

St Joseph's Primary School for Children with Visual Impairment



Pupil Illness and Medications Policy

**Reviewed and approved by
Board of Management: 22nd February 2016**

Introduction

The school has a duty of care to all its pupils and members of staff. This policy aims to set out procedures to be followed when children become unwell, to ensure that they are well cared for and that, where the cause is of an infectious nature, others are not exposed needlessly. Procedures regarding the administration of medicine during the school day are also outlined.

In matters of pupil health, staff at St Joseph's work closely with the ChildVision Nursing Team. The Nursing Station is based in close proximity to the school on the ChildVision campus. Neither the school nor the Nursing Station has a 'sick bay' where a child who is unwell can stay during the school day.

Illness or Infection at School

Responsibility of Parents/ Guardians

When children should be kept at home

Parents are asked **not** to send their child/ren to school if any of the following apply:

The child has symptoms of an infectious illness that is mentioned in the list of 'Common Ailments requiring Pupils to Stay at Home' at the back of this policy (**Appendix 1**) or in HSE Publication: 'Management of Infectious Diseases in School – 2014', Chapter 9. <https://www.education.ie/en/Schools-Colleges/Information/National-Emergencies-Public-Health-Issues/Management-of-Infectious-Disease-in-Schools.pdf>

- The child does not feel well enough to participate in the normal programme of curriculum activities.
- The child requires more care than the classroom team is able to provide without affecting the health, safety and schoolwork of the other pupils.
- If antibiotics are prescribed for a contagious illness or infection, the child should not attend school until 24 hours after treatment has begun and must be showing signs of improvement.
- If headlice or ringworm is noticed, the child may not come to school until treatment has begun. See the end of **Appendix 1** at the back of this policy.

If a child has been sent to school and is clearly unwell, as described above, a parent or guardian will be asked to collect him/ her from school as soon as possible.

Pupil Absence - Informing the bus escort

If a pupil becomes ill overnight or at the weekend and is unable to attend on the next school day, the parent/ guardian should contact the bus escort so the school bus need not come unnecessarily to the house. The evening before a pupil returns to school, the parent/ guardian should phone the bus escort to ensure their son/ daughter is collected in the morning.

Pupil Absence - Informing the school

As well as contacting the bus escort, the parent/ guardian must also contact the school office, stating the reason for the child's absence.

This is very important for the following reasons:

- If a child has an illness which is recognised by HSE as an infectious disease, staff, other parents/guardians or the authorities may need to be notified. It is vital that information about an infectious disease is passed to the school as soon as possible.
- National Educational Welfare Board requires the reason for absence to be recorded
- Child absences may affect how staff members are assigned during the school day.

Returning to school

A pupil who has an infectious ailment, e.g. diarrhoea, vomiting, heavy cold, should remain at home until they are no longer infectious. The length of time before return will depend on the ailment and on the treatment. Guidelines in **Appendix 1** at the back of this policy, or in 'Management of Infectious Diseases in School' (Chapter 9), should be followed. For some infectious diseases, the school may require a doctor's 'fitness to return' note before the child is allowed to come back to school.

Collecting child when ill

If a ChildVision nurse and/ or the Principal contacts a parent/ guardian to say that their child has been examined and is not well enough to be at school, or travel home on school transport the parent/ guardian must arrange to collect the child as soon as possible. This is primarily for the well-being of the child who is unwell. In the case of infectious diseases, it is also very important for the well-being of the other pupils and the school staff. Classroom staff will aim to keep the child as comfortable as possible while waiting for a parent/ guardian to arrive. The parent/ guardian will be handed a 'Return to School' Slip (See **Appendix 7** at the back of this policy) where an infectious illness is present or suspected. This slip is to be completed and sent in with the child on his/ her first day back at school.

Responsibility of School

If a child feels unwell or appears unwell, on arrival at school or during the school day, the procedures at the back of this policy, in **Appendix 2**, will be followed for the well-being of the child who is sick and of all members of the school community.

On an ongoing basis, St Joseph's aims to promote good hygiene practices that will help prevent transmission of infection. These practices will be taught as part of the SPHE curriculum and will be consolidated throughout the school day. They will include:

- Teaching and implementing effective handwashing throughout the school, with staff leading by example
- Teaching and implementing respiratory hygiene and cough etiquette, e.g. to turn away when coughing or sneezing, etc.
- Facilitating the Schools Immunisation Programme
- Provision of gloves, aprons, suitable sanitising cleaning products and cleaning equipment for staff who are in contact with bodily fluids when caring for a child.

Administration of Medication in School

In St Joseph's School, medication is administered by the ChildVision Nursing Team rather than by school staff. At present, the one exception to this is the prescribed emergency regime for epilepsy management. At the start of each school year, all members of staff are trained to administer epilepsy medication in the case of an emergency, when a ChildVision Nurse is unavailable within the necessary time frame. For further information, please refer to the **Accident and Injury Policy**. As the medical needs of our pupils change, the Board of Management and school staff may need to respond to requests for administration of other types of similar medication e.g. epi-pen.

Administration of Infrequent Medicines

Responsibility of Parents/ Guardians

If a child has been prescribed a short-term antibiotic, or requires 'over the counter' medication when in recovery, the parent/guardian should attend to the following:

- ensure the medicine is in its original container, is clearly named and dated and has clear instructions about administration; this is required by the Nursing Team. If the medication is prescribed by a doctor, the prescription should be enclosed.
- ask the bus escort to pass the medication to the teacher in the morning and to bring it back in the afternoon, unless the child is availing of ChildVision Residential Services.

- inform the class teacher about the child's need for medication through a note in the child's communication diary. This will allow the teacher to liaise with the Nursing Team about the practical arrangements.
- supply the ChildVision Nursing Team with any other information they need to safely administer the medication, either through a note in the communication diary, in an enclosed letter or by phone

Responsibility of School

When a class teacher receives a child's medication from a bus escort and notification in the communication diary regarding the need for the administration of this medication during the school day, she/he should contact the ChildVision Nursing Team as soon as possible. The teacher should make arrangements with the nurse regarding the storage of the medication, and the time and place for the medication to be administered. At the end of the school day, the teacher will hand the medication to the bus escort or to the relevant ChildVision Care Staff member, if the child is availing of Residential Services.

Administration of Regular Medication

If a child requires medication during the school day on a regular or an ongoing basis, parents and guardians must notify the Principal in writing as soon as possible, i.e. on application, or as soon as the medication has been prescribed. The Principal will liaise with the ChildVision Nursing Team and a nurse will make contact directly with a parent/guardian.

In order for the administration of the medication to begin, the parent must provide the Nursing Team with:

- a valid medical prescription
- medication in original packaging with the pharmacy label intact
- written consent

A ChildVision nurse will agree on an individual medication plan with the class teacher to ensure medication is given as prescribed with minimal disruption to the child's school day. Relevant details will be recorded in the pupil's Personal Care Profile.

Self-Administration of Regular/ Long-Term Medication

If an older child requires non-oral medication on a daily basis, e.g. eye drops or inhalers, parent/s and the ChildVision Nursing Manager may agree, at some point, that the child is capable of the responsible self-administration of this medication under supervision. In this case, the parent/s or guardian/s should:

- obtain written approval from the child's consultant or GP for supervised self-administration on **Appendix 3 Form**

- write to the Board of Management on **Appendix 4 Form**, requesting the Board to authorise an SNA or teacher to supervise this self-administration and providing all requested details. Parents may ask the ChildVision Nursing Team to assist when making this application.

The Board of Management will consider the matter and may authorise an SNA or teacher, if willing, to undertake the supervision of the self-administration. In this instance, the Board will follow the procedures in **Appendix 5** at the back of this policy. The Principal will liaise with involved parties regarding the regular review of self-administration arrangements, and nursing staff will periodically review the self-administration procedure. Frequency of reviews will be, at a minimum, at the start of each school year.

Medical Procedures during the School Day

The Nursing Team

If a child is likely to require a medical procedure to be carried out during the school day on an ongoing basis, parents and guardians must notify the Principal in writing as soon as possible, i.e. on application, or as soon as the procedure may become necessary. The Principal will consult with the ChildVision Nursing Team and a nurse will make contact directly with a parent/ guardian.

Non-Nursing Staff

If a child is likely to require a medical procedure to be carried out on school transport or during the school day by a non-nursing staff member of St. Joseph's School, the parent/s or guardian/s should:

- obtain written approval from the child's consultant or GP for the procedure to be carried out on **Appendix 3 (b) Form**
- write to the Board of Management on **Appendix 4(b) Form**, requesting the Board to authorise an Escort/SNA or Teacher to carry out the procedure and providing all requested details. Parents may ask the ChildVision Nursing Team to assist when making this application.

The Board of Management will consider the matter and may authorise a bus escort, an SNA or a teacher, if willing, to undertake the procedure, following appropriate training. In this instance, the Board will follow the steps outlined in **Appendix 5** at the back of this policy. The Principal will liaise with involved parties regarding the regular review of the policy on medical procedures. The performing of medical procedures will be periodically reviewed by the nursing staff. Frequency of reviews will be, at a minimum, at the start of each school year.

Appendix 1

Common Ailments requiring Children to Stay at Home or to Visit GP

CHICKEN POX: The child should not attend school until all scabs are dry and crusted. This is usually 5-7 days after appearance of rash.

DIARRHOEA: When your child has had diarrhoea due to infection, he/ she should only return to school once 48 hours have passed following the last loose bowel movement. For example, if your child has his/her last loose bowel movement at 11 am on Sunday morning, he/she cannot return to school until Wednesday morning.

VOMITING: As in the case of diarrhoea, the child should remain at home until 48 hours have passed since last episode of vomiting due to infection.

FEVER: The normal body temperature is 36.5 to 37.2 C. If the child develops a temperature, she/he should remain at home until 24 hours after the fever has passed.

HEAVY COLD SYMPTOMS OR FLU LIKE SYMPTOMS: e.g. large amount of yellow-green nasal discharge, sleepiness, ear pain and/or fever. The child should be kept at home until these have subsided and the he/ she is able to participate in the normal school curriculum.

MILD COLD SYMPTOMS: If a child's mild cold symptoms would prevent him/ her from participating in normal school curriculum, e.g. significant weariness at onset, streaming watery discharge from nose, persistent cough, he/ she should be kept at home.

CONJUNCTIVITIS: inflammation of the lining of the eye and eyelid, causing sore or red eyes; can be highly contagious if bacterial or viral. Children with red eye/s and a watery or sticky discharge are required to remain at home until evaluated by a doctor and treatment commenced. The GP will advise when the pupil can return to school.

IMPETIGO: The fluid inside the blisters is very infectious. The child should be taken to the doctor who will advise about return to school, usually when blisters have dried and healed or a minimum of 24 hrs after commencing antibiotics,

Common Conditions requiring Immediate Treatment

HEAD LICE: It is important to avoid contact between an affected child and others. If parents/guardians notice head lice, or are advised that they have been noticed in the child's hair at school, treatment must begin before the child returns to school. So long as the treatment begins before bed-time, the child may attend school the next day.

RINGWORM: A child with suspected ringworm should be taken to their GP and, if ringworm is confirmed, treatment should begin as soon as possible. Once parents/guardians attend to this, the child may return to school.

Appendix 2

Internal School Procedures when Child is Unwell

- If a class teacher is concerned that a child is unwell, she/ he will inform the Principal.
- The Principal or the class teacher will contact the ChildVision Nursing Station to request that a nurse would examine the child.
- Sometimes the nurse will examine the child in the classroom. At other times, an SNA will bring the child to the ChildVision Nursing Station. In this case, the class teacher will ensure that the Principal is informed and that 'sign out' procedures are followed.
- Having examined the child, the nurse will advise the Principal as to whether or not the child is well enough to stay at school.
- If the child needs to go home because he/ she has an infectious illness, or is too unwell to participate in school activities, the Principal and the nurse will agree how parents will be informed. Residential pupils may be returned to the care of the residential staff.
- If the child is not infectious but may require 'over the counter' medication to alleviate symptoms while at school (e.g. Calpol for headache), the nurse will phone a parent/ guardian to discuss this. She will also document any treatment in the child's communication book, and re-assess the child within an agreed timeframe.
- In the case of a child who is unwell and is awaiting collection, staff will ensure that the child is supervised, reassured and made as comfortable as possible.
- If the child has an infectious condition:
 - further contact with other children will be limited by moving the child to a separate space in the classroom or by removing him/ her from the classroom, if so advised by the nurse
 - all other necessary precautions will be taken to limit the spread of infection, i.e. careful hand-washing and use of suitable sanitising cleaning products, as required
 - the parent/ guardian will be handed a 'Return to School Slip' to be completed and sent to child's class teacher on his/ her return
- If advised by the ChildVision Nursing Team that a particular child has symptoms of an infectious disease which needs to be reported to staff and other parents, or to the HSE, the Principal will ensure this is communicated promptly.

Appendix 3A

Self-Administration of Medication

Dear Doctor,

The Board of Management of St Joseph's School for Children with Visual Impairment requests that the information required below be provided relating to medication which is to be self-administered by under staff supervision during school hours.

The parents /guardians of have been asked to return the information to the school and to advise of any changes to this regime in the future.

Many thanks for your co-operation in this matter.

Yours Sincerely

Principal.

Name of Student:.....

Name of Medication:.....

The reason this medication is required:

.....

Time at which medication should be self-administered:

Dosage to be self-administered:.....

Additional Information:

Have you any concerns about the above-named student self-administering this medication? (Please circle) Yes / No

Signed:

Date:

Appendix 3B

Medical Procedure by Non-Nursing Staff

Dear Doctor,

The Board of Management of St Joseph's Primary School for Children with Visual Impairment requests that the information required below be provided relating to the procedure..... which is to be carried out by non-nursing staff of St Joseph's Primary School for Children with Visual Impairment during school hours.

The parents /guardians of have been asked to return the information to the school and to advise of any changes to this regime in the future.

Many thanks for your co-operation in this matter.

Yours Sincerely,

Principal.

Name of Student:.....

Detailed description of procedure:.....

.....

The reason this procedure is required:

.....

Time at which it should be completed:

Recommended training:.....

.....

Additional Information:

.....

Signed:

Date:

Appendix 4A

Supervision of Self-Administration of Medication

Request to Board of Management of St Joseph's School for Children with Visual Impairment

1. I / We, the parents / guardians of
ask the Board of Management of St Joseph's School for Children with Visual
Impairment to allow a member of staff to supervise my child
self-administering the following medication:
2. I/We enclose a completed form from Dr., stating:
 - (a) Name of medication
 - (b) The reason the medication is needed
 - (c) Time the medication should be self-administered
 - (d) Dosage to be self-administered
 - (e) Approval of self-administration
3. I/We also supply a valid prescription (dated within last six months) to St Joseph's
School and will ensure that a valid prescription is maintained.
4. Should there be any change in medication, I/we will write to the Principal before
this change takes place, to inform the Board of Management.
5. I /We understand that the school's insurers will be notified of this arrangement.
6. I/We indemnify the Board of Management in respect of any liability that may arise
regarding my/ our child's self- administration of the medication.

Signed:
Parent / Guardian

Signed:
Parent / Guardian

Date:.....

Date:.....

Appendix 4B

Medical Procedure to be Performed by Non- Nursing Staff.

Request to Board of Management of St Joseph's School for Children with Visual Impairment

1. I / We, the parents / guardians of
ask the Board of Management of St Joseph's School for Children with Visual
Impairment to allow a member of staff to
.....

2. I/We enclose a completed form from Dr., stating:
 - (a) The Procedure
 - (b) The reason this is required
 - (c) The frequency with which this is required
 - (d) Approval for procedure to be carried out by non-nursing staff

3. Should there be any change in my child's medical condition or in this procedure,
I/we will write to the Principal before this change takes place, to inform the Board
of Management.

4. I /We understand that the school's insurers will be notified of this arrangement.

5. I/We indemnify the Board of Management in respect of any liability that may arise
regarding my/ our child receiving this treatment.

Signed:
Parent / Guardian

Signed:
Parent / Guardian

Date:

Date:

Appendix 5

Self-Administration of Medicine

Procedures to be followed by Board of Management

The Board of Management of St Joseph's School for Children with Visual Impairment will aim to ensure that:

- The authorised SNA /Teacher is aware that this is a voluntary role and that if they wish to withdraw at any point or have concerns about their role, that they should speak with the Principal.
- The Principal and/ or Class Teacher has confirmed with the pupil that they would be comfortable to start self-administering their medication under supervision in school.
- The SNA/ Teacher is fully informed of all self-administration details supplied directly to the Board by the parent/guardian and the GP/ consultant.
- The SNA/Teacher has been trained by the ChildVision Nursing Team to supervise the pupil's self-administration of the medicine; this supervision will involve monitoring, recording on **Appendix 6 Form**, informing parents when medication is running low and checking with the Nursing Team regarding any medical concerns.
- A trained and willing substitute is appointed to supervise on occasions when the authorised SNA/ Teacher is absent
- Suitable safe storage of the medication has been considered and agreed, e.g. in a locked container on high shelf in classroom. The key to this container will be held by the authorised SNA/ Teacher
- Relevant details are recorded in the pupil's Personal Care Profile
- The school's insurers are informed in writing of the agreed commencement of self-administration

Appendix 7

Return to School Slip

Dear Parent/ Guardian,

In order to comply with the school Pupil Illness Policy on infectious illnesses or conditions, please complete the following and send in with your child on his/ her return to school.

Name of Child:.....

Nature of Illness or Condition:.....

Date:

PLEASE NOTE: If vomiting or diarrhoea occurred due to infectious condition, your child should not return to school until 48 hours have passed since last episode.

Date and time of last symptom:

If condition required treatment, date/ time of treatment:.....

Signed:

(Parent/ Guardian)

If you have any queries, please feel free to contact the ChildVision Nursing Team for advice (01 8373635) or check the HSE publication 'Management of Infectious Diseases in School'. <https://www.education.ie/en/Schools-Colleges/Information/National-Emergencies-Public-Health-Issues/Management-of-Infectious-Disease-in-Schools.pdf>