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**UPPER SCHOOL MEDICAL POLICIES**

These policies set out instructions for the safe and appropriate administration of medication to pupils with medical needs within the school and state guidelines for some regular health issues encountered within the school. Parents must complete a medical form for each child, which will confirm you have read and agree with the school medical policies.

The school nurses, Louise MacGregor and Jenny Sinclair, are in overall charge of the medical provision at school.

**Administration of Medication (prescribed and non-prescribed)**

Most children will at some time have short-term medical needs, perhaps entailing finishing a course of medicine such as antibiotics. Some children may have longer term medical needs and may require medicines on a long-term basis to keep them well, for example a child with diabetes. Other children may require medicines in particular circumstances, for example a child with severe allergies or asthma.

When parents request that their child is to be given medication,during the school day, or during activities out with the school premises, the following process is to be adhered to:

* The School Nurse, houseparent or Mrs Taylor are to be satisfied that it is either necessary or desirable that the medication is administered.
* All medicines must be delivered to and collected from the School Nurse, houseparent or Mrs Taylor by parent/carers.
* All medication is to be handed over in its original container, with the child’s details clearly marked thereon.
* On receipt of the medicine the School Nurse, houseparent or Mrs Taylor should check that the medication is clearly labelled with the following:
* the child’s name.
* the medicine name; dosage required; how often the medicine is to be given and for how long.
* expiry date of medication.
* storage instructions.
* A consent form must be filled in for that specific medication (this is valid for the duration of the injury/illness). **The consent form can be downloaded from the iSams Parent App.**
* The School Nurse, houseparent or Mrs Taylor is to ensure that an accurate record is kept of all medication brought in from home.
* All medication is to be recorded in the medication file held in the Upper School Surgery.
* All medicines will be administered by the School Nurse, trained boarding staff or Mrs Taylor, unless otherwise stated.
* Children who self-medicate will be supervised by the School Nurse, trained boarding staff or Mrs Taylor, unless other arrangements have been made by the School Nurse or the Head Teacher.
* Where a child refuses to take medicine, they should not be forced to do so. The School Nurse and parents will be contacted immediately.

If the above is not done, the medication **WILL NOT** be given to the child.

* **No paracetamol will be administered to a child before 1130am, unless parents confirm they have had none prior to coming to school. Please always let the School Nurse know if your child has had any paracetamol before school (time and dosage given).**

**ASPIRIN should never be given to a child under 12. Please seek advice from School Nurse if parent is insistent.**

**IBUPROFEN is not to be given to children with ASTHMA, unless authorised by a prescribing medical professional. The school does not hold this medication. If a parent requests that ibuprofen be administered they are required to provide the medication for their child and complete a consent form for it to be administered.**

**Storage of Medication**

* The School Nurse is responsible for the safe storage of all medicines.
* All medicines are kept under lock and key in the School Surgery.
* Asthma inhalers and adrenaline auto-injectors are readily available to pupils and are kept in a safe place in the Medical Room.
* If any medicine needs to be refrigerated it will be stored in a sealed and labelled container in the Surgery refrigerator.

**Renewal and disposal of supplies**

* All named out of date medication to be returned to the parent for disposal.
* All named medication should be returned to the parent at the end of the Summer Term.
* School held non-prescribed medication will be checked monthly by School Nurse.

**In the event of a drug error, staff should**:

* Stay calm.
* Check all the information again to be clear on what the error is.
* Report the error to the nurse and/or the headmaster.
* Ask the nurse, if not already present, to check on the child.
* Contact the child’s parent/carer to inform them of the error and agree next steps.
* Arrange for advice to be sought from the child’s GP- parents to do.
* Document the error on iSams.
* Complete an incident report.

If at any point after the medication has been administered the child starts to show signs of being unwell, staff should call 111 for immediate advice and support.

If the child loses consciousness, experiences difficulties breathing, or shows any other signs of serious illness staff should call 999.

**Vomiting and Diarrhoea Policy**

If your child has **ANY** vomiting or diarrhoea, the current advice from health authorities across the UK is that children **should** be kept off school for a period of 48 hours following the **last** episode.

This rule needs to be enforced in order to avoid the spread of infectious disease and its impact on the school community. Please be aware that if a child becomes ill during the school day, they will need to be collected as we do not have the facilities or staff availability to keep them away from other children for an extended period.

I have included below, a link to the NHS Infection Control document (applies to all child care facilities):

<https://hpspubsrepo.blob.core.windows.net/hps-website/nss/2448/documents/1_infection-prevention-control-childcare-2018-05.pdf>

**Head Lice Advice**

This is the current advice from the Scottish Government regarding the detection and treatment of head lice:

<https://www.gov.scot/publications/national-guidance-managing-head-lice-infection-children/pages/1/>

Detection

This guidance advises that parents check their children using the ‘wet comb’ on a weekly basis. If head lice are found, all other family members should be checked and, if necessary, treated. Checks should be continued following treatment to ensure that it has been effective and to detect any re-infection.

Treatment

Once infection is detected, there are two treatment approaches. One option is the use of insecticide lotions and an alternative is removal by wet combing, sometimes called 'bug busting'. Both methods require continued combing to remove any unhatched eggs.

I have also attached the NHS Scotland leaflet ‘Head Lice- Information for Parents’:

<http://www.healthscotland.com/uploads/documents/25-Head%20Lice-Dec2016-English.pdf>

**As per the school handbook, please make sure that girls have their hair tied back with a red or navy hair tie and that boys’ hair is off the collar and trimmed so that is does not flop into their eyes.**

Off games

If your child needs to be off games, please inform the school nurse and the form teacher. Please include the reason you wish for them to be off games.

Head injuries (see separate guideline for treatment of concussion)

If your child has a head injury, they will be assessed wither by the coach/teacher with them and if they are concerned, they will call the school nurse for an assessment. If your child has any urgent symptoms\*, we would require them to be assessed in hospital. If they had any mild symptoms\*, we would suggest they stay off games for 24-48 hours and re-assess them, before recommencing games.

\*Please see the ‘Concussion Guideline’ for further information.

**L. MacGregor - School Nurse – May 2023**