



Introduction

The School will provide suitable and sufficient health and medical centre provision for employees and students if they become ill at the School or on an approved school trip.

For details of first aid provision please see the separate first aid policy.

Medical Personnel

At least one, qualified School Nurse will be on duty throughout the normal school day during term time.

Students with particular medical needs

All parents/carers are required to complete a medical questionnaire prior to their child starting at the school (Appendix 3). This includes any medical/mental health conditions and allergies. Emergency medication such as Adrenaline Auto Injectors and Inhalers must be carried by the student at all times. Spare Emergency medication must be kept in an unlocked cupboard in the medical centre at the Senior School and in the servery at the Junior School. It is the parent's responsibility to ensure their daughter's medication is appropriately labelled, prescribed and in-date.

Parents should provide the school with sufficient and up-to-date information about their child's medical needs. Parents are key partners and should be involved in the development and review of their child's individual healthcare plan, and may be involved in its drafting. They should carry out any action they have agreed to as part of its implementation, e.g. provide medicines and equipment and ensure they or another nominated adult are contactable at all times.

Pupils with medical conditions will often be best placed to provide information about how their condition affects them. They should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of, and comply with, their individual healthcare plan. Other pupils will often be sensitive to the needs of those with medical conditions.

Any member of school staff may be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so. Although administering medicines is not part of teachers' professional duties, they should consider the needs of pupils with medical conditions that they teach. School staff should receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility to support children with medical conditions. Any member of school staff should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

Supporting a child with a medical condition during school hours is not the sole responsibility of one person. A school's ability to provide effective support will depend to an appreciable extent on working co-operatively with other agencies. Partnership working between school staff, healthcare professionals

(and, where appropriate, social care professionals), local authorities, and parents and pupils will be critical. An essential requirement for any policy therefore will be to identify collaborative working arrangements between all those involved, showing how they will work in partnership to ensure that the needs of pupils with medical conditions are met effectively.

The school reserves the right to refuse students admission to school if emergency medications are not provided.

Information on students' medical needs are recorded electronically on SIMS and on Operoo. Hard copies of care plans are kept in the Medical Centre for Senior School students or in medication boxes at the Junior School and are reviewed annually (or sooner if needs be). Information regarding severe allergies is displayed in the staff room and dining room. The School Nurse maintains and updates these records regularly in line with GDPR regulations. Parents are responsible for updating the School of any health changes.

In the Junior School, the Headteacher's secretary keeps an overall medical condition list and this information is passed to staff as appropriate.

Staff on school trips will also have access to all the medical details of the students on Operoo. The Nurses will provide the trip leader with specific emergency medication and care plans if appropriate.

Staff are made aware of students with medical needs or severe allergies at the start of the academic year and as appropriate thereafter. There is a list and photos of staff/students with severe allergies and other medical conditions in the Staff Room, the kitchen, and the Junior Staff Room. Operoo has up-to-date lists which staff are able to access.

Senior School

Parents/carers are required to complete a medical questionnaire and consent form for the administration of specific over the counter medicines during the school day. (Appendix 3)

Further consent is also obtained for the administration of specific over the counter medicines while on residential school trips. Medication can only be administered if written consent has been obtained from a parent or carer.

Junior School

Parents are required to complete a medical questionnaire. A consent form for the administration of specific over the counter medicines or specific medicines during the school day can be filled in when needed. The form is located at the office and parents speak with staff to handover the child.

Further consent is also obtained for the administration of specific over the counter medicines while on residential school trips. Medication can be administered if verbal consent has been given by the parent over the phone.

It is the parents' responsibility to inform school of any changes in medical conditions and other information. This can be done via Operoo. The School has purchased spare Adrenaline auto injectors (AAI), EPIPEN/EMERADE without a prescription. These are for emergency use in children who are at risk of anaphylaxis but their own device is not available or not working (e.g. because it is broken, or out of date).

This is in line with current ['Guidance on the use of adrenaline auto-injectors in schools'. Department of Health 2017.](#)

The School's spare AAI should only be used on pupils known to be at risk of anaphylaxis, for whom both medical authorisation and written parental consent for use of the spare AAI has been provided. The school's spare AAI can be administered to a pupil whose own prescribed AAI cannot be administered correctly without delay.

Treatment books

There is a daily treatment book in the Medical Centre where the medical staff record the brief details of all treatments given to students, staff and others. The School Nurse will also keep additional records on CPOMS in line with Nursing and Midwifery Council (NMC) guidelines.

In the Junior School, administration of medicines is recorded in folders and any First Aid treatments are recorded on accident forms.

Administration of medicines policy, codes of practice and medicine protocols

Aims

- To ensure the appropriate and safe administration of medication to students while at school;
- To ensure the safe storage of all medication;
- To ensure that all medication administered is recorded correctly.

Medication brought into School

Medication should only be brought into school by students if absolutely necessary and in all cases the School Nurse should be informed. Students should not carry any medication (with the exception of prescribed emergency medication such as epipens, insulin and inhalers) in their school bags, for the safety of others as well as themselves.

All medication for Senior School students should be taken to the nurses or the Junior School office at the start of the day and administered in the Medical Room/Junior servery. Prescription medicines should not be administered unless prescribed by a doctor/dentist/nurse/pharmacist.

A parent/carer should provide full written consent and details of any prescribed medication to be administered during the school day. This includes all regular and occasional medication.

All medication should be supplied in its original packaging with the original pharmacy label and with full instructions included.

Prescribed medication should only be given to the person for whom it has been prescribed.

Any medication no longer required or out-of-date will be taken to a local pharmacy by the School Nurse for disposal.

Students receive a medication recording slip to document timings and dosage, in order to prevent overdosing and to enhance home/school communication. In the Junior School, it is recorded in the medicine folder and countersigned.

Consent for the Administration of Medicines

Senior School parents/carers are required to complete a consent form for the administration of specific over the counter medicines during the school day. (Appendix 2) Junior School parents fill out a form when needed which is valid for specified dates.

Further consent is also obtained for the administration of specific over the counter medicines while on residential school trips. (Appendix 3 for the Senior School, Operoo bespoke forms for the Junior School)

Medication can only be administered if written consent has been obtained from a parent or carer.

Junior School - Where a KS2 pupil requires simple medication, e.g. paracetamol, the School will seek permission by telephone. All permissions will be held on file throughout the pupil's time at the School.

Storage of Medicines

All medicines are clearly marked and kept in a locked cupboard in the medical room or Junior School servery. The key is held by the School Nurse and Melissa Stimson (Assistant Head) and spare keys are held by Hafwen Randle (Executive Assistant to the Head) and Reception. The Junior School store the key in the servery.

There is a designated fridge available in the Medical Room or the Junior School staff room for any medication that needs to be stored in a refrigerator on a short-term basis i.e. during the school day. The fridge temperature is checked on a daily basis.

Medication is checked monthly to ensure it has not exceeded its expiry date.

Controlled Drugs

All drugs currently listed under the Misuse of Drugs Act and the Misuse of Drugs regulations should be stored in a Controlled Drugs cabinet and all details including the name of the student, the strength and number of tablets stored, expiry date and batch number should be documented in the Controlled Drugs Record Book. A list of all controlled drugs listed under the Misuse of Drugs legislation is held in the Medical Room. All controlled drugs must be stored in a locked cupboard within a locked cupboard and the key will only be held by the School Nurse and the First Aider.

Access to medication

All medication is stored in the Medical Room and is administered by the School Nurse, the First Aider or a member of SMT if the nurse is absent. Medication is always administered in the Medical Room and is never allowed to be taken away for later administration.

In the Junior School medication is stored in a locked cupboard in the servery. Office or support staff usually administer the medication but classteachers may do so as well. A second member of staff witnesses the administration of the medicine and countersigns.

All students with asthma should carry their prescribed inhaler with them at all times. Families may provide a spare inhaler which should be kept in the Medical Room and will be stored in an unlocked, clearly labelled, cupboard in case it is required in an emergency. These are prescribed medications and as such can only be administered to those for whom they have been prescribed. Emergency Sabutanol inhalers are kept by school for students whose parents have provided written consent.

All students with severe allergies who are prescribed an adrenaline auto-injector should carry their EpiPen with them at all times plus a spare one is kept in the Medical Room and will be stored in an unlocked, clearly labelled cupboard in case it is required in an emergency. These are prescribed medications and as such can only be administered to those for whom they have been prescribed.

Any person administering medication must read this policy and individual medicine protocols before administering any medication.

The School has purchased spare Adrenaline auto injectors (AAI), without a prescription. These will be for emergency use in children who are at risk of anaphylaxis but their own device is not available or not working (e.g. because it is broken, or out of date).

This is in line with current ['Guidance on the use of adrenaline auto-injectors in schools'. Department of Health 2017.](#)

The School's spare AAI should only be used on pupils known to be at risk of anaphylaxis, for whom both medical authorisation and written parental consent for use of the spare AAI has been provided.

The school's spare AAI can be administered to a pupil whose own prescribed AAI cannot be administered correctly without delay.

Administration of medicines on school trips and sporting fixtures

For all residential school trips, parents are asked to provide written consent for the administration of over the counter medicines by the trip leader/person in charge of first aid on the trip. Additionally, Staff taking responsibility for medication while on a school trip must ensure they are familiar with the side effects and contraindications of all drugs they are being asked to administer. Staff are not obliged to give medication and can refuse if for any reason they are not happy to do so.

Any medication provided for a school trip must be kept by the trip leader/person in charge of the trip. It must be in the original packaging and be labelled clearly with the name of the student, dose and frequency of the medication. The student should then see the relevant person at the appropriate time for medication to be administered.

If a student is injured or becomes unwell during a school sporting fixture. PE staff can carry a small supply of Paracetamol and Ibuprofen. It remains the staff members responsibility to keep medication secure and away from children at all times and to only administer medication following school policy. This includes checking the student has consent for medication, documenting and informing the School Nurse if medication is dispensed during a fixture. All PE staff on sporting fixtures are given a copy of Appendix 1 with details on how to administer medication.

For the Junior School, verbal phone permission would be sought in this circumstance.

Medication must be administered as per the protocol below and must be documented on the relevant form. All medicines must be returned to the School Nurse on return.

Protocol for the administration of Paracetamol

To be read in conjunction with administration of medicines policy

Use –

To provide pain relief and to reduce a high temperature.

Paracetamol should be the first line choice of medication.

Before giving paracetamol –

Check that written consent has been obtained and the student has not had any other medication.

Dosage -

Paracetamol is stocked in 2 types –

Tablets – 500mg per tablet

Suspension – 250mgs in 5mls

Child 6-8 years - 240-250mg

Child 8-10 years - 360-375mg

Age 10 -12 years - 500mgs (1 tablet or 2x 5ml spoons)

Age 12 -16 years - 500mgs - 750mgs (1 – 1 ½ tablets or 2 - 3 x 5 ml spoons)

Age 16+ 500mgs - 1000mgs (1 - 2 tablets or 2 - 4 x 5ml spoons)

Can repeat after **4 hours** but must not have more than **4 doses in 24 hours**.

Cautions/Notes

Do not give to anyone with a known allergy to paracetamol.

Not to be taken with any other medicine that contains paracetamol (particularly cold/flu relief medications)

Do not give for more than 3 days without consulting a doctor.

Protocol for the administration of Ibuprofen

To be read in conjunction with administration of medicines policy

Use –

To provide pain relief and to reduce a high temperature.

It should be a secondary choice after paracetamol.

Can be used in addition to paracetamol if necessary.

Before giving –

Check that the student is not asthmatic or has had kidney problems in the past.

Check that written consent has been obtained and the student has not had any other medication.

Dosage –

Ibuprofen is stocked in 2 types

Tablets – 200mgs per tablet

Suspension – 100mgs in 5mls

Age 7– 12 years 200mgs (1 tablet or 10 mls suspension)

Age 12+ 200mgs – 400mgs (1-2 tablets 10-20 mls suspension)

Can repeat after **4 hours** but no more than **3 doses in 24 hours**.

Cautions/Notes

Must not be given to asthmatics.

Must not be given to students who have previously had kidney problems.

Must be given with or after food.

Must not be given to anyone who is sensitive to non-steroidal anti-inflammatory medicines.

Do not give with other non-steroidal anti-inflammatory medicines e.g mefenamic acid

Protocol for the administration of oral antihistamine tablets

To be read in conjunction with administration of medicines policy. In all cases check that consent has been given.

Cetirizine hydrochloride

Use – relief of symptoms of allergies. Should be used in preference to Piriton during the school day.

Stocked as 10 mg tablets and 5mg/5ml Suspension

Dosage

Age 6-12 years – half a tablet (5 mgs) twice a day or 1 tablet (10mgs) once a day (5mls twice per day or 10mls once per day)

Age 12+ - one tablet (10mgs) once a day

Cautions/Notes

Not to be given to anyone who has previously had a reaction to cetirizine hydrochloride.

Chlorphenamine Meleate

Use – Relief of symptoms of allergies and insect bites

Stocked as tablets – 4mgs per tablet and Syrup 2mgs in 5mls

Dosage

Age 6-12 years – 2mgs (½ tablet or 5mls syrup)

Age 12+ – 4mgs (1 tablet or 2x 5mls syrup)

Can be given every 4 - 6 hours. Do not give more than 6 doses in 24 hours.

Cautions/Notes

Can cause drowsiness. Is best used at night. Cetirizine is a better alternative for use during the day.

Do not give if student has taken any other antihistamine or medications containing antihistamines including some products for coughs and colds.

Syrup contains sugar so use with caution in diabetics.

Do not give to students suffering from epilepsy.

Other medication stocked

Indigestion Preparations (such as Rennie, Gaviscon)

Use – For treatment of indigestion/epigastric discomfort/heartburn

Dose – As per instructions on packaging (different brands may vary)

Cautions – Not to be used if has history of kidney problems.

Olbas Oil

Use – Relief from colds and blocked noses

Dose – Olbas Oil – 1-2 drops on a tissue

Cautions – Avoid contact with eyes. Do not ingest

Burn Gel

Use – First Aid treatment of minor burns and scalds.

Dose – 1 sachet applied to burn (after appropriate first aid).

Cautions – Do not use on broken skin

Anthisan Cream

Use – Topical treatment of bites/stings

Dose – apply generously to affected area

Cautions – Do not use on broken skin

E45 Cream

Use – To treat dry skin

Dose – apply generously to affected area

Cautions – Do not use on broken skin

Throat Lozenges

Jakemans/Halls Soothers/Strepsils Throat Lozenges (and other brands)

Use – to relieve sore throats/tickly coughs

Dose – Suck one every 2-3 hours. No more than 12 in 24 hours. Encourage to drink plenty of water-based fluids.

Caution – Choking hazard

Appendix 1 – document to be given to all PE staff for sporting fixtures

Administration of medicines on school sporting fixtures

For all residential school trips and sporting fixtures, parents are asked to provide written consent for the administration of over the counter medicines by the trip leader/person in charge of first aid on the trip.

Additionally, staff taking responsibility for medication while on a school trip must ensure they are familiar with the side effects and contraindications of all drugs they are being asked to administer. Staff are not obliged to give medication and can refuse if for any reason they are not happy to do so. Any medication provided for a school trip must be kept by the trip leader/person in charge of the trip. It must be in the original packaging and be labelled clearly with the name of the student, dose and frequency of the medication. The student should then see the relevant person at the appropriate time for medication to be administered. Any medication given must be documented and School Nurses informed.

If a student is injured or becomes unwell during a school sporting fixture. PE staff can carry a small supply of Paracetamol and Ibuprofen. It remains the staff members responsibility to keep medication secure and away from children at all times and to only administer medication following school policy. This includes checking the student has consent for medication, documenting and informing the School Nurse if medication is dispensed during a fixture.

Protocol for the administration of Paracetamol

To be read in conjunction with administration of medicines policy

Use - To provide pain relief and to reduce a high temperature. Paracetamol should be the first line choice of medication. Before giving paracetamol check that written consent has been obtained and the student has not had any other medication.

Tablets – 500mg per tablet Age 10 -12 years - 500mgs (1 tablet)

Age 12 -16 years - 500mgs - 750mgs (1 – 1 ½ tablets)

Age 16+ 500mgs - 1000mgs (1 - 2 tablets)

Can repeat after 4 hours but must not have more than 4 doses in 24 hours.

Protocol for the administration of Ibuprofen

To be read in conjunction with the Health and Medical Centre policy

Use – To provide pain relief and to reduce a high temperature. It should be a secondary choice after paracetamol. Can be used in addition to paracetamol if necessary. Before giving ibuprofen check that the student is not asthmatic or has had kidney problems in the past. Check that written consent has been obtained and the student has not had any other medication.

Dosage – Ibuprofen Tablets – 200mgs per tablet

Age 7 – 12 years 200mgs (1 tablet)

Age 12 + 200mgs – 400mgs (1-2 tablets)

Can repeat after 4-6 hours but **no more than 3 doses in 24 hours.**

Appendix 2 - Medical room information for parents and carers

MEDICAL ROOM

Medical Room Information for Parent/Guardian

Name:	Date:	
Illness/Injury:		
Treatment:		
Medication:	Dose:	Time:
Advice:		
<i>Return to the Medical room if you feel unwell.</i>		
School Nurse:		
Signature:		

Medical Room Phone: 0117 9898295

Email: schoolnurse@redmaidshigh.co.uk

Head Injury Information

Name:	Date:	
Injury Information:		
Treatment:		
Medication:	Dose:	Time:
<p>You are advised to seek immediate medical advice if any of the following occur or you have any other concerns. Symptoms can develop after a head injury.</p> <p>https://www.nhs.uk/conditions/minor-head-injury/</p> <ul style="list-style-type: none">• Fluid from ears or nose• Blurred or double vision• Generalised worsening headache• Persistent vomiting (more than 2-3 times)• Persistent dizziness or unsteadiness• Confusion or irritability• Drowsiness or inability to rouse		
Nurse:	Signature:	

Medical Room Phone: 0117 9898295

Email: schoolnurse@redmaidshigh.co.uk

Appendix 3 – Admission medical information form

Redmaids' High School Medical Information



REDMAIDS'
HIGH SCHOOL
FOR GIRLS | BRISTOL

Details of student

Forenames	<input type="text"/>	Preferred name (if different)	<input type="text"/>
Surname	<input type="text"/>	Date of birth	<input type="text"/>
Year group	<input type="text"/>		

Consent

I give consent for the School Nurse / First Aider (or member of school staff supervising a visit outside school) to administer treatments for minor illness / first aid for my daughter or to arrange for necessary hospital assessment / treatment.

I give consent for the following to be administered when required:

- Analgesics (Paracetamol and Ibuprofen)
- Indigestion preparations (Gaviscon, Rennie or similar)
- Antihistamine
- Throat sweets

On occasion, we may offer students warm drinks (hot chocolate / tea) and snacks such as fruit and biscuits if required. Please let us know if you would prefer us not to offer these to your daughter.

Medical History

Has your daughter been diagnosed with:

- Asthma
- Diabetes
- Epilepsy

If yes to any of the above please provide full information. If there are any other medical conditions / illnesses, we need to be aware of:

Asthma

If your daughter is prescribed an inhaler she **MUST** carry one with her during all school activities including sport and school trips.

Her current medication / frequency is:

I confirm my daughter has Asthma. In case of an emergency I consent to the school administering a school emergency Salbutamol inhaler (please sign)

admissions@redmaidshigh.co.uk

redmaidshigh.co.uk

Allergies

Please give full details including treatment if you daughter has any allergies.

If your daughter is prescribed an Epipen / other emergency allergy medication, she **MUST** carry one with her for all school activities including sport and trips. Please provide spare Epipen / medication to be kept in the medical room. An Allergy Action Plan will need to be completed prior to your daughter starting at the School.

Other

Does your daughter have any mental health requirements / needs?

If yes, please provide details:

Does your daughter have any special dietary requirements?

If yes, please provide details:

Does your daughter have any problems with speech, vision or hearing?

If yes, please provide details:

Can your daughter undertake normal physical activities?

Any other relevant information, which you consider useful or which may affect your daughter's ability to, fully access the education provided by Redmaids' High School:

Your name in full Relationship to student

Date

If we feel an individual care plan is needed we will contact you to arrange this. It is school policy (with the exception of emergency Epipens / inhalers etc) for all medication to be stored in the medical room. Please ensure all medication brought into school is in the original packaging and prescribed to your daughter.

If your daughter's health / wellbeing changes please contact us as soon as possible - Ceren Brett and Roz Watson, School Nurses. Email schoolnurse@redmaidshigh.co.uk or phone 0117 989 8295

admissions@redmaidshigh.co.uk redmaidshigh.co.uk

Melissa Stimson/Lisa Brown/Gilly Rowcliffe Summer term 2023

Review date summer term 2024