



LONDON NAUTICAL SCHOOL

Medicines & First Aid Policy & Procedure
2021/2022

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To Be Read in conjunction with

Policy	Date	Document Index No.	Notes
Safeguarding Policy	2020		
Health & Safety Policy	March 2021		

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Rationale

The aims of this policy is to provide First Aid cover in accordance with the Health and Safety (First Aid) Regulations 1981. It is a statutory requirement that the Head teacher makes adequate provision for all employees. There is a moral and civic duty of care to make provision for all visitors to educational establishments. In this context, students are deemed to be visitors.

Purpose

- To clarify responsibilities and procedures related to First Aid arrangements.
- To ensure first aid arrangements are in place to provide the best possible care to students and staff who are ill or involved in an accident,
- that suitable protective equipment is available
- First Aid materials are checked regularly by the First Aid Coordinator to ensure they remain in good condition;

Duties And Responsibilities Of Designated First Aiders

- The designated First Aiders at The London Nautical School have completed an approved course of training and hold current certificates approved by the Health and Safety Executive: First Aid at Work (3 day course) – 2 members of staff
- Emergency First Aid - 7 members of Staff - including the technicians and support workers in each of the different areas (Science, PE, Nautical studies, Design and Technology
- The admin team member responsible for first aid also ensures that all paperwork has been completed, that the online Evolve log is up to date and is accurate. The admin team who are the designated first aiders are responsible for medications and support the School Business Manager with any on site investigations of accidents.
- The Office supervisor orders First Aid supplies and site team members ensure the kits are restocked and in date. Kits are also made available for trips, visits and on the mini buses.
- If students require to take medicines on the school site, these should be sent in to the admin team with a letter from the parent/carer with the instructions for the child to administer the medications. Instructions should indicate when and at what time the medicine is to be taken. The student must administer this medication themselves, unless otherwise directed or agreed.
- The on duty rota is available from the admin office. Main Reception also has a list of alternative First Aiders should this be required.
- High risk curriculum areas (PE, science, technology, Nautical) and school visits all include staff who are designated first aiders

Duties of designated first aiders:

- To render First Aid in accordance with the Regulations and training given
- To ensure their whereabouts are known at all times and to arrange cover for periods of absence.
- For duty first aiders, to carry an appropriate means of communication with them at all times
- To keep a record of any treatment via the Evolve incident reporting software
- To make sure that they have access to updated medical lists (on SIMs) and record any relevant notes on SIMS

Procedures For Dealing With Serious Injury Or Illness

- If a member or staff or student experiences an injury or illness and are able, they are aware that they can go to Student Services.
- If students are seriously injured and cannot make their own way down to the basement office, the first aider on duty will go to where the student is to administer first aid and then make the decision as to what actions should be taken as a result.
- If the First Aider is busy dealing with the injured person then another designated first aider will contact the parents/carers. The next of kin is called if there is a staff injury.
- Students needing to go to hospital should be conveyed by ambulance, accompanied by a member of staff; staff may be taken to hospital by a colleague if appropriate.
- A record of the incident is kept via the Evolve Accident reporting software.

Procedures For Dealing With Virus (Covid 19)

- Pupils with symptoms are to be placed in the conference room and arrangements are to be made to go home and seek a test
- Further action will be taken around isolation of other pupils and staff depending on the test results
- If the test is positive all people who have potentially come into contact with the infected person are to be written to. and be expected to isolate
- Additional cleaning is in place as well as additional general precautions, extra sanitizer and distancing arrangements
- A number of staff have undertaken additional training

Contacting Emergency Services

Request an ambulance - dial 999, ask for an ambulance and be ready with the information below.

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

- your telephone number
- your name
- your location as follows [insert school/setting address]
- state what the postcode is – please note that postcodes for satellite navigation systems may differ from the postal code
- provide the exact location of the patient within the school setting
- provide the name of the child and a brief description of their symptoms
- inform Ambulance Control of the best entrance to use and state that the crew will be met and taken to the patient
- put a completed copy of this form by the phone

Procedures For Dealing With Minor Illness

Students too ill to remain in the classroom, but not requiring first aid, should be sent to the Student Services office with a note, having already seen the 'on-call' SLT member and Deputy Head. The designated First Aider or SLT member will make the decision as to whether the child should be sent home. If this decision is made, the child will remain on the school site in Student Services until contact is made with the parent/carer to arrange for them to go home.

Medication

- No member of staff is allowed to undertake any medical routines unless they have been given appropriate instructions or training
- It is at the discretion of the Head teacher whether medication prescribed by a doctor may be accepted and given to a pupil during the school day. (Essential medication only)
- It is the responsibility of the parents/carers to supply information about the medicines that their child needs to take at school and of any changes to the prescription. The parents/carers are required to complete and sign a medication care plan that asks for this information
- The responsibility for administering medication remains with a student's parent/carer; medication that is taken on a regular basis is kept in a locked cupboard in the medical room; a first aider makes this available to the student as required, observes the student taking their medication and records that they have witnessed this in a log book
- If a child is not medically fit to attend school, or if a child carries dangerous medicines to school unsupervised, or the number of children requiring medication is unreasonable given the school's circumstances, the Head teacher could refuse to accept responsibility for them or their administration, and parents should be asked to make other arrangements
- If however, the child requires medicine to keep down the effects of a non-serious illness, the Head teacher will be sympathetic to the request. Medication is handed in to the Medical Room and is kept in a locked cupboard. The students can attend at a designated time and will administer the medication themselves and signatures of both staff supervising and student will be taken.
- Medication brought into school should be in its original container complete with its original label. Medicines should not be transferred from one container to another- whatever is supplied by the chemist should be brought into school.

The label should clearly state-

- ❖ Name of pupil
 - ❖ Date of dispensing
 - ❖ Dose and frequency
 - ❖ Precautions/special storage instructions
 - ❖ Name of medication
 - ❖ Expiry date
- Some students take medication to treat an ongoing condition; the medication is kept in a labelled bag in a locked cupboard in the medical room and can be accessed by the duty staff.
 - Asthma sufferers are allowed to carry their named inhalers with them at all times and should be kept ready for immediate use. A spare inhaler should also be made available to be kept in the locked medical store.

Administration

- The student will administer the medication themselves and signatures of both staff supervising and student will be taken
- The school will keep an individual record for each pupil when medication has been administered. The administration of any medication will be recorded with two signatures. These will be archived in the pupil records.
- If there is any doubt about the administration of the medicine Student Services will check with the parent / carer before allowing the pupil to administer the medication,
- The pupil is responsible for taking his or her medicines on school trips and will not be allowed on the trip without adequate supplies.

Students With Life Threatening Conditions

- Any student who has a life threatening condition has a medical care plan. These are located from the Resource Base office and linked to the student in SIMs linked documents. Staff are alerted to the medical care plans via a header on the student's home page
- At the start of each year, the SENCO messages the list of students who have medical care plans to all staff. At the end of each year, the care plans are sent to parents to be updated. The SENCO works with the School Nurse to ensure the care plans are kept up to date.
- All staff are provided with information related to students with medical conditions on a termly basis; especially related to those students who are diabetics and who use epipens. The SENCO is responsible for ensuring this takes place. Epi pens are kept in Student Services..
- Allergy action plans and medical care plans are maintained on SIMS

School Visits

- The member of staff in charge of organising a school visit is responsible for arranging to take a First Aid kit with them. This can be obtained from Caroline Knight (office supervisor) or Susan Cronin (Admin assistant) in Student Services.
- The school medical lists should be checked and the necessary medical information recorded and any extra details obtained from parents before students take part in a trip; the risk assessment for the visit must indicate actions that have been taken to minimise the risk to these students.
- All students who carry inhalers or suffer from asthma should be identified. It is essential that students have the appropriate medication and inhalers with them before embarking on the trip.

Broken Limbs / Ongoing Illness

Pupils who attend school with pre-existing conditions / broken limbs will have a risk assessment completed upon their return to school and reasonable adjustments will be made around for example their school day to take into account lack or slower than normal mobility. If these students go offsite they should form part of the Evolve Risk Assessment and Visit Plan.

Emergency Administration of Medicines

Section 19 of the The Human Medicines Regulations 2012 allows for administration other than by a Pharmacist in life threatening situations via parenteral administration in an emergency. Any member of staff may volunteer to take on the responsibilities of schedule 19 medicines, but they cannot be required to do so.

The term 'designated members of staff' refers to any member of staff who has responsibility for helping to administer a spare auto-adrenaline injectors or AAI (e.g. they have volunteered to help a pupil use the emergency AAI, and been trained to do this, and are identified in the school's medical conditions or allergy policy as someone to whom all members of staff may have recourse in an emergency).

LNS will ensure staff have appropriate training and support, relevant to their level of responsibility. It is the responsibility of the governing bodies to ensure that staff supporting children with a medical condition should have appropriate knowledge, and where necessary, support.

It would be reasonable for ALL staff to:

- be trained to recognise the range of signs and symptoms of an allergic reaction;
- understand the rapidity with which anaphylaxis can progress to a life-threatening reaction, and that anaphylaxis may occur with prior mild (e.g. skin) symptoms;
- appreciate the need to administer adrenaline without delay as soon as anaphylaxis occurs, before the patient might reach a state of collapse (after which it may be too late for the adrenaline to be effective);
- be aware of the anaphylaxis policy;
- be aware of how to check if a pupil is on the register;
- be aware of how to access the Epi Pen
- be aware of who the designated members of staff are, and the policy on how to access their help.

Staff have been trained in the use of AAI's as part of their First Aid Training

Schedule 19 / Regulation 238 Medicines

(medicines that can be administered other than by a Pharmacist in life threatening situations via parenteral administration in an emergency)

- Adrenaline 1:1000 up to 1mg for intramuscular use in anaphylaxis
Atropine sulphate and obidoxime chloride injection
Atropine sulphate and pralidoxime chloride injection
Atropine sulphate injection
Atropine sulphate, pralidoxime mesylate and avizafone injection

Chlorphenamine injection
 Dicobalt edetate injection
 Glucagon injection
 Glucose injection
 Hydrocortisone injection
 Naloxone hydrochloride
 Pralidoxime chloride injection
 Pralidoxime mesylate injection
 Promethazine hydrochloride injection
 Snake venom antiserum
 Sodium nitrate injection
 Sodium thiosulphate injection
 Sterile pralidoxime

Monitoring And Evaluation

The inclusion Manager and Pastoral Manager is responsible for cross referencing the Child Protection Policy with all other associated policies as listed in the Report to Governing Body on Safeguarding Children

The Governors Personnel Committee and Governor responsible for Child Protection will review all processes on an annual basis

Useful Links:

<http://www.reactfirst.co.uk/live/36b.pdf>

Appendix 1) Staffing Details

The members of staff who are fully first aid trained are:	
School Reception	Science
Malc Rutherford, Rob Melia	Yaseen Syed
PE:	Design and Technology
Jon Shaw & Alex Watts	Carl Burton
Nautical	Other members of staff
James Bullar Paul Bew	David Bubb
The members of staff who have attended Administration of Medicines Awareness: -	
Mike Knight Tallulah Simmonds	Sixth Form Floor Two

Claire James Rob Melia Caroline Knight Sue Cronin Dalton Elliot	Floor 1 Basement Reception Student Services Basement / classrooms
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The allocated school Nurse who has responsibility for care plans, allergy actions plans and reviewing the medicines kept on the school site is **Pauline Howell**.

paulinehowell@nhs.net

0203 049 5107

The Inclusion manager is Emily Robertson (SENCO) and is responsible for the coordination of support for pupils with medical conditions.

Appendix ii) parental agreement for setting to administer medicine

The school/setting will not give your child medicine unless you complete and sign this form, and the school or setting has a policy that the staff can administer medicine.

Date for review to be initiated by	
Name of school/setting	
Name of child	
Date of birth	
Group/class/form	
Medical condition or illness	

Medicine

Name/type of medicine <i>(as described on the container)</i>	
Expiry date	
Dosage and method	
Timing	
Special precautions/other instructions	
Are there any side effects that the school/setting needs to know about?	
Self-administration – y/n	
Procedures to take in an emergency	

NB: Medicines must be in the original container as dispensed by the pharmacy

Contact Details

Name	
Daytime telephone no.	
Relationship to child	
Address	
I understand that I must deliver the medicine personally to	[agreed member of staff]

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school/setting staff administering medicine in accordance with the school/setting policy. I will inform the school/setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature(s) _____

Date _____

Appendix iii) record of medicine administered to an individual child

Name of school/setting	
Name of child	
Date medicine provided by parent	
Group/class/form	
Quantity received	
Name and strength of medicine	
Expiry date	
Quantity returned	
Dose and frequency of medicine	

Staff signature _____

Signature of parent _____

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

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

Record of medicine administered to an individual child (Continued)

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

Date			
Time given			
Dose given			
Name of member of staff			

Staff initials

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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 iv) record of medicine administered to all children

Name of
school/setting

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Date	Child's name	Time	Name of medicine	Dose given	Any reactions	Signature	Print name of staff

