



Manchester
Communication
Primary
Academy

Manchester Communication Primary Academy

First Aid Policy

Approval History

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Manchester Communication Primary Academy
Medical Support & First Aid Policy

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Policy statement and principles

This academy understands its responsibility to make itself welcoming, inclusive and supporting to all pupils with medical conditions and provide them the same opportunities as others at the academy.

In addition, the academy is pro-active in exercising its duty to safeguard its children, staff and visitors by providing emergency medical support through access to appropriate first aid materials and qualified staff where required under the health and safety at work act (1974).

We will help to ensure our children can:

- be healthy
 - stay safe
 - enjoy and achieve
 - make a positive contribution
 - achieve economic well-being.
-
- The academy ensures all staff understand their duty of care to children and young people in the event of emergency or non-critical first aid being needed.
 - Staff receive on-going training and are regularly updated on the impact medical conditions can have on pupils. The training agenda is based on a review of current healthcare plans and is supported by the academy's nurse.
 - All staff feel confident in knowing what to do in an emergency.
 - This academy understands that certain medical conditions are serious and can be potentially life threatening, particularly if ill managed or misunderstood.
 - This academy understands the importance of medication being taken as prescribed.
 - All staff understand the common medical conditions that affect children at the academy.

This academy has developed this policy with advice from the school nurse. The Governing body has a statutory duty to make arrangements for pupils with medical needs under s.100 of the Children and Families Act 2014. The policy and supporting documents are based on Department of Education statutory guidance (December 2015) [Supporting pupils at school with medical conditions.](#)

The medical conditions policy is supported by regulatory and condition specific training as required.

This policy will be revised bi-annually by the head teacher and staff with medical roles (safeguarding & admin team) and governors.

This academy ensures that the whole school environment is inclusive and favourable to pupils with medical conditions. This includes the physical environment, as well as social, emotional, sporting and educational activities. See the 'accessibility plan' for details on this.

Roles and responsibilities

Parents and carers – ensure that the academy are made aware of any medical conditions their child has and advise of any changes to existing conditions/new conditions, if they have an Individual Healthcare Plan. Parents and carers must also provide information on their daily medical needs, for trips, residential stays, any changes to their condition and medication with clear instructions, where required. Up to date contact details for next of kin must also be provided.

Pupils – ensure they inform responsible adults on how their condition affects them and how best they can be supported both medically and socially.

The Governing body – ensure that the policy is sufficient to meet the requirements of section 100 Children & Families Act 2014, ensure health and safety measures for staff and pupils, risk assessments are inclusive of pupils with medical conditions, medical policy is kept up to date, report on medical policy success and improvement, provide indemnity to staff who volunteer to administer medication.

The Head teacher – ensure the academy is inclusive and welcoming, that medical policy is in keeping with local and national guidance and frameworks, liaise between interested parties, ensure policy is implemented and kept up to date, ensure training for staff and ensure insurance arrangements are sufficient to keep school staff covered, keep the school nursing service informed and engaged with individual pupils.

Teachers and other school staff – be aware of triggers and symptoms of conditions and how to act in an emergency, know which pupils have a medical condition, allow pupils immediate access to emergency medication, communicate with parents if child unwell, ensure pupils have their medication when out of the classroom, be aware if pupils with medical conditions suffer bullying or need extra social support, understand common medical conditions and impact on pupils, ensure all pupils with medical conditions are not excluded unnecessarily from activities, ensure pupils with medical conditions have adequate medication and sustenance during exercise, be aware medical conditions can affect school work, liaise with parents if child's learning is suffering due to medical condition, use opportunities to raise awareness of medical conditions.

Notify the DDSL if the inhalers are running low.

Office manager – Lead the admin team to: ensure that sufficient detail on medical conditions is gathered on admission to school; Maintain up to date records of contacts for next of kin; Administer medications during the school day as per the prescription/parents' instructions.

DDSL - check that first aid kits are well stocked, every two weeks (additional stock can be found in the office between these times if needed). Monitor inhalers and epipens, notifying parents if they are due to expire.

Admin team - take medications from parents at the window and ensure that the forms are fully completed. Administer medication during the school day, and maintain the records. Countersign the

administration of medication, ensuring that it is witnessed. Administer, with parental consent, ad-hoc medication (such as calpol).

Monitoring of Individual Healthcare Plans

This academy uses Individual Healthcare Plans to record important details about individual children's medical needs, should they have a chronic health condition. The plans will include the following (depending on the individual circumstances):

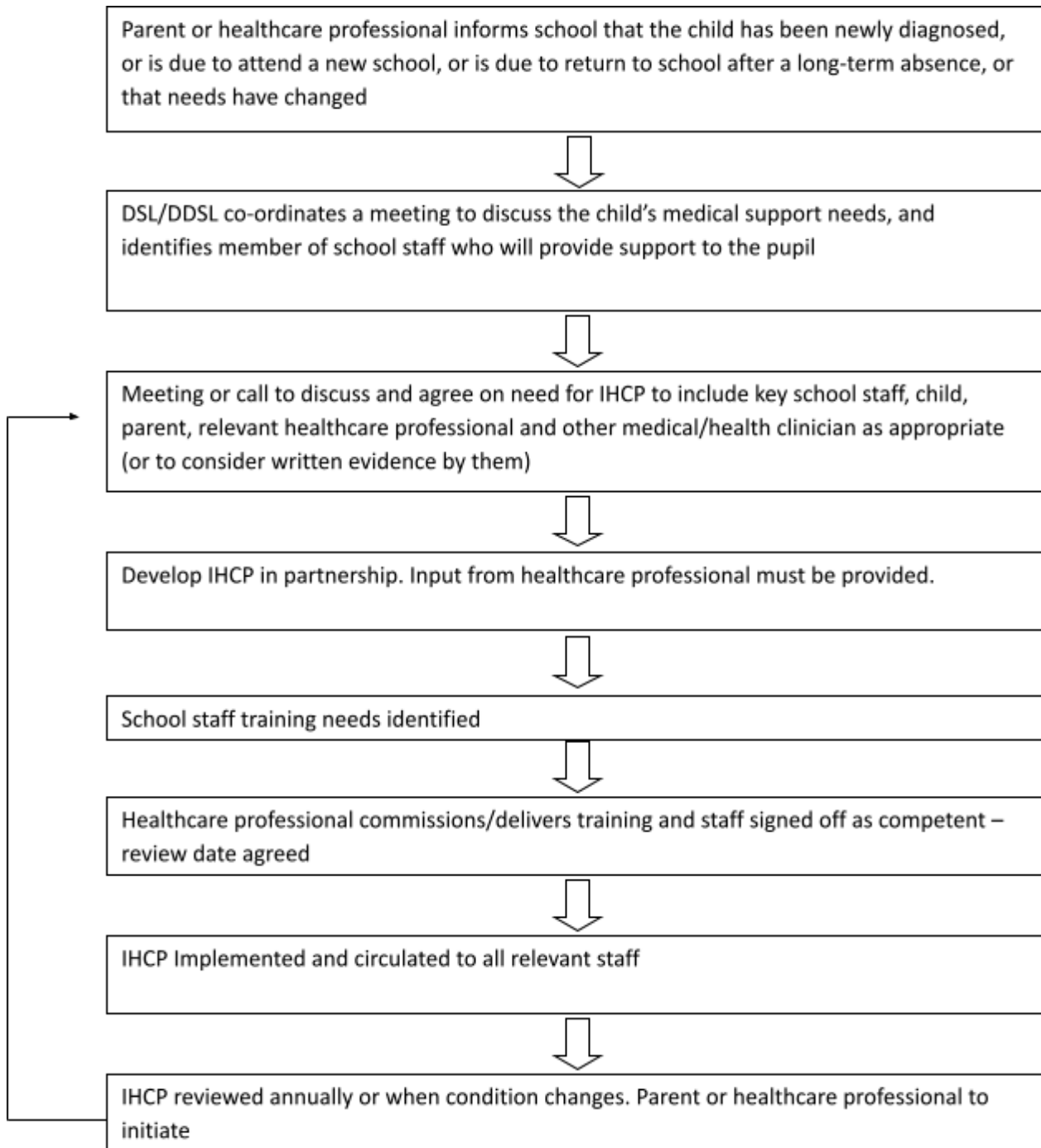
- Details of the medical condition – triggers, signs, symptoms and treatments
- Details of the impact of the condition on the child including the need for medication or other support, facilities or equipment that may be required
- Details of any specific support required to meet the individual's education, social or emotional needs
- Training requirements
- Internal information requirements (who needs to know)
- Parental consents for administration of medicine and sharing information
- Information relevant to off-site visits
- Emergency information

Further documentation can be attached to the Individual Healthcare Plan if required.

- If a pupil has a short-term medical condition that requires medication during school hours, a medication form plus explanation is sent to the pupil's parents to complete.
- The parents, healthcare professional and pupil with a medical condition, are asked to fill out the pupil's Individual Healthcare Plan together. Parents then return these completed forms to the school.
- This academy ensures that a relevant member of staff is also present, if required to help draw up an Individual Healthcare Plan for pupils with complex healthcare or educational needs.

Visually, this is represented in the table on the following page.

Monitoring of individual healthcare plan:



Academy Health Care Register

The academy keeps a full record of medical conditions which the children have on SIMS. This includes allergies and chronic conditions such as asthma.

With the re-approval of this policy, the medical register is re-established with parents being asked to re-submit medical information. Any information which is not re-submitted will be investigated. This provides a bi-annual opportunity to check for updates on conditions.

As new children join the academy, their medical information is gathered and the register updated.

Sharing of information

Where appropriate, the academy will share the details of allergies and serious medical conditions (such as diabetes, epilepsy etc.) through the child's photo with a caption (name and condition) being displayed in staff areas. These pictures are also displayed on the staff-side of the canteen serving hatch.

All staff carry a discreet card with the names of children and their allergies on them.

When a new child joins the academy with a serious allergy or medical condition, this is shared with relevant staff via email by the academy business/admissions manager and if appropriate, with all staff via briefing.

Allergens

The academy's cooks ensure that through working with the admin team, they are aware of the allergies which the children have. Where possible, they will provide food which is exclusive of these allergens. Where this is not possible, parents are advised and alternatives should be explored. Most parents choose to provide their child with a packed-lunch in these cases.

Children with allergies, who have a school meal, should always take their dinner from the cooks at the hatch, even when others have their dinner on the table. Children should also wear lanyards to ensure that staff are aware of the allergies.

If children bring food to share (such as birthday cakes) with their classmates, or staff are using food in a lesson, the same guidance around allergies should be followed. Staff will consult with parents where there is any doubt.

The academy is a nut-free environment as of January 2019. This includes all food on site, not just that which is intended for consumption by children.

Ongoing Communication and Review of Individual Healthcare Plans

The academy's safeguarding team will review individual healthcare plans annually (see appendix 1 for template). These reviews can be completed in a face to face meeting or by telephone where a copy of the plan has been posted.

The academy will co-ordinate with parents to ensure that an interpreter is on-hand if required.

Where a child with an individual healthcare plan has a medical episode relating to their condition, a review of the plan will be automatically conducted within 2 weeks, supported by the academy nurse.

Parents and/or the academy nurse can also ask for the plan to be reviewed if there is a change in the child's condition or new information to share. The academy nurse may receive this through contact with the GP or hospital.

Storage and Access to Individual Healthcare Plans

Electronic versions of the IHPs are stored securely on the academy's shared area.

All medical paperwork is held in secure storage in the filing cabinet in the office, or electronically.

Individual Healthcare Plans are used by this school to:

- Inform the appropriate staff and supply teachers about the individual needs of a pupil with a medical condition in their care.
- Remind pupils with medical conditions to take their medication when they need to and, if appropriate, remind them to keep their emergency medication with them at all times.
- Identify common or important individual triggers for pupils with medical conditions at school that bring on symptoms and can cause emergencies. This school uses this information to help reduce the impact of common triggers.
- Ensure that all medication stored at school is within the expiry date.
- Ensure this school's local emergency care services have a timely and accurate summary of a pupil's current medical management and healthcare in the event of an emergency.
- Remind parents of pupils with medical conditions to ensure that any medication kept at school for their child is within its expiry dates. This includes spare medication.

Administration of medication

- The school understands the importance of taking the medication as prescribed.
- All staff understand that there is no legal or contractual duty for any member of staff to administer medication or supervise a pupil taking medication unless they have been specifically contracted to do so. Where specific training is not required, any member of staff may administer prescribed and non-prescribed medicines to pupils under the age of 16 with parental consent.
- Greater Manchester Academies Trust is responsible for ensuring full insurance and indemnity for staff who administer medicines. Our insurance policy includes liability cover.
- Administration of medication which is defined as a controlled drug (even if the pupil can administer themselves) should be done under the supervision of a member of staff.
- The academy staff will support children in the taking of the following types of medications (if a prescribed medication form (appendix 2) is fully completed):
 - Prescribed tablets (where there is more than 1 tablet to be taken, the medication must be pre-arranged into a dosette box or blister pack.
 - Prescribed liquid medication (a spoon or syringe delivery device must be provided)
 - Prescribed intravenous medication such as insulin where an auto-injector tool is provided along with clean needles and disposal.
 - Prescribed inhalers, with or without spacers.

- Eye drops, either prescribed or recommended (such as antihistamine).
- Cream/ointment which can be self-administered.

Prescribed medication must be accompanied by the dispensing label which clearly states the dosage and child's name. The academy reserves the right to refuse to dispense medication contrary to the guidance on the packaging/leaflet.

The academy may also seek additional guidance from a medical professional before agreeing to administer medications. In this case, it is expected that the parent would make alternative arrangements in the meantime.

The academy cannot routinely dispense medication which is delivered by syringe which is not auto-delivery.

Where a parent/guardian asks the academy to administer non-prescribed medication on their behalf, this can be done if the following criteria are met and a non-prescribed medication form (appendix 2) is completed in full:

- The medication is age appropriate e.g. calpol
- The medication is delivered in-line with the written guidance.
- The instructions on the medication are in English.
- The course of medication is for less than 2 weeks (any more than this and the child should see a doctor).

The academy will deliver the following types of medication where the above criteria are met:

- Calpol
- Paracetamol/ibuprofen
- Antihistamine which is orally administered
- Cough/throat medication

The academy keeps a stock of calpol and children's antihistamine which can be administered as a one-off with parental consent.

The academy cannot administer brown or purple inhalers, nor can we apply topical treatments such as ointments.

Where the administration of medication is routine and will not cause embarrassment (e.g. taking a tablet or liquid medication) it can be administered in the class base or in a space outside of the class. In the case of more intimate medication being delivered (e.g. insulin) this should be administered in a non-public space, such as the meeting room in the academy reception, not the academy office.

In the event that a child refuses their medication, the person attempting to administer it will record this on the medication form and telephone the parent/carer to inform them. The parent may choose to attend school and administer the medication themselves, if they wish.

Storage of medication

Safe storage – emergency medication (Epi-Pens and inhalers)

- a. Emergency medication is readily available to pupils who require it at all times during the school day.
Asthma inhalers are kept in the medical cabinet (Nursery-Y1 in the downstairs cabinet, Y2-Y6 in the upstairs cabinet). The key may be kept in the cabinet as it is out of the reach of children.
- b. 2 Epi-pens are kept in school for children who require them, one in the appropriate emergency medical cabinet, the other in the academy office.

Safe storage – non emergency medication

- a. All non-emergency medication is kept in a cupboard, which is out of reach of children, in the academy office.
- b. Pupils with medical conditions know where their medication is stored and how to access it. Although, where medication is to be given at a set time, the member of staff responsible will administer it to the child.
- c. Staff ensure that medication is only accessible to those for whom it is prescribed.

Safe storage – general

- a. The MCPA admin team ensures the correct storage of medication at school.
- b. At the end of the academic year, medication is sent home with all pupils.
- c. The admin team, along with the parents of pupils with medical conditions, ensures that all emergency and non-emergency medication brought into school is in the original container (except insulin) and clearly labelled with the pupil's name, the name and dose of medication and the frequency of dose. This includes all medication that pupils carry themselves.
- d. Some medication may need to be refrigerated. All refrigerated medication is stored in the office medical fridge.
- e. It is the parent's responsibility to ensure new and in date medication comes into school on the first day of the new academic year
- f. Non-prescribed medication must be collected from the office every day
- g. Any sharps such as needles are stored in yellow sharps boxes and disposed of by the child's parents.

Record keeping

- On admission to the academy a medical information form is completed by all families. This form (appendix 2) is re-distributed every 2 years as the medical register is reviewed. If a parent notifies us of a new condition, this form should also be completed.
- Individual healthcare plans are formulated with parent and academy-nurse input. Once they are written, a copy is sent to the family. This is then reviewed annually as routine.
- Medical forms are completed by parents when the academy is required to administer medication.
- The administration of medication is recorded on the above sheet. Parents may request to view or take a copy of these logs.
- Children who are given adhoc medication (such as calpol) will be given a communication slip, confirming the time and dose. This will be recorded on the spreadsheet tracker by the member of staff who gives the medication. Fields below:

Date	Pupil name	Class	Parent consent - which parent? Check not already had medication (what time), or allergies.	Medication	Time called	Time administered	Dose	Administered by	Witnessed by	Communication slip
13/10/21	David Bowie	Ash	Yes- Mum. Not had any calpol today	Calpol	10:20	10:22	5ml	Alex Reed	Letitia Murphy	Given to teacher

In an emergency

All staff understand and are updated in what to do in an emergency for the most common serious medical conditions at this school. An emergency inhaler is kept in the school office and where a child has a diagnosis of asthma, this, or an alternative inhaler may be used in the event of an attack where the child's own inhaler cannot be accessed.

- In an emergency situation school staff are required under common law duty of care to act like any reasonably prudent parent/carer. **This may include administering medication.**
- Asthma and epi-pen training are provided by the academy nurse annually.
- This school uses Individual Healthcare Plans to inform the appropriate staff (including supply teachers and support staff) of pupils with complex health needs in their care who may need emergency help. Supply staff are briefed on entry to the school; when undertaking their commissioned duties.
- If a child with an IHP is taken to hospital, a copy of the plan should also be taken.
- If a pupil needs to be taken to hospital, 2 members of staff will always accompany them and will stay with them until a parent arrives. This school will try to ensure that the staff member will be one the pupil knows. The staff member concerned should inform a member of the academy senior management of the outcome as soon as possible.
- All pupils with medical conditions should have easy access to their emergency medication. Items such as inhalers and epipens are stored in centrally, accessible locations.
- For off-site activities, such as visits, holidays and other school activities outside of normal timetable hours, a risk assessment is undertaken to ensure pupils needing medication still have access and a staff member is named as the responsible lead. The risk assessment also helps to identify any reasonable adjustments that need to be made.

First aid.

- It is the responsibility of the safeguarding team to ensure that the contents of the first aid kits in school are well-stocked and in date. Checks are conducted bi-weekly, or after significant incidents.
- First aid kits are located under the stairs, in the reception base, in nursery and upstairs.
- Additional first aid kits are available for trips and off-site activities; these must be signed out/out of the office. The member of staff who signs each kit out is responsible for its return and must alert the admin team of any resources used.
- When any member of staff administers first aid, a 'bump slip' must be completed and given to the class teacher to be sent home at the end of the day. In the event of a head injury, the admin team must be alerted immediately so that they can inform parents via phone call or text (depending on the severity).
- Children in nursery - Y1 should also be given a first aid wristband.
- First aid can be administered by any member of staff at the school acting reasonably in loco-parentis. They do not need to be a qualified first aider to do the following:
 - o Treat a bump (bumped heads must be referred to a first aider to check for concussion) with an improvised cold compress
 - o Clean a small cut/graze
 - o Administer a plaster (after checking for allergies)
 - o Provide immediate initial medical support (e.g. putting a burn under a running cold tap)
- A qualified first aider must be consulted if:
 - o The child has a head injury
 - o The child has serious bleeding
 - o The child has or may have lost consciousness
 - o The child is having a seizure of any kind
- In all cases, it is the responsibility of the member of staff to whom the initial report is made to ensure that the child receives the correct level of care and the bump slip is completed.

First aid for an adult should be provided by a qualified first aid at work trained member of staff (a list of first aid qualified staff is in and an injury report completed).

Children being 'sent' home

Although as an academy we promote the value of high levels of school attendance; It may become necessary for a child to be sent home during the school day, due to illness.

A child should only be sent home if they are too ill to remain in school, this means that:

- The child is vomiting, or has vomited and is likely to vomit again. OR
- The child has severe pain which has not subsided after being given Calpol (with parent consent). OR
- The child is experiencing a medical episode which needs medical attention.

Children with a chronic illness should not be routinely sent home as a result of this, their health care plan will state when it is appropriate for them to be sent home.

Children who sustain injuries which require further medical treatment, or are significant in appearance (grazes larger than a playing card, black eyes for example), must be referred to parents.

If a member of staff believes that a child meets the above criteria, they should refer the child for assessment by a member of the management team (head teacher, deputy/assistant head teachers & academy business manager) or the attendance lead. If the school nurse is on-site, they should be consulted. Colleagues are encouraged to see any injury through the eyes of parents.

Unacceptable Practice

Our staff recognise that it is not acceptable practice to:

- Prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary.
- Assume that every child with the same condition requires the same treatment.
- Ignore the views of the child or their parents; or ignore medical evidence or opinion (although this may be challenged).
- Send children with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plans.
- If the child becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable.
- Penalise children for their attendance record if their absences are related to their medical condition, e.g. hospital appointments.
- Prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively.
- Require parents, or otherwise make them feel obliged, to attend school to administer medication for a prolonged period of time (the parent may wish to do this for one-offs, such as trips etc. but they would not be obliged to).

Complaints

Complaints about support in accordance with this policy should be dealt with in accordance with the academy's published complaints policy.

Appendices

- Appendix 1: Medication form
- Appendix 2: Medical details form

Appendix 1: Individual healthcare plans

Medical Condition: Individual Healthcare Plan

	Manchester Communication Primary Academy
Child's Name	
D.O.B	
Medical Condition	
Date	
Review Period	

Emergency Contact Information

Name & Relationship (Contact)	
Name & Relationship (Contact)	

Medical Needs: Symptoms, Triggers, Warning Signs, Treatment.

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Medication Details	Interventions	Notes

Staff Member Name:	Staff Member Sign:
Parent Sign:	Key Staff Member:

Appendix 2: Medication form

Pupil name:		Class:		Age:	
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Medical condition:		Medication:	
Dosage:		Times:	
For how long?		Doctor prescribed?	Yes/No
Medication will be collected on:		Any other notes:	

Staff use only, checklist:

<i>Is the medication age appropriate?</i>	
<i>Is the medication within its expiry date?</i>	
<i>If prescribed, is there a dispensing label?</i>	
<i>If prescribed, do the instructions match the label?</i>	
<i>Have you made the parent clear on when to collect the medication?</i>	
<i>Have you explained that if the child refuses the medication, we will notify parents?</i>	

Date	Time	Dosage	Given by	Witnessed by	Any comments e.g. adverse reaction or reluctance

Appendix 3: medical details registration forms

Medical Information		
	Yes	No
MCPA have a number of qualified paediatric first aid trained members of staff.		
Do you give permission for your child to receive emergency medical treatment if needed.		
Doctors / Medical Practice		
Building Number		
Street		
District		
Postcode		
Telephone Number		
Doctors Name		
Medical Conditions: (Please List)		
Any Special Education needs:		
Does your child have a Educational Health Care Plan (EHCP) in place?		



Manchester Communication Primary Academy

Asthma Management (COMPLETE IF YOUR CHILD HAS ASTHMA)

The academy has a policy for the management of asthma in school. If your child has asthma, please complete the form below and ensure that you bring in their inhalers clearly labelled with their name.

If your child is diagnosed at a later date, as having asthma please let the school know as soon as possible so we can ensure that they have appropriate access to their medication. Let us know if your child's regular treatment is changed at any time. It is important to tell us in order for the records to be updated.

Please ensure that your child has a new inhaler from your GP / Asthma nurse each September for use when needed at school, including trips, clearly marked with their name. At the end of the school year, inhalers will be returned home.

Poorly controlled asthma can interfere with a child's school performance. Please let the child's class teacher know if your child's asthma is being more troublesome than usual, especially if their sleep is disturbed.

Please sign the attached form regarding giving relievers in the event that your child has a severe attack in school.

Child's Name _____ Date of birth _____

PLEASE STATE WHICH INHALERS ARE LIKELY TO BE NEEDED IN SCHOOL AND THE LIKELY INDICATIONS FOR USE.

(i.e. Relievers (blue): before P.E./going out into the cold air/during a bad cold, Preventers (brown, purple): e.g child is using 4 times a day etc)

INHALER _____

LIKELY REASON FOR USE: _____

Has your child got a self-management plan? YES/NO (Contact your GP/Asthma nurse if you are unsure)

GP/Asthma Nurse: _____ Tel no: _____

ASTHMA CONSENT FORM

I, _____ being the parent/carer of: _____

understand that I am responsible for ensuring that my child is equipped with their asthma medication as required.

I understand my child will be given extra relief medication using the schools inhaler in the event of him or her suffering an asthma attack.

I understand that I shall be informed if my child's asthma appears to be deteriorating in school, so that I can inform my child's GP or Asthma nurse.

Signed (parent/guardian): _____ Date: _____

Print name: _____