



**WIRRAL HOSPITALS' SCHOOL**

# **FIRST AID POLICY, ADMINISTRATION OF MEDICINE AND SUPPORTING STUDENTS WITH MEDICAL CONDITIONS.**

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# **First Aid Policy, Administration of Medication and Supporting Students with Medical Conditions**

## **1. INTRODUCTION FIRST AID**

First aid is an important and necessary provision made by Wirral Hospitals' School towards students, employees and visitors.

Whilst the actual First-aid Regulations have not been repealed, a revision of the Approved Code of Practice (ACOP) has been carried out by the Health and Safety Commission. This document is an appendix to the Local Authority First-aid policy and encompasses the Health and Safety at Work Act (1974).

## **2. RISK ASSESSMENT OF FIRST-AID NEEDS**

The management of Health and Safety at Work Regulations (1992) requires a suitable and sufficient assessment of the risks to health and safety to students, staff and visitors in the place of work and to identify what measures need to be taken to prevent or control these risks.

### **2.1 Risk Assessment at Wirral Hospitals' School.**

Wirral Hospitals' School is a split site school having a main base at the Joseph Paxton Campus, 157 Park Road North, and Ward teaching at Arrowe Park Hospital, Upton.

This policy is relevant only to the Joseph Paxton site, the hospital ward First Aid procedures fall under the auspices of the hospital itself.

### **2.2 Risk Assessment at Joseph Paxton Campus**

- A First Aid box is located in the main school office and also in the medical room. Responsibility for maintaining the school first aid boxes falls under the admin staff based in the main office. The school is located on a main road with good access to the emergency services.

- A suitable and sufficient risk assessment of the risks to health and safety at the Joseph Paxton site as required by the Health and Safety at Work Regulations 1992, to identify what measures need to be taken to prevent and control these risks. This is detailed in Appendix 2.
- In subjects where the risk of accident is higher than normal e.g. Technology subjects, Science, P.E., a risk assessment should form part of the teacher lesson planning. These subjects also have additional department-specific risk assessments.
- A risk benefit assessment should be carried out and recorded before undertaking any off-site activity e.g. a school trip or field trip, this should be recorded on a Risk Benefit Form and sent to Terence Lewis – EVC and Laura Finnan – Health and Safety for checking. For certain trips the risk benefit form is sent through to Wirral LA using the Evolve online system (as detailed in the Trips and Visits Policy). This is undertaken by Terence Lewis, EVC and overseen by both Laura Finnan, Assistant Headteacher, and Phill Arrowsmith, Headteacher.

### 2.3 Specific Needs

The specific first-aid needs of students who attend WHS are identified and catered for at the time of their admittance to the Joseph Paxton site for teaching, on an IHP or on their EHCP.

## **3.0 PRACTICE AND PROCEDURES FOR DEALING WITH INCIDENTS REQUIRING FIRST-AID**

### 3.1 Numbers of First-aid personnel.

Local Authority Guidelines recommend:

- At least one appointed person
- At least two first-aiders with an additional one for split sites
- One emergency first-aider per 100 students.

See Appendix 3 for the appointed personnel

### 3.2 Duties of First-aiders

The main duties of the first-aider are to:

- look after the first-aid equipment e.g. re-stocking the first-aid box

- give immediate help to casualties with common injuries, self-harming incidents and those arising from specific hazards at WHS: Joseph Paxton site
- when necessary, call an ambulance or other professional help
- have completed an approved first-aid training course

### Appointed Persons

An appointed person is someone who:

- takes charge when someone is injured or becomes ill
- looks after the first-aid equipment e.g. re-stocking the first-aid box
- ensures that an ambulance or other professional medical help is summoned when appropriate

### Selection of First-aiders

- Refer to Para 5.1 First Aid at Work: Policy and Guidance H006/97

### 3.3 Procedures for dealing with incidents requiring first-aid.

#### Common minor injuries.

- In the event of a minor accident in any area of the school, students should tell the nearest member of staff
- Staff should use common sense to assess the injury. For minor cuts and grazes, it is recommended that they should be washed with tissues moistened with water.
- **Lotions, creams and sprays should not be used**
- All treatment should be recorded in the First Aid recording book. For more serious incidents they will be recorded in the Serious Incident Book which is kept in the front office. Where the student requires hospital treatment and/or to leave school early due to injury, the details should be recorded on Wirral LA's M13 form.

Self-Harming incidents: see Self Harm Policy.

Serious accidents.

- For serious accidents, the First-aider should first be summoned, they then call for emergency services and the Headteacher/SLT is informed.
- All swabs used on open wounds are disposed of correctly in the clinical waste bin provided by the LA. (Refer to Paragraph 5.5, Wirral Hospitals' School First-aid Policy)

#### **4.0 DISSEMINATING FIRST-AID INFORMATION**

It is good practice to make sure everybody in the school community knows and understands the First-aid procedures, the identity of the First-aid personnel and the location of the First-aid box. Signs detailing the names of our trained first-aiders are displayed at several key locations around school.

Sanitary protection:

- the school will only offer sanitary pads.

Provision of drinks for students:

- Chilled water is provided. Students may bring their own drinks into school but these should be water or fruit juice. Fizzy drinks and drinks containing high levels of caffeine and colourants are not permitted.

#### **5.0 First-aid Equipment and First-aid facilities**

5.1 First Aid box.

- We have 2 centrally located first aid boxes and an accident book. The use of first aid equipment to be issued only by a first aider / emergency aider.
- If first aid is administered, the accident book is to be filled in by the person giving first aid (we are only responsible for the treating of accidents that happen in the school grounds).

- A separate supply of blue plasters is available for the Food Technology room.

## 5.2 Contents of a First-aid box.

There is not a standard list of contents for a first-aid box. However, WHS: Joseph Paxton site adhere to the HSE recommendation that, where there is no special risk identified, a minimum stock of first-aid items would be:

- a leaflet giving general guidance on first aid;
- 20 individually wrapped sterile adhesive dressings ( Assorted sizes);
- two sterile eye pads;
- six safety pins
- six medium sized (approximately 12cm x 12cm) individually wrapped sterile un-medicated wound dressings;
- two large (approximately 18cm x 18cm) individually wrapped sterile un-medicated wound dressings;
- one pair of disposable gloves.
- four individually wrapped triangular bandages (preferably sterile);

The contents of the boxes are examined frequently and re-stocked as soon as possible after use. There is extra stock in school. First-aid stock is rotated and any items which have gone past their expiry date are safely discarded.

## 5.3 Travelling First-aid kits

After assessing the risk when planning an off-site activity, the HSE recommend that where there is no special risk identified, a minimum stock of first-aid items for travelling is;

- a leaflet giving general advice on first-aid;
- six individually wrapped sterile adhesive dressings;
- one large sterile un-medicated wound dressing (approximately 18cm x 18cm)
- two triangular bandages
- two safety pins
- individually wrapped moist cleaning wipes;

- one pair of disposable gloves

#### 5.4 First-aid accommodation

The medical room is to be used for attending to minor first aid. There is access to running water in this area, along with a toilet in the adjacent room.

#### 5.5 Disposal of Clinical Waste

The procedure for the disposal of clinical waste at WHS is:

- The main clinical disposal units are located in **the Medical Room and the disabled toilet adjacent.**
- Clinical Waste from anywhere on site should be placed in the yellow bags provided by the LA and then transferred into the main disposal unit.

#### 5.6 Hygiene/ Infection Control

All staff should take precautions to avoid infection and must follow basic hygiene procedures. Staff have access to single use disposable gloves (located in their first-aid boxes) and hand washing facilities. They are aware of the care that should be taken when dealing with blood or other body fluids and disposing of dressings or equipment.

### **6.0 REPORTING ACCIDENTS AND RECORD KEEPING**

- An M13 accident form should be completed every time a student requires hospital treatment and/or an early finish to the school day as a result of an injury sustained at school. In all other cases, requiring simple first aid treatment in school but no further medical assistance, the details should be noted and given to Lisa Hayes, who will record the incident on the student's personal file; the name of the person giving first aid together with summary details of the treatment given should be recorded.
- Any other illness or minor first aid incident should be recorded on SIMS.

## 6.1 Information to parents

- In an emergency, the child's Head of House, Learning Mentor, or a member of SLT will try to contact the student's parents/carers or named contact, as soon as possible.

## 6.2 Taking Students to Hospital

- Parents/carers or named contacts will be informed by WHS if their child is being taken to hospital for treatment.
- Depending on the injury or illness, arrangements will be made for parents/carers etc. to either take the student to hospital themselves, or to meet the student at hospital.
- The provision of urgently needed medical treatment will, under no circumstances, be delayed pending the arrival at school of parents/carers
- **So far as possible, a responsible adult will accompany a student to the hospital. A dynamic risk assessment will be carried out by staff and the Headteacher (or his appointed deputy) if staff are required to escort/take students to the hospital.**
- **All contact information is available on the school network and in the main school office.** Staff should not leave the rest of the class in order to accompany the student unless there is more than one member of staff present.
- If, under the unlikely circumstances a student needs emergency treatment and the parents/carers cannot be contacted, then the hospital would, under normal circumstances hold full responsibility of authorising treatment.

## **7.0 Administration of medication to students based at Joseph Paxton Campus;**

**All staff at Wirral Hospitals School must be clear with regard to the following points:**

- A locked compartment is provided for any prescription drugs which are to be taken by students. This is kept in the **medical room**.

- Each student has his/her own locked compartment which is clearly labelled.
- Parents/carers are required to produce, in writing, a schedule of frequency and dosage. This is to be reviewed when changes are informed or on an annual basis when annual review or review of health care plan is undertaken.
- Before administering any medication, staff will check whether this is still “in date” and notify parents/carers accordingly.
- Non-prescription medication will only be administered on a short-term basis, following the same procedures as prescription medicines.
- If students are taking prescribed medication alongside non-prescribed medication then the parent / carer will be expected to check with the GP that the medicines can be taken alongside each other. Parents will have to sign on the medicines form that they have done so.
- Should it be recorded that a student is requesting non prescription medication on a regular basis, a meeting will be called with parents/carers.
- Students who suffer from asthma and require an inhaler should carry these with them at all times. A spare inhaler is kept within a cabinet. We also have a spare emergency inhaler.
- Unless a medical form has been completed by the parent/carers and the medicines provided, the school must not under any circumstances administer any form of pain relief to students (eg paracetamol). A telephone call home will be made by a member of staff for advice before administering any pain relief. This is to ensure that dosages for non-prescription
- In the event that such medication is required, the procedures outlined above shall apply. Only tablets which are in sealed packaging can be administered, it must have an official label with the student’s name on it.
- All medicines administered to students will be given by staff who have been on the relevant courses. It is the responsibility of parent/carers to ensure all medicines not used or are out of date will be disposed of at a pharmacy. All medicines stored at Joseph Paxton Campus are checked

termly and if it needs replacing, we will give a gentle reminder to the parent/carer. We will, in some circumstances, take out of date medicines to our local pharmacy if not collected by parent/carer.

**NOTE: Aspirin based products will not be administered to students unless prescribed by a Doctor.**

### **8.0 Supporting Students with Medical Conditions;**

(This responds to the statutory guidance and advice, issued September 2014 and last updated August 2017, by the DFE to ensure that students with medical conditions receive appropriate support)

**At Wirral Hospitals' School we have provided students with a separate room where they can self administer regular medications. E.g Insulin. A fridge and sharps container is provided. The student will have completed an Individual Health Care Plan with the SENCO, School Nurse and parents/carer. A log will be kept and signed by a member of staff as to what medication has been administered whilst in school**

- Students at Wirral Hospitals' school who have medical conditions are properly supported so that they have full access to education, including trips and physical education.
- We ensure that arrangements are in place to support students with medical conditions. In doing so we also ensure that such students can access their own medicines.
- Our Governing body ensures that school leaders consult health and social care professionals, students and parents to ensure that the needs of students with medical conditions are effectively supported.

#### **Aim**

- The aim is to ensure that all students with medical conditions, 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.

#### **Parental concerns**

- Parents of students with medical conditions are often concerned that their student's health will deteriorate when they attend school. This is because students with long-term and complex medical conditions may require on-going support, medicines or care while at school to help them manage their condition and keep them well. Others may require monitoring and interventions in emergency circumstances. It is also the case that student's health needs may change over time, in ways that cannot always be predicted, sometimes resulting in extended absences. Parents should feel confident that we will provide effective support for their student's medical condition and that students feel safe. In making decisions about the support we provide, we will establish relationships with relevant local health services to help us. We will receive and fully consider advice from healthcare professionals and listen to and value the views of parents and students.

### **The student's perspective**

- In addition to the educational impacts, there are social and emotional implications associated with medical conditions. Students may be self-conscious about their condition and some may be bullied or develop emotional disorders such as anxiety or depression around their medical condition. In particular, long-term absences due to health problems affect students educational attainment, impact on their ability to integrate with their peers and affect their general wellbeing and emotional health. Reintegration back into school should be properly supported so that students with medical conditions fully engage with learning and do not fall behind when they are unable to attend. Short term and frequent absences, including those for appointments connected with a student's medical condition, (which can often be lengthy), will also need to be effectively managed and appropriate support put in place to limit the impact on the student's educational attainment and emotional and general wellbeing.

### **Disability**

- Some students with medical conditions may be disabled. Where this is the case the governing body must comply with their duties under the Equality Act 2010. Some may also have special educational needs (SEN) and may have a statement, or Education, Health and Care (EHC) plan which brings together health and social care needs, as well.

### **Implementation**

- The governing body will ensure that the arrangements they set up include details of how the school's policy will be implemented effectively, including a named person who has overall responsibility for policy implementation. They include:
  - who is responsible for ensuring that sufficient staff are suitably trained;
  - a commitment that all relevant staff will be made aware of the student's condition;
  - cover arrangements in case of staff absence or staff turnover to ensure someone is always available;
  - briefing for supply teachers;
  - risk assessments for school visits, holidays, and other school activities outside of the normal timetable;
  - monitoring of individual healthcare plans.

The person with overall responsibility for the implementation of this policy is Assistant Headteacher, Laura Finnan.

**Procedure to be followed when notification is received that a student has a medical condition**

- When notification is received from a parent, carer or medical source that a student has a medical condition, the school will request that an Individual Healthcare Plan (Appendix 5) is completed in conjunction with parents and relevant medical advisors with an appropriate member of staff who will represent the school in the care of the student.
- In initial meetings this will be the SENCO in conjunction with a member of staff who will be working with the student.
- The student's condition will dictate who takes the lead in maintaining the plan and this will be indicated on the plan.
- Every plan will be reviewed at least annually but more frequently as the student's needs change.

**Factors in the healthcare plan include:**

- The medical condition, its triggers, signs, symptoms and treatments;
- The student'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 eg crowded classrooms, playtimes etc.
- Specific support for the student's educational, social and for example, how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions, emotional needs.
- The level of support needed, (some students will be able to take responsibility for their own health needs), including in emergencies.

**If a student is self-managing their medication, this should be clearly stated with appropriate arrangements for monitoring (IHP). This will include:**

- Who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the student'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 student's condition and the support required.
- Arrangements for written permission from parents and the Headteacher for medication to be administered by a member of staff, or self-administered by the student during school hours.
- Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable, that will ensure that the student can participate, e.g. risk assessments.
- Where confidentiality issues are raised by the parent/student, the designated individuals to be entrusted with information about the student's condition.
- What to do in an emergency, including whom to contact and contingency arrangements. Some students may have an **emergency healthcare plan** prepared by their lead clinician that could be used to inform development of their Individual Healthcare Plan.

### **Staff training and support**

Staff will be supported in carrying out their role to support students with medical conditions through the provision of appropriate training identified with parents and medical professionals at the time of the formation of the plan. This should be a factor at every review where the student's condition changes under the guidance of medical professionals involved. The plan will specify how training needs are assessed, and how and by whom, training will be commissioned and provided. It is imperative that any member of school staff providing support to a student with medical needs has received suitable training. **Staff must not give prescription medicines or undertake health care procedures without appropriate training** (updated to reflect any individual healthcare plans).

### **Emergency procedures**

Where a student has an Individual Healthcare Plan, it will clearly define what constitutes an emergency and explain what to do, including ensuring that all relevant staff are aware of emergency symptoms and procedures. Other students in the school should know what to do in general terms, such as informing a teacher immediately if they think help is needed.

If a student in receipt of an IHCP needs to be taken to hospital, staff will stay with the student until the parent arrives, or accompany a student taken to hospital by ambulance. This procedure is the same as in section 6.2 although, wherever possible, and as long as it doesn't cause unnecessary delay, the student's IHCP will be taken to hospital by the member of staff.

### **Transition arrangements**

Arrangements will be put in place for students with medical needs who are transferring to another school as soon as we are notified of the move. This will include contacting the new school to arrange for the transfer of information and to offer a meeting to discuss arrangements. Parents will be invited to this meeting.

## **9.0 Additional Sources of Information**

[Health Protection Agency Guidance on Infection Control in Schools and other Childcare Settings.](#)

[http://www.hpa.org.uk/infections/topics\\_az/schools/schools\\_guidelines\\_2006.pdf](http://www.hpa.org.uk/infections/topics_az/schools/schools_guidelines_2006.pdf)

[Charity for People with Coeliac Disease](#)

[http://www.coeliac.co.uk/coeliac\\_disease/default.asp](http://www.coeliac.co.uk/coeliac_disease/default.asp)

Allergy UK - National Medical Charity Dealing with Allergies

<http://www.allergyuk.org/>

Diabetes UK

<http://www.diabetes.org.uk>

British Epilepsy Association

<http://www.epilepsy.org.uk>

Asthma UK School Policy Guidelines

<http://www.asthma.org.uk/document.rm?id=160>

CYPD's Policy & Guidance Documents – [www.wirral-  
mbc.gov.uk/healthandsafety/asp.index](http://www.wirral-<br/>mbc.gov.uk/healthandsafety/asp.index)

HS/ECS/058 Principles of Infection Control and Arrangements for Dealing with Bodily Fluids

[http://www.wirral-  
mbc.gov.uk/HealthandSafety/admin/PolicyGuidlines/Files/HS-  
ECS-  
058%20PRINCIPLES%20FOR%20THE%20CONTROL%20OF%20INFECTION.  
doc](http://www.wirral-<br/>mbc.gov.uk/HealthandSafety/admin/PolicyGuidlines/Files/HS-<br/>ECS-<br/>058%20PRINCIPLES%20FOR%20THE%20CONTROL%20OF%20INFECTION.<br/>doc)

HS/ECS/059 Procedures for Dealing with Discarded Needles/Sharps and Needlestick Injuries.

[http://www.wirral-  
mbc.gov.uk/HealthandSafety/admin/PolicyGuidlines/Files/HS-  
ECS-059%20Procedure%20for%20Dealing%20with%20discarded%20needles-  
syringes%20and%20needlestick%20injuries.doc](http://www.wirral-<br/>mbc.gov.uk/HealthandSafety/admin/PolicyGuidlines/Files/HS-<br/>ECS-059%20Procedure%20for%20Dealing%20with%20discarded%20needles-<br/>syringes%20and%20needlestick%20injuries.doc)

Health & Safety Section - SafeSchool

Mrs J Fairbrother  
07834 189 236

CYPD's Physical & Medical Needs Coordinator

Mrs J Hudson  
0151 643 7103  
Mrs J Catton  
0151 643 7101

School Nurse Manager (Clatterbridge Hospital)

Mrs S Edwards  
0151 334 4000 ext  
5201

Health Protection Agency – Lead Nurse  
Mrs H Oulton

0151 604 7750

**10.0 Appendices**

**APPENDIX 1**

**ACCIDENT PROCEDURE OFF SITE:**

**ARROWE PARK SITE: ARROWE PARK HOSPITAL, FIRST FLOOR.**

If there is any incident which may require first aid, this will be administered by health professionals as the students are patients in the first instance.

Where the accident involves a member of staff, and treatment cannot be self-administered, staff make use of Accident & Emergency or Occupational Health department on site.

**ADMINISTRATION OF MEDICATION TO STUDENTS OFF SITE:**

Students who attend Arrowe Park Hospital will be subject to the administration procedures of the Wirral Hospitals' NHS Trust.

## **APPENDIX 2**

### **FIRST AID PERSONNEL/ ADMINISTRATION OF MEDICINES**

At Arrowe Park, teaching staff are working on premises that are managed and staffed by Staff from other Departments. There will be First Aiders appointed by those Departments and it is considered unnecessary to appoint additional First-Aiders for students from WHS personnel.

At the Joseph Paxton Campus a current list of First Aiders is displayed at regular points throughout school, in the offices of key staff and in the main school office.

## Appendix 3

### Forms

- Form 1:** Contacting Emergency Services
- Form 2:** Health Care Plan
- Form 3:** Parental agreement for school/setting to administer medicine
- Form 4:** Headteacher/Head of setting agreement to administer medicine
- Form 5:** Record of medicine administered to an individual child
- Form 6:** Record of medicines administered to all children
- Form 7:** Request for child to carry his/her own medicine
- Form 8:** Staff training record – administration of medicines
- Form 9:** Authorisation for the administration of rectal diazepam
- Form 10:** Management of medicines checklist

All forms set out below are examples that schools and settings may wish to use or adapt according to their particular policies on administering medicines.

## FORM 1

### Contacting Emergency Services

#### Request for an Ambulance

**Dial (9) 999, ask for ambulance and be ready with the following information**

- 1 Your telephone number  
.
- 2 Give your location as follows  
. [insert school setting address]
- 3 State that the postcode is  
.
- 4 Give exact location in the school/setting  
. [insert brief description]
- 5 Give your name  
.
- 6 Give name of child and a brief description of child's symptoms  
.
- 7 *Give details of any medicines given or prescribed*
- 8 Inform Ambulance Control of the best entrance and state that the crew will be met and taken to  
.

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

Put a completed copy of this form by the telephone

**FORM 2**

**Health Care Plan (this should be regularly reviewed)**

Name of school/setting	
Child's name	
Group/class/form	
Date of birth	
Child's address	
Medical diagnosis or condition	
Date	
Review date	

**Family Contact Information**

Name	
Phone no. (work)	
(home)	
(mobile)	
Name	
Phone no. (work)	
(home)	
(mobile)	

**Clinic/Hospital Contact**

Name	
Phone no.	

**G.P.**

Name	
Phone no.	

Describe medical needs and give details of child's symptoms

--

Daily care requirements (*e.g. before sport/at lunchtime*)

--

Describe what constitutes an emergency for the child, and the action to take if this occurs

Follow up care

Who is responsible in an emergency (*state if different for off-site activities*)?

Form copied to

**FORM 3**

**STUDENT MEDICINE CONSENT FORM**  
**Amended 2021**

<b>Student Details:</b>	
Student Name:	
Date of Birth:	
Medical Condition or Illness:	

<b>Medicines to be held in school</b>		
Name /type of medicine: (as described on the container)		
Date dispensed:		
Strength:		
Expiry date:		
Is the medication prescribed or non-prescribed? <b>Please note non-prescribed medication can only be administered on a short term basis.</b>		
If the medication is non-prescribed, is it taken alongside a prescribed medication?  <b>We can only administer non-prescribed medication alongside prescribed medication with GP approval.</b>	<p>YES</p> <p>Has the GP approved the use of this medication alongside the prescribed medication?</p> <p>YES                      NO</p>	<p>NO</p>
Dosage and method:		
Special precautions:		
Are there any side effects that the school need to know about?		
Procedures to take in an emergency:		

<b>Contact Details:</b>	
Name & Relationship:	
Contact number:	
Address:	
GP:	
GP Telephone number:	

I understand that all medicine(s) must be handed in to the Mentor Team.

I accept that this is a service that the school is not obliged to undertake.

I understand that I must notify the school of any changes in writing.

I understand that school will telephone me for consent before they administer any non-prescribed medication, this is to ensure that max dosage rules and time between doses is adhered to.

Signature: \_\_\_\_\_ (Parent/Carer) Date:  
\_\_\_\_\_

**FORM 4**

**Headteacher/Head of setting agreement to administer medicine**

Name of school/setting

It is agreed that [name of child] will receive [quantity and name of medicine] every day at [time medicine to be administered e.g. lunchtime or afternoon break].

[Name of child] will be given/supervised whilst he/she takes their medication by [name of member of staff].

This arrangement will continue until [either end date of course of medicine or until instructed by parent/carers].

Date \_\_\_\_\_

Signed \_\_\_\_\_

*(The Head teacher/Head of setting/named member of staff)*

**FORM 5**

**Record of medicine administered to an individual child**

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

Staff signature \_\_\_\_\_

Signature of parent/carer \_\_\_\_\_

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

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

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

Date			
Time given			

Dose given  
Name of member of  
staff  
Staff initials


**Form 6**

**Record of medicines administered to all children**

Name of School/Setting
------------------------

Date	Child's Name	Time	Name of Medicine	Dose Given	Any Reactions	Signature of Staff	Print Name

**Form 7**

**Request for child to carry his/her own medicine**

This form must be completed by parent/carers/guardian

**If staff have any concerns discuss this request with healthcare professionals**

Name of school/setting	
Child's name	
Group/class/form	
Address	
Name of medicine	
Procedures to be taken in an Emergency	
<b>Contact Information</b>	
Name	
Daytime phone no.	
Relationship to child	

I would like my son/daughter to keep his/her medicine on him/her for use as necessary.

Signed \_\_\_\_\_

Date \_\_\_\_\_

If more than one medicine is to be given a separate form should be completed for each one.

**Form 8**

**Staff training record – administration of medicines**

Name of school/setting	
Name	
Type of training received	
Date of training completed	
Training provided by	
Profession and title	

I confirm that [name of member of staff] has received the training detailed above and is competent to carry out any necessary treatment. I recommend that the training is updated [please state how often].

Trainer's signature \_\_\_\_\_

Date \_\_\_\_\_

**I confirm that I have received the training detailed above.**

Staff signature \_\_\_\_\_

Date \_\_\_\_\_

Suggested review date \_\_\_\_\_

**Form 9**

**Authorisation for the administration of rectal diazepam**

Name of school/setting  
Child's name  
Date of birth  
Home address  
G.P.  
Hospital consultant


                  should be given rectal diazepam                   mg.

If he has a \*prolonged epileptic seizure lasting over                   minutes

**OR**

\*serial seizures lasting over                   minutes.

An Ambulance should be called for \*

**OR**

If the seizure has not resolved \*after                   minutes.

**(\*please enter as appropriate)**

Doctor's signature \_\_\_\_\_

Parent/carer's signature \_\_\_\_\_

Date                   \_\_\_\_\_

The following staff have been trained:

Trainers name and post

**NB: Authorisation for the administration of rectal diazepam**

As the indications of when to administer the diazepam vary, an individual authorisation is required for each child. This should be completed by the child's GP, Consultant and/or Epilepsy Specialist Nurse and reviewed regularly. This ensures the medicine is administered appropriately.

The Authorisation should clearly state:

- when the diazepam is to be given e.g. after 5 minutes; and
- how much medicine should be given.

Included on the Authorisation Form should be an indication of when an ambulance is to be summoned.

**Records of administration should be maintained using Form 5 or similar**

## Form 10

Wirral Hospitals' School

### Management of Medicines in Schools and Early Years Settings Checklist

Checklist		Yes	No	Details
1.	Does the school have a written policy for administration of medicines in school?			Give date, location
2.	Has the school nominated responsible persons to administer medicines?			List nominated staff
3.	Is there a clear statement on the roles and responsibility of staff managing administration of medicines, and for administering and supervising the administration?			Location – extract issued to nominated staff
4.	Have nominated staff received appropriate information, instruction and training on the school's policy and procedures			List staff, date and training provider (parent, school nurse, other)
5.	Does the school have procedures for managing medicines on trips and outings			Risk assessments, consent forms, etc
6.	Has the school received a written agreement from parents for any medicines to be given to a child			Forms 3a (short term) or 3b (long term)
7.	Has the school confirmed, in writing, that they agree to administer medicines			Form 4
8.	Is there guidance for children carrying and taking their medicines themselves			Specify
9.	Does the school maintain records for the administration of medicines			Form 5
10.D	Do staff have access to the school's emergency procedures			Form 1
11.	Is a health care plan required for the individual			Form 2

## Medicines Checklist

1.	Does the school have appropriate storage facilities taking into account temperature and security			Specify
2.	Is the medicine in the original container			
3.	Is the container clearly labelled with the name of the child, the name and dose of the medicine, the frequency of administration, the time of administration, any side effects and the expiry date			
4.	Are emergency medicines, such as asthma inhalers and adrenaline pens readily available			
5.	Does the school allow children to carry their own inhalers			