will usually be led by the SENDCo or Headteacher. Following the discussions, an Individual Health Care Plan will be put in place.

Where a child has an Individual Health Care Plan, this should clearly define what constitutes an emergency and explain what to do, including ensuring that all relevant staff are aware of emergency symptoms and procedures.

If a child (regardless of whether they have an Individual Health Care Plan) needs to be taken to hospital, staff should stay with the child until the Parent/Carer arrives, or accompany a child taken to hospital by ambulance.

### **Individual Health Care Plans**

Individual Health Care Plans will be reviewed by the Medical Leader, but it is the responsibility of all members of staff working with the child to ensure that the Plan is followed.

Individual Healthcare Plans will help to ensure that Featherstone Primary effectively supports pupils with medical conditions. They will provide clarity about what needs to be done, when and by whom. They will often be essential, such as in cases where conditions fluctuate or where there is a high risk that emergency intervention will be needed. They are likely to be helpful in the majority of other cases too, especially where medical conditions are long-term and complex. However, not all children will require one.

Individual Health Care Plans and their review, may be initiated, in consultation with the Parent/Carer, by a member of school staff or a healthcare professional involved in providing care to the child. The Individual Health Care Plan must be completed by the Medical Leader with support from Parents/Carers and a relevant healthcare professional, e.g. school, specialist or children's

community nurse, who can best advise on the particular needs of the child. Pupils should also be involved whenever appropriate.

Individual Health Care Plans are kept in the Medical File and are be easily accessible to all who need to refer to them, while preserving confidentiality. Plans will capture the key information and actions that are required to support the child effectively. The level of detail within plans will depend on the complexity of the child's condition and the degree of support needed. This is important because different children with the same health condition may require very different support. Where a child has SEN but does not have a statement or EHCP, their SEN should be mentioned in their Individual Health Care Plan.

Individual Health Care Plans must include:

- The medical condition, its triggers, signs, symptoms and treatments
- The pupil's resulting needs, including medication (dose, side-effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues e.g. crowded/noisy conditions, travel time between lessons
- Specific support for the pupil's educational, social and emotional needs – for example: how absences will be managed; requirements for extra time to complete tests- use of rest periods or additional support in catching up with lessons; and counselling sessions
- The level of support needed, (some children will be able to take responsibility for their own health needs), including in emergencies. If a child is self-managing their medication, this should be clearly stated with appropriate arrangements for monitoring
- Who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the child's medical condition from a healthcare professional; and cover arrangements for when they are unavailable
- Who in the school needs to be aware of the child's condition and the support required
- Arrangements for written permission from Parents/Carers and Health Care Professionals for medication to be administered by a member of staff, or self-administered by the pupil during school hour
- Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the child can participate, e.g. risk assessments
- Where confidentiality issues are raised by the Parents/Carers or child, the designated individuals to be entrusted with information about the child's condition
- What to do in an emergency, including whom to contact, and contingency arrangements. Some children may have an Emergency Health Care Plan prepared by their lead clinician that could be used to inform development of their Individual Health Care Plan

## **The Child's Role in managing their own Medical Needs**

If it is deemed, after discussion with the Parents/Carers, that a child is competent to manage their own health needs and medicines, Featherstone Primary will encourage them to take responsibility for managing their own medicines and procedures. This will be reflected within the child's Individual Health Care Plans.

Wherever possible, children should be allowed to carry their own medicines and relevant devices or should be able to access their medicines for self-medication quickly and easily; these will be stored in the cupboard in the Head's office to ensure that the safeguarding of other children is not compromised.

Featherstone Primary School recognises that children, who can take their medicines themselves or manage procedures, may require an appropriate level of supervision. If a child is not able to self-medicate then relevant staff will help to administer medicines and manage procedures for them.

If a child refuses to take their medicine or carry out a necessary procedure, staff should not force them to do so, but instead follow the procedure agreed in the Individual Health Care Plan. Parents/Carers should be informed, outside of the review, so that alternative options can be considered.

## **Managing Medicines on School Site**

The following are the procedures to be followed for managing medicines: (Prescribed and non-prescribed)

- Medicines should only be administered when it would be detrimental to a child's health or school attendance not to do so
- No pupil should be given prescription or non-prescription medicines without their Parents/Carers **written consent**
- Featherstone will only accept medicines that are in-date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage. The exception to this is insulin, which must still be in date, but will generally be available inside an insulin pen or a pump, rather than in its original container

### **Authorisation:**

The Headteacher (or most senior member of staff in their absence) will need to authorise for the medication to be administered in school.

### **Storage of medicine:**

All medicines will be stored safely in the main office. Children should know where their medicines are at all times and be able to access them immediately

- Medicines and devices such as blood glucose testing meters should be always readily available to children and not locked away; these will be stored in the classroom cupboards where both class teacher and child know how to access them
- Medicines and devices such as emergency asthma inhalers and adrenaline pens should be always readily available to children; these will be stored in the school office /medical cupboard, in labelled boxes where class teacher, TAs and child know how to access them. If a child requires an asthma inhaler, it is crucial that there is an inhaler in school at all times. Individual named inhalers are to be kept in class ready for immediate access
- The school has 2 emergency inhalers that can be used as and when. Parents must sign a consent form and return it in school
- During school trips, the member of staff in charge of first aid will carry all medical devices and medicines required
- Staff administering medicines should do so in accordance with the prescriber's instructions Featherstone Primary will keep a record of all medicines administered to individual children, stating what, how and how much was administered, when and by whom
- Written records are kept of all medicines administered to children. These records offer protection to staff and children and provide evidence that agreed procedures have been followed
- When no longer required, medicines should be returned to the Parent/Carer to arrange for safe disposal
- Sharps boxes should always be used for the disposal of needles and other sharps