



# **First Aid & Administration of Medication Policy**

**August 2024**

(Next review date August 2025)

## **Safeguarding Statement:**

SupaJam is a post-16 specialist provider, specialising in Music, Maths, English and Life Skills. All staff, volunteers and partners are committed to safeguarding the welfare of every person within SupaJam. Our mission is to help young people to engage and achieve within a safe and inclusive environment.

### **1. Statement of Intent**

SupaJam believes that ensuring the health, safety and welfare of staff, students and visitors is essential to the success of the trust.

We are committed to:

- Complete first aid needs risk assessments for every significant activity carried out
- Providing adequate provisions for first aid for students, staff and visitors
- Ensuring that students and staff with medical needs are fully supported at SupaJam and suitable records of assistance required and provided are kept.
- First-aid materials, equipment and facilities are available, according to the findings of the risk assessment.
- Procedures for administering medicines and providing first aid are in place and are reviewed regularly
- Promoting an open culture around mental health by increasing awareness, challenging stigma, and providing mental health tools and support.

We will ensure all staff (including supply staff) are aware of this policy and that sufficient trained staff are available to implement the policy and deliver against all individual healthcare plans, including contingency and emergency situations.

We will also make sure that SupaJam is appropriately insured, and that staff are aware they are insured to support students in this way.

In the event of illness, a staff member will accompany the student to the college's office. In order to manage their medical condition effectively, the college will not prevent students from eating, drinking or taking breaks whenever they need to.

SupaJam also has a Control of Infections Policy which may also be relevant, and all staff should be aware of it.

This policy has safety as its highest priority: safety for the students and staff receiving first aid or medicines and safety for the adults who administer them.

This policy applies to all relevant SupaJam activities and is written in compliance with all current UK health and safety legislation and has been consulted with staff and their safety representatives.

### **2. Roles and Responsibilities**

#### **2.1 Base Leaders**

- The Base Leaders have ultimate responsibility for health and safety matters - including first aid in SupaJam

- Ensure the first aid risk assessment and provisions are reviewed annually and/or after any operational changes, to ensure that the provisions remain appropriate for the activities undertaken and carry out an assessment of first aid needs appropriate to the circumstances of the workplace.
- Provide first aid materials, equipment and facilities according to the findings of the risk assessment.
- To carry out a first aid needs assessment for the college site, review annually and/or after any significant changes.
- Ensuring that an appropriate number of appointed persons and/or trained first aid personnel are always present in the college and that their names are prominently displayed throughout the college.
- Ensuring that first aiders have appropriate qualifications, keep training up to date and remain competent to perform their role.
- Ensuring all staff are aware of first aid procedures.
- Ensuring appropriate risk assessments are completed and appropriate measures are put in place.
- Undertaking, or ensuring that managers undertake, risk assessments, as appropriate, and that appropriate measures are put in place.
- Ensuring that adequate space is available for catering to the medical needs of students.
- Reporting specified incidents to the Health and Safety Executive (HSE), when necessary.
- Ensure that students with medical conditions are identified and properly supported in the college, including supporting staff in implementing a student's Healthcare Plan.
- Work with the Base Leader to determine the training needs of college staff.
- Administer first aid and medicines in line with current training and the requirements of this policy.
- Periodically check the contents of each first aid box and any associated first aid equipment (e.g. Defibrillators) and ensure these meet the minimum requirements, quantity and use by dates and arrange for replacement of any first aid supplies or equipment which has been used or is out of date.
- Assist with completing accident report forms and investigations.
- Ensure, when going on leave, continual cover is provided during the absence.

## **2.2 Appointed person(s) and first aiders:**

- The appointed persons are responsible for:
  - a) taking charge when someone is injured or becomes ill
  - b) Ensuring there is an adequate supply of medical materials in first aid kits, and replenishing the contents of the kits
  - c) Ensuring that an ambulance or other professional medical help is summoned, when appropriate
  
- First aiders are trained and qualified to carry out the role and are responsible for:
  - a) Acting as first responders to any incidents; they will assess the situation where there is an injured or ill person and provide immediate and appropriate treatment.
  - b) Liaising with the Base Leader sending the student home to recover, where necessary.
  - c) Filling an accident report on the same day, or as soon as is reasonably practicable, after an incident.
  - d) Keeping their contact details up to date.

### **2.3 Mental Health First Aider**

- The appointed persons are responsible for:
  - a) Provide mental health first aid as needed, at their level of competence and training
  - b) Providing help to prevent mental health issues from becoming more serious before professional help can be accessed
  - c) Promoting the recovery of good mental health
  - d) Providing comfort to an individual with a mental health issue
  - e) Act as an advocate for mental health in the workplace, helping reduce stigmas and enact positive change
  - f) Escalate and document any matters if required within a suitable timeframe.
  - g) Ensure they maintain confidentiality as appropriate
  - h) Be carried away from their normal duties at short notice
  - i) Listen non-judgementally

### **2.4 Staff training to administer medicines**

- Members of staff in the college who have been trained to administer medicines must ensure that:
  - a) only prescribed medicines are administered and the trained member of staff is aware of the written parental permission outlining the type of medicine, dosage and the time the medicine needs to be given.
  - b) Wherever possible, the student will administer their own medicine, under the supervision of a trained member of staff. In cases where this is not possible the trained member of staff will administer the medicine.
  - c) If a student refuses to take their medication, staff will accept their decision and inform parents accordingly (for those under 18 years of age).
  - d) Records are kept of any medication.

### **2.5 Other staff**

- Ensuring they follow first aid procedures
  
- Ensuring they know who are the first aiders in the college and contact them straight away.

- Completing accident reports for all incidents they attend to where a first aider is not called.
- Informing the Base Leader or their manager of any specific health conditions or first aid needs.

### 3. Arrangements

#### 3.1 First Aid Boxes

- The first aid boxes are located in each classroom across the three buildings
- The first aid post is located in reception.

#### 3.2 Medication

- Student's medication is stored in the college office
- Controlled medication is stored in the base leader's office

#### 3.3 First Aid Needs Risk Assessment

- The college will ensure a first aid needs risk assessment is completed to establish if there are adequate and appropriate first aid provisions in place.
- The college will ensure this assessment is reviewed when significant changes occur.
- A sufficient number of staff will be trained in First Aid At Work and/or Emergency First Aid At Work as per the outcome of the first aid risk assessment. Refresher training will be provided as required.
- A sufficient number of staff will receive specialist training as identified with the first aid needs risk assessment or as required within students' individual health care plans.

#### 3.4 First Aid Provision

- In the case of a student accident, the procedures are as follows:
  - a) The member of staff on duty calls for a first aider; or if the student can walk, takes him/her to the closest quiet room or the college's reception area.
  - b) The first aider administers first aid and records details in our treatment book.
  - c) If the student has had a bumped head, staff must follow the bumped head policy, making staff and parents aware.
  - d) Full details of the accident are recorded in the accident book
  - e) If the student has to be taken to hospital or the injury is 'work-related' then the accident is reported
  - f) If the incident is reportable under RIDDOR (Reporting of Injuries, Diseases & Dangerous Occurrences Regulations 2013), then as the employer the CEOs will arrange for this to be done.

#### 3.5 Educational Visits

- In case of a **residential visit**, the residential first aider. Reports will be completed in accordance with procedures at the Residential Centre.
- In the case of **day visits** a trained First Aider will carry a travel kit in case of need.

### **3.6 Administering Medicines**

- **Prescribed medicines** may be administered in college (by a member of staff appropriately trained) where it is deemed essential. Most prescribed medicines can be taken outside of normal college hours. Wherever possible, the student will administer their own medicine, under the supervision of a member of staff. In cases where this is not possible, the staff member will administer the medicine.
- If a student refuses to take their medication, staff will accept their decision and inform the parents accordingly (where the student is under 18 years of age).
- In all cases, we must have parental written permission outlining the type of medication, dosage, and time the medication needs to be given. These forms are available in the college office (Appendix).
- The Administrator/Base Leader will include on the student's care plan what medicines will need to be taken and at what time and location. Both the student and named persons will agree on this plan (for those under 18 a copy will be sent to parents/guardians to sign). Records will be held confidentially within the department.
- A medicine sheet for each student will be kept in the medicines folder for accurate record keeping of the staff involved, date, time and signature.
- Two members of staff will observe and sign the records. If one or more of the named persons is absent, the Administrator or the Safeguarding Lead will contact another member of staff to ensure medicines are administered and recorded appropriately.
- Staff will ensure that records are kept of any medication given.

### **3.7 Storage and Disposal of Medicines**

- Wherever possible, the students will be allowed to carry their own medicines/relevant devices or will be able to access their medicines in the college office for self-medication, quickly and easily. Students' medicines will not be locked away out of student access; this is especially important on college trips. It is the responsibility of the college to return medicines that are no longer required, to the parent for safe disposal.
- Asthma inhalers/EpiPens will be held by the college for emergency use as per the Department for Health's protocol.
- When medication is no longer required, suitable disposal is arranged, or medication will be collected by parents.

### **3.8 Accidents/illnesses requiring Hospital Treatment**

- If a student has an incident, which requires urgent or non-urgent hospital treatment, the college will be responsible for calling an ambulance in order for the student to receive treatment. When an ambulance has been arranged, a staff member will stay with the student until the parent arrives, or accompany the student to be taken to the hospital by ambulance if required. Where

students are over the age of 18, they will be given the option to travel alone.

- Parents will then be informed, and arrangements made regarding where they should meet their child. It is vital, therefore, that parents provide the college with up-to-date contact names and telephone numbers.

### **3.9 Allergies**

- Allergy is the response of the body's immune system to normally harmless substances, such as foods, pollen and house dust mites. Whilst these substances (allergens) may not cause any problems in most people, in allergic individuals their immune system identifies them as a 'threat' and produces an inappropriate response. This can be relatively minor, such as localised itching, but it can be much more severe causing anaphylaxis which can lead to upper respiratory obstruction and collapse. Common triggers are nuts and other foods, venom (bee and wasp stings), drugs, latex and hair dye. Symptoms often appear quickly and the 'first line' emergency treatment for anaphylaxis is adrenaline which is administered with an Adrenaline Auto-Injector (AAI).
- Arrangements are in place for whole-school awareness training on allergies.
- Allergy awareness is covered in depth in the Allergy Awareness Policy that supports this First Aid & Administration of Medicines policy.

### **3.10 Bump to Head, Injury & Concussion**

- A bump to the head is common. If a student is asymptomatic i.e. there is no bruising, swelling, abrasion, mark of any kind, dizziness, headache, confusion, nausea or vomiting and the student appears well, then the incident will be treated as a 'bump' rather than a head injury.
- Please note, some students are more prone to severe head injuries than others. In the event of a student having had the following:
  - a) Brain surgery in the past
  - b) A blood clotting disorder
- Always follow the serious head injury protocol in the event of a bump to the head.
- Bump-to-head protocol:
  - a) Student to be assessed by first aider using head injury checklist (see Appendix B)
  - b) First aider to observe for a minimum of 15 minutes. If the student begins to display head injury symptoms they will require further assessment, if no change during observation then the student can return to normal lessons
  - c) First Aider to email all staff: 'Head Bump Alert – Name of Student: please be aware that this student has suffered a bump to the head today. They have been monitored and assessed to be fit to remain in college. Please be alert to any changes in their condition and notify the Base Leader as quickly as possible if you have any concerns.'
  - d) Member of staff to record the episode in the accident book, and to complete the incident/accident forms found in the Health and Safety Policy

- e) A phone call/email is to be made to parents/carers to inform them of the incident
  - f) Head Injury advice sheet (Appendix C) to be given to the student.
- A minor head injury will often cause lumps or bruises on the exterior of the head. Symptoms include:
    - nausea,
    - mild headache,
    - tender bruising or mild swelling of the scalp
    - mild dizziness
  - Minor Head Injury Protocol:
    - a) Student to be assessed by a First Aider using the Head Injury Checklist (Appendix B)
    - b) Contact parent to notify of head injury and communicate plan of action
    - c) Observation – Complete observation checklist and repeat every 15 minutes until the student feels better or is collected by a parent/carer. If the student’s symptoms subside they may return to class.
    - d) Parent informed by Arbor requesting they read an attached head injury advice letter (Appendix C)
    - e) Head Injury advice sheet (Appendix C) to be given to student
    - f) First Aider to email all staff: ‘Head Bump Alert – Name of Student: please be aware that this student has suffered a bump to the head today. They have been monitored and assessed to be fit to remain in college. Please be alert to any changes in their condition and notify the Base Leader as quickly as possible if you have any concerns’
    - g) SupaJam staff to record the episode in the accident book and CPOMS including how the injury occurred, and to complete the incident/accident forms found in the Health and Safety Policy If, at any point, the student’s condition deteriorates and shows any of the symptoms of a severe head injury, follow the protocol in the severe head injury section.
  - A severe head injury will usually be indicated by one or more of the following symptoms:
    - Unconsciousness briefly or longer
    - Difficulty in staying awake
    - Seizure
    - Slurred speech
    - Visual problems including blurred or double vision
    - Difficulty in understanding what people are saying/disoriented
    - Confusion (rule out signs of confusion by asking them the date, where they are, what tutor group they are in)
    - Balance problems
    - Loss of power in arms/legs/feet
    - Pins & needles



- Amnesia
  - Leakage of clear fluid from nose or ears
  - Bruising around eyes/behind ears
  - Vomiting repeatedly
  - Neck pain
- Minor Head Injury Protocol:
    - a) If unconscious, you should suspect a neck injury and must not move the student
    - b) CALL 999 FOR AN AMBULANCE
    - c) Notify the parent/guardian as quickly as possible (call all telephone numbers and leave a message). Repeat every hour until contact has been made
    - d) If the ambulance service assess the student over the phone and determine that no ambulance is required, student is to be sent home
    - e) Parent informed via Arbor requesting they read an attached head injury advice sheet (Appendix C)
    - f) Head Injury advice sheet (Appendix C) to be given to student
    - g) SupaJam staff to record the episode in accident book and CPOMS, and to complete the incident/accident forms found in the Health and Safety Policy.
- Concussion (Post Concussion Syndrome) is the sudden but short-lived loss of mental function that occurs after a blow or other injury to the head. It is the most common but least serious type of brain injury and can occur up to 3 days after the initial injury.
  - The cumulative effects of having more than one concussion can be permanently damaging.
  - Concussion must be taken extremely seriously to safeguard the long-term welfare of the person.
  - Symptoms include:
    - Headaches
    - Dizziness
    - Feeling in a fog
    - May or may not have lost consciousness
    - Vacant expression
    - Vomiting
    - Unsteady on legs
    - Slow reactions
    - Inappropriate or abnormal emotions – irritability/nervous/anxious
    - Confused/disorientated
    - Loss of memory of events leading up to and after the concussion
  - If any of the above symptoms occur the student must be seen by a medical professional in A&E, minor injuries or the GP surgery. If a parent/guardian is not able to collect the student, call 999.

### **3.11 Defibrillators**

- Defibrillators are available within the college as part of the first aid equipment. First aiders are trained in the use of defibrillators.
- The local NHS ambulance service has been notified of its location.
- Procedures are in place to maintain the equipment in accordance with the manufacturer's recommendations.
- The equipment is regularly checked by the Base Leader or a person they have appointed.

### **3.12 Students with Special Medical Needs - Individual Health Care Plans**

- Some students have medical conditions that, if not properly managed, could limit their access to education. These students may be:
  - a) Epileptic
  - b) Asthmatic
  - c) Have severe allergies, which may result in anaphylactic shock
  - d) Diabetic

Such students are regarded as having medical needs. Most students with medical needs are able to attend college regularly and, with support from the college, can take part in most college activities, unless evidence from a clinician/GP states that this is not possible.

- The college will consider what reasonable adjustments they might make to enable children with medical needs to participate fully and safely on college visits. A risk assessment will be used to take into account of any steps needed to ensure that students with medical conditions are included.
- The college will not send students with medical needs home frequently or create unnecessary barriers to students participating in any aspect of college life. However, college staff may need to take extra care in supervising some activities to make sure that these students, and others, are not put at risk.
- An individual healthcare plan will help the college identify the necessary safety measures to support students with medical needs and ensure they are not put at risk. The college appreciates that students with the same medical condition do not necessarily require the same treatment.
- Parents/carers have prime responsibility for their child's health and should provide the college with information about their child's medical condition. Parents and the student if they are mature enough, should give details in conjunction with their child's GP. The Senior First Aider may also ask for additional background information and training to be provided for the college.
- When the college is notified of a student's medical condition, an Individual Healthcare Plan and a Risk Assessment will be put in place and shared with all relevant staff that work with the student. The Base Leader and/or Administrator will meet with the students involved and collate the appropriate paperwork and, if necessary, discuss it with other support teams.

- This will be in place in time for the start of the relevant term for a new student starting at the college or no longer than two weeks after a new diagnosis or in the case of a new student moving to the college mid-term.

### 3.13 Accident Recording and Reporting

- First aid and accident record book:
  - a) An accident form will be completed by the relevant member of staff on the same day or as soon as possible after an incident resulting in injury.
  - b) As much detail as possible should be supplied when completing the accident - which must be completed fully.
  - c) A copy of the accident form will also be added to the student's educational record by the relevant member of staff.
  - d) Records held in the first aid and accident book will be retained at the college for a minimum of 3 years, in accordance with regulation 25 of the Social Security (Claims and Payments) Regulations 1979, and then securely disposed of.
- Reporting to the HSE
  - a) The Base Leaders will keep a record of any accident which results in a reportable injury, disease, or dangerous occurrences as defined in the RIDDOR 2013 legislation (regulations 4, 5, 6 and 7).
  - b) The Base Leaders will report these to the Health and Safety Executive as soon as is reasonably practicable and in any event within 15 days of the incident. Reportable injuries or dangerous occurrences include:
    - Death
    - Specified injuries, which are:
      - Fractures, other than to fingers, thumbs and toes
      - Amputations
      - Any injury likely to lead to permanent loss of sight or reduction in sight
      - Any crush injury to the head or torso causing damage to the brain or internal organs
      - Serious burns (including scalding)
      - Any scalping requiring hospital treatment
      - Any loss of consciousness caused by head injury or asphyxia
      - Any other injury arising from working in an enclosed space which leads to hypothermia or heat-induced illness, or requires resuscitation or admittance to hospital for more than 24 hours
      - Injuries where an employee is away from work or unable to perform their normal work duties for more than 7 consecutive days (not including the day of the incident).
    - Where an accident leads to someone being taken to the hospital
    - Near-miss events that do not result in an injury, but could have been done. Examples of near-miss events include, but are not limited to:

- The collapse or failure of load-bearing parts of lifts and lifting equipment.
- The accidental release of a biological agent is likely to cause severe human illness.
- The accidental release or escape of any substance that may cause serious injury or damage to health.
- An electrical short circuit or overload causes a fire or explosion.

c) Information on how to make a RIDDOR report is available here: <http://www.hse.gov.uk/riddor/report.htm>

- **Notifying parents**

The first aider who has administered the first aid check will inform the parent/carer of any accident or injury sustained by the student, and any first aid treatment is given or if the student refused to have first aid assistance, on the same day.

- **Reporting to Ofsted and child protection agencies**

- a) Registered Early Year Providers will notify Ofsted of any serious accident, illness or injury to, or death of, a student while in their care. This will happen as soon as is reasonably practicable, and no later than 14 days after the incident.
- b) The Base Leaders will also notify the relevant Local Authority of any serious accident or injury to, or the death of, a student while in the college's care.

### **3.14 Mental Health First Aid**

- SupaJam is committed to ensuring mental health first aid is provided to staff. A mental health first aider's role in the school/academy is to act as the first point of contact for people with mental health issues, providing support and guidance to staff. The college's mental health first aiders will also advocate for mental health in the workplace, helping reduce stigmas and enact positive change.
- The college's mental health first aiders are here to support individuals who are struggling with mental health. They have been trained to actively listen without judgement and signpost staff to appropriate services where necessary.
- SupaJam recognises that respecting the privacy of information relating to individuals who have received mental first aid or may be experiencing a mental health problem or mental health crisis at work.
- All mental health first aiders and human resources representatives are obligated to treat all matters sensitively and privately in accordance with SupaJam's confidentiality policy.
- When a mental health first aider assesses there is a risk of harm to another individual, they must escalate the matter to HR/Line Manager who will advise on the next steps to be taken.
- All staff are encouraged to speak to a mental health first aider at any time should they feel they may be developing a mental health problem, experiencing a worsening of an existing mental health illness or experiencing a mental health crisis.

- If at any time a member of staff forms a belief that another colleague may be developing a mental health problem, suffering from a mental illness or experiencing a mental health crisis, they should contact a mental health first aider or HR/Line Manager.
- SupaJam ensures all staff have access to supporting information. Where necessary, staff should be encouraged to use the free confidential counselling service from Education Support Partnership - 0800 562561.

#### **4. Conclusions**

- This first aid and medicine policy reflects SupaJam's serious intent to accept its responsibilities in all matters relating to the management of first aid and the administration of medicines. The clear lines of responsibility and organisation describe the arrangements which are in place to implement all aspects of this policy.
- The storage, organisation, and administration of first aid and medicines provision is taken very seriously. SupaJam carries out regular reviews to check the systems in place see the objectives if this policy.

#### **Other Relevant Documents**

##### **Annexe:**

- Form 1: Request for the student to carry their prescription medication
- Form 2: Request for college to provide observation in self-administration of prescribed medication
- Form 3: Confirmation of the college's consent to provide observation of prescribed medication
- Form 4: Request for college to support with or administer prescribed medication
- Form 5: Confirmation of the college's agreement to support with or administer prescribed medication

**Form 1: Request for the student to carry their medication and/or keep spare/emergency medication in College**

*This request form must be completed as appropriate by the parent/guardian or student if over 18 years. Where a student needs to bring prescription medication into college it MUST be kept on their person at all times (if the student has been assessed as being responsible to carry their medication). The student is to take full responsibility for the medication whilst in college, on work placement and any trips and visits.*

I would like (name of student) \_\_\_\_\_ to keep his/her medication on him/her for use as prescribed.

Student's name: \_\_\_\_\_

Address: \_\_\_\_\_

Course: \_\_\_\_\_

Condition or illness: \_\_\_\_\_

Name of medication as described on container/packaging: \_\_\_\_\_

Dosage and times as described on the container:

\_\_\_\_\_  
\_\_\_\_\_

If an Epipen is required can the student administer their medication in the event of an emergency? Yes No

Does a spare Epipen need to be stored in college for emergency use? Yes No

*If yes, please ensure that the spare medication is in a sealed but not lockable Tupperware-type box with the name and date of birth visible. It is the student, parent or guardian's responsibility to ensure that all medication is on a date and fit for purpose. The spare Epipen will be stored in the appropriate curriculum staff room which the student will be made aware of, as will the tutors that are involved with the student.*

Care plan: Yes No (circle as appropriate)

Print Name (of person making request): \_\_\_\_\_

Relationship to student: \_\_\_\_\_ Contact phone number: \_\_\_\_\_

Parent/Guardian/Student's signature: \_\_\_\_\_ Date \_\_\_\_\_

*If there are any changes regarding medication or care plan information please contact The Administration Team immediately on 01322 600845*

Staff signature: \_\_\_\_\_ Date \_\_\_\_\_

*A signed copy of this paperwork will be returned for your records.*

**Form 2: Request for college to provide observation in the self-administration of prescribed medication**

This form must be completed by the student or if under 18, the student's parent/guardian. Each medication must be listed separately. All prescribed medication should be brought into college in a daily medication holder, clearly marked with the student's name on it.

***It is the parent/guardian/student's responsibility, not the college's, to ensure that the correct medication is placed in the medication holder.***

Student's name: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Address: \_\_\_\_\_

Condition or illness: \_\_\_\_\_

G.P Name and address: \_\_\_\_\_

Emergency Contact Information - this must be a responsible adult who is aware of the student's medical needs/medication details.

Contact 1	Contact 2
Name:	Name:
Relationship:	Relationship:
Phone No home/ work:	Phone No home/ work:
Mobile:	Mobile:

**Number of medicines listed on form \_\_\_\_\_  
(if more than one, please complete an additional form per medication)**

Name / Type of medication as described on container: \_\_\_\_\_

How long will the student need to take this medication? \_\_\_\_\_

Dosage, time and method: \_\_\_\_\_

Any side effects we need to be aware of: \_\_\_\_\_

What constitutes an emergency and what should be done?

\_\_\_\_\_  
\_\_\_\_\_

How do you wish us to dispose of any needles? Student to take home: \_\_\_ Put in college sharps bin: \_\_\_

**Any Comments/Further information:**

\_\_\_\_\_

**Requested by:**

Print Name: \_\_\_\_\_

Relationship to student: \_\_\_\_\_

Daytime phone number: \_\_\_\_\_

Signature: \_\_\_\_\_ Date \_\_\_\_\_

If there are any changes regarding medication or care plan information, please contact the Administration Team, immediately on 01322 660845.



**Form 3: Confirmation of the college's agreement to provide observation in self-administration of prescribed medication**

If there is more than one request a separate agreement form should be issued for each medication.

All prescribed medication should be brought into college in a daily medication holder, clearly marked with the student's name and medication name on it.

***It is the student/parent/guardian's responsibility, not the college's, to ensure that the correct medication is placed in the medication holder.***

The college agrees to observe/prompt: (name) \_\_\_\_\_

Taking: (quantity & name of medication) \_\_\_\_\_

As directed (time, route) \_\_\_\_\_

The observation/prompting of \_\_\_\_\_ taking the prescribed medication

will be by \_\_\_\_\_ who has carried out the required training and

updates to do so.

This agreement will continue until either the end date of the course of medication or until instructed by a parent/guardian or in some cases, the student.

If there are any changes regarding medication or care plan information please contact the Administration Team, immediately on 01322 660845.

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

Position in College \_\_\_\_\_

**Form 4: Request for college to support with, or administer prescribed medication**

This form must be completed by the student or if under 18, the student's parent/guardian. Each medication must be listed separately. All prescribed medication should be brought into college in a daily medication holder, clearly marked with the student's name on it.

***It is the parent/guardian/student's responsibility, not the college's, to ensure that the correct medication is placed in the medication holder.***

Student's name: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Address: \_\_\_\_\_

Condition or illness: \_\_\_\_\_

G.P Name and address: \_\_\_\_\_

Emergency Contact Information - this must be a responsible adult who is aware of the student's medical needs/ medication details.

Contact 1	Contact 2
Name:	Name:
Relationship:	Relationship:
Phone No home/ work:	Phone No home/ work:
Mobile:	Mobile:

**Number of medicines listed on form \_\_\_\_\_ (if more than one, please complete an additional form per medication)**

Name / Type of medication as described on container: \_\_\_\_\_

How long will the student need to take this medication? \_\_\_\_\_

Dosage, time and method: \_\_\_\_\_

Any side effects we need to be aware of: \_\_\_\_\_

What constitutes an emergency and what should be done?  
\_\_\_\_\_  
\_\_\_\_\_

How do you wish us to dispose of any needles?

Student to take home: \_\_\_\_\_ Put in college sharps bin: \_\_\_\_\_

Comment/Further information:

**Requested by:**

Print Name: \_\_\_\_\_

Relationship to student: \_\_\_\_\_

Daytime phone number: \_\_\_\_\_

Signature: \_\_\_\_\_ Date \_\_\_\_\_

If there are any changes regarding medication or care plan information please contact the Administration Team, immediately on 01322 660845.

**Form 5: Confirmation of the college's agreement to support with, or administer prescribed medication**

If there is more than one request, a separate agreement form should be issued for each medication.

All prescribed medication should be brought into college in a daily medication holder, clearly marked with the student's name and medication name on it.

***It is the student/parent/guardian's responsibility, not the college's, to ensure that the correct medication is placed in the medication holder.***

The college agrees to support the administration of: (name of student) \_\_\_\_\_

Taking: (quantity & name of medication) \_\_\_\_\_

As directed: (time, route) \_\_\_\_\_

The observation/prompting of \_\_\_\_\_ taking the prescribed medication will be by \_\_\_\_\_ who has carried out the required training and updates to do so.

Care plan attached:     Y N (circle as appropriate)

This agreement will continue until either the end date of the course of medication or until instructed by the parent/guardian.

If there are any changes regarding medication or care plan information please contact the Administration Team, immediately on 01322 660845.

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

Position in College \_\_\_\_\_

**Review (please tick as appropriate)**

I confirm that there are no changes to the above medication/administering requirement. \_\_\_\_

There have been changes to the medication/requirements and a new request form has been completed. \_\_\_\_

Print Name: \_\_\_\_\_

Relationship to student: \_\_\_\_\_

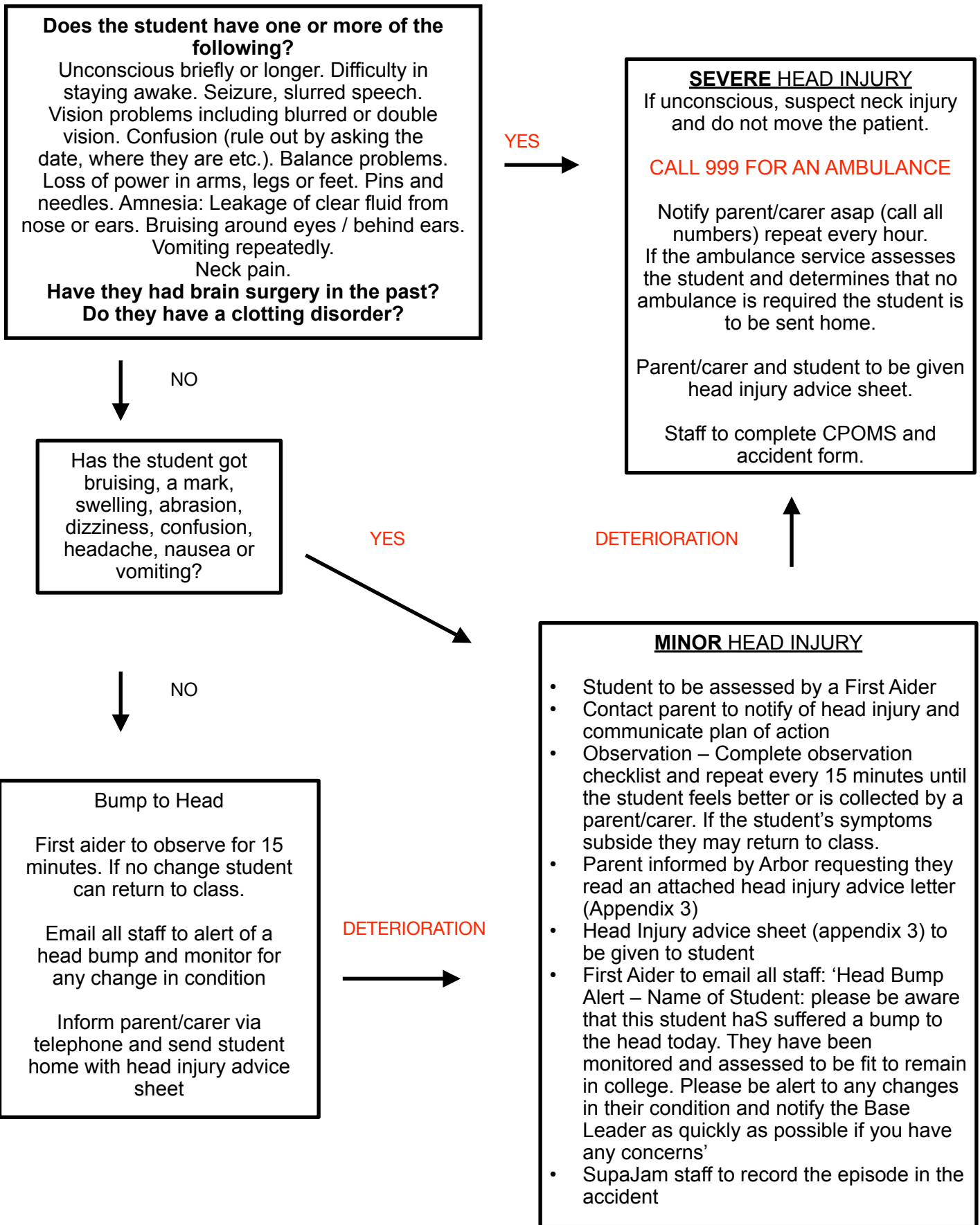
Daytime phone number: \_\_\_\_\_

Signature: \_\_\_\_\_ Date \_\_\_\_\_

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

Position in college \_\_\_\_\_

**Appendix A**



## **Appendix B**

### **Head injury checklist for First Aiders**

If the student has either of the following, treat the injury with the Severe Head Injury Protocol and call 999 immediately:

- If the student has had brain surgery in the past
- If the student has a blood clotting disorder

### **Minor head injury symptoms - assess the student for signs of the following:**

- Nausea
- Mild headache
- Tender bruising or mild swelling of the scalp
- Mild dizziness

These are signs of a minor head injury – follow the Minor head injury protocol

If no symptoms – follow Bump to Head protocol

### **Severe Head Injury symptoms - assess the student for signs of the following:**

- Unconsciousness brief or longer
- Difficulty in staying awake
- Seizure
- Slurred speech
- Visual problems including blurred or double vision
- Difficulty in understanding what people are saying/disoriented
- Confusion (Rule out signs of confusion by asking them the date, where they are, what tutor group they are in)
- Balance problems or loss of power in arms/legs/feet
- Pins & needles
- Amnesia
- Leakage of clear fluid from nose or ears
- Bruising around eyes/behind ears
- Vomiting repeatedly
- Neck pain

These are signs of a severe head injury – follow the Severe head injury protocol

## **Appendix C**

### **ADVICE TO PARENTS AND CARERS CONCERNING STUDENTS WITH HEAD INJURIES**

Your child has sustained a head injury and following thorough assessment we are satisfied that the injury does not appear to be serious.

Please refer to NHS Head Injury Advice Sheet:

<https://www.nhs.uk/conditions/head-injury-and-concussion/>

If you are concerned please CONTACT YOUR DOCTOR, NHS 111 OR CONTACT THE ACCIDENT AND EMERGENCY DEPARTMENT

**Go to A&E if:**

You or your child have had a head injury and have:

- been knocked out but have now woken up
- vomited (been sick) since the injury
- a headache that does not go away with painkillers
- a change in behaviour, like being more irritable or losing interest in things around you (especially in children under 5)
- been crying more than usual (especially in babies and young children)
- problems with memory
- been drinking alcohol or taking drugs just before the injury
- a blood clotting disorder (like haemophilia) or you take medicine to thin your blood
- had brain surgery in the past

You or your child could have concussion. Symptoms usually start within 24 hours, but sometimes may not appear for up to 3 weeks.

You should also go to A&E if you think someone has been injured intentionally.

**CALL 999 if:**

Someone has hit their head and has:

- Been knocked out and has not woken up
- Difficulty staying awake or keeping their eyes open
- A fit (seizure)
- Fallen from a height of 1 meter or 5 stairs
- Problems with their vision or hearing
- A black eye without direct injury to the eye
- Clear fluid coming from the ears or nose
- Bleeding from their ears or bruising behind their ears

- Numbness or weakness in part of their body
- Problems with walking, balancing, understanding, speaking or writing
- Hit their head at speed, such as in a car crash, being hit by a car or bike or a driving accident
- A head wound with something inside it or a dent to the head

Also call 999 if you cannot get someone to A&E safely.

### **Help from NHS 111**

If you are not sure what to do call 111.

NHS 111 can tell you the correct place to get help.