

Scoil Mhuire Administration of Medicine and First Aid Policy

Introductory Statement:

Scoil Mhuire's Child Safeguarding Statement and Risk Assessment of December 2021 highlighted the need to develop a Policy on the Administration of Medication and First Aid. This policy outlines how we at Scoil Mhuire deliver First Aid and the roles and responsibilities of all staff with regard to same. It also sets out procedures to be followed in the administration of prescribed medications.

Rationale:

The policy as outlined was put in place to:

- Clarify areas of responsibility
- Provide for the immediate needs and requirements of pupils who have sustained either a serious or minor injury
- Give clear guidance about situations where it is/is not appropriate to administer medicines
- Outline procedures to deal with children with allergies in our school
- Safeguard school staff who are willing to administer medication
- Protect the Board of Management and its staff against possible litigation

Relationship to School Ethos:

This school aims to promote the full and harmonious growth of every child. Furthermore, we at Scoil Mhuire support the principles of inclusiveness and equality of access and participation in the school. Our school supports positive home-school contacts in relation to all aspects of school life. This policy is in keeping with the school ethos through the provision of a safe, secure and caring school environment for all and the furthering of positive home-school links.

Aims:

The aims of this policy are to:

- Ensure the physical safety and well-being of the school occupants and to minimise health risks to children and staff on the school premises
- Develop a framework of procedures whereby all injuries are dealt with in a safe and competent manner
- Provide a framework within which medicines may be administered in cases of emergency or in instances where regularised administration has been agreed with parents/guardians
- Fulfil the duty of the Board of Management in relation to Health and Safety requirements
- Safeguard school staff-members who are willing to administer medication

TYPES OF MEDICATION

- Prescription Medication in this policy refers to medicines, tablets and sprays prescribed by a doctor to treat a temporary illness or medical condition.
SCOIL MHUIRE WILL ADMINISTER THIS TYPE OF MEDICATION, SUBJECT TO THE CONDITIONS OUTLINED IN THIS POLICY
- Non-Prescription Medication in this policy refers to over-the-counter medicines such as calpol, neurofen, etc.
SCOIL MHUIRE DOES NOT ADMINISTER THIS TYPE OF MEDICATION
- Control Medication in this policy refers to medication administered to control and relieve conditions such as diabetes and asthma such as insulin, salbutamol, terbutaline, etc.
SCOIL MHUIRE WILL ADMINISTER THIS TYPE OF MEDICATION, SUBJECT TO THE CONDITIONS OUTLINED IN THIS POLICY
- Emergency Medication in this policy refers to medication administered in response to extreme allergic reactions or epileptic seizures such as epipen, anapen, jext pen, buccolam etc.
SCOIL MHUIRE WILL ADMINISTER THIS TYPE OF MEDICATION, SUBJECT TO THE CONDITIONS OUTLINED IN THIS POLICY
- Neuro-Developmental in this policy refers to medicines administered to treat disorders such as ADHD, e.g. Ritalin
SCOIL MHUIRE DOES NOT ADMINISTER THIS TYPE OF MEDICATION.
- Mental Health Medications in this policy refers to medication administered to treat mental/psychological disorders such as anti-depressants, anti-anxiety medications, stimulants, anti-psychotic drugs, mood-stabilisers, etc.
SCOIL MHUIRE DOES NOT ADMINISTER THIS TYPE OF MEDICATION

Procedures Regarding Medical Needs:

- Parents are required to complete a Health/Medication section on the enrolment form when enrolling their child/children in the school
- No staff member is obliged to administer medication, apart from Emergency Medication, to a pupil. Any staff member who is willing to do so works under the controlled guidelines outlined below
- Prescribed medicines will only be administered after parents of the pupil concerned have written to the Board of Management requesting the Board to authorise a member of the teaching/SNA staff to do so. The Board will seek indemnity from parents in respect of any liability arising from the administration of medicines
- Under no circumstance will NON PRESCRIPTION medicines be either stored or administered in the school
- Under no circumstance will NEURO-DEVELOPMENTAL medicines be either stored or administered in the school

- Under no circumstance will MENTAL HEALTH medicines be either stored or administered in the school
- The school generally advocates the self-administration (e.g., inhalers) of medicine under the supervision of a responsible adult, exercising the standard of care of a prudent parent. Parents are responsible for the provision of medication and notification of change of dosage
- In the case of children with asthma, self-administration of medicine under the supervision of a responsible adult is recommended. However, as it may arise that these children could need the administration of medicine (e.g. inhaler) in an emergency situation, an emergency procedures form must be filled out detailing when, why and how often to give inhaler if child has severe asthma attack and when to contact emergency services (See Appendix 3)
- Teachers have a professional duty to safeguard the health and safety of pupils, both when they are authorised to be on the school premises and when they are engaged in authorised school activities elsewhere
- The Board of Management requests parents to ensure that teachers be made aware of any medical condition relating to their child
- This does not imply a duty upon staff members personally to undertake the administration of any medication apart from EMERGENCY MEDICATION.

Long Term Health Issues/Medical Conditions:

Regarding children with long-term health issues/medical conditions in school, proper and clearly understood arrangements for the administration of medicines must be made with the Board of Management. This is the responsibility of the parents/guardians. This includes measures such as self-administration, administration under parental supervision or administration by school staff.

Life Threatening Conditions

Regarding children with life threatening conditions, parents/guardians must clearly outline, in writing, what should be done in a particular emergency situation, with particular reference to what may be a risk to the child (Appendix 3)

If emergency medication is necessary, arrangements must be made with the Board of Management

A letter of indemnity must be signed by the parents in respect of any liability that may arise regarding the administration of medication (Appendix 5)

Accidents/Medical Emergencies

Parents must ensure that teachers are made aware of any medical condition relating to their child. For example, children who have epilepsy, diabetes etc. may have an episode at any time and teachers must be made aware of symptoms in order to ensure that treatment may be given by appropriate persons.

In the event of an emergency, teachers should do no more than is necessary and appropriate to relieve extreme distress or prevent further and otherwise irreparable harm. Qualified medical treatment should be sought at the earliest opportunity, by calling 999/112

Where no qualified medical treatment is available, and circumstances warrant immediate medical attention, designated staff members may take a child into Accident and Emergency without delay. Parents will be contacted simultaneously

The school maintains an up-to-date register of contact details of all parents/guardians including emergency numbers. This is updated at the beginning of each new school year. It is the responsibility parents/guardians to notify the school with regard to change of contact details

Guidelines for the Administration of Medicines:

1. The parents of the pupil with special medical needs must inform the Board of Management in writing of the condition, giving all the necessary details of the condition
2. Parents must write requesting the Board of Management to authorise the administration of the medication in school. The request must contain written instruction of the procedure to be followed in administering the medication. (Appendix 1, 2 or 3)
3. Where specific authorisation has been given by the Board of Management for the administration of medicine, the medicines must be supplied to school by the parent/guardian and replenished when necessary
4. Emergency medication given by parents to the school must be accompanied by exact details of how it is to be administered
5. The Board will make arrangements for the safe storage of medication and procedures for the administration of medication
6. The Board may authorise a staff member to administer medication to a pupil or to monitor the self-administration by a pupil
7. The Board will ensure that the authorised person is properly instructed in how to administer the medication
8. No teacher/SNA is obliged to administer medicine or drugs to a pupil, apart from EMERGENCY MEDICATION
9. Parents are required to indemnify the Board of Management and members of the staff in respect of any liability that may arise regarding the administration of prescribed medicines in school (Appendix 5)
10. All correspondence related to the above are maintained securely and confidentially in the school

Medicines:

- NON-PRESCRIPTION medicines will neither be stored nor administered to pupils in school. Self-administration of non-prescribed medicines, including throat/cough lozenges, is not permitted.

- Where possible, the parents should arrange for the administration of PRESCRIPTION medicines outside of school hours
- PRESCRIPTION medicine should be self-administered, if possible, under the supervision of an authorised Teacher/SNA, if not the parent
- Teachers/SNAs in the school will only administer PRESCRIPTION medication when arrangements have been put in place as outlined above. **A teacher/SNA must not administer any medication without the specific authorisation of the Board of Management**
- A written record of the date and time of administration of medication must be kept by the person administering it (Appendix 4).
- In an emergency situation, qualified medical assistance will be secured at the earliest opportunity and the parents contacted
- Children are not allowed to keep medication in bags, coats, etc.

The following guidelines are in place with regard to pupils with a Food Allergy

- Due to a number of pupils presenting with severe allergies to nuts in the school all nuts and related products are prohibited on the school premises. This includes spreads that contain nuts such as peanut butter
- Staff dealing with pupils should take care not to expose pupils to foods that could trigger an allergic reaction
- Children are advised not to offer or exchange foods, treats, lunches etc
- If going off-site, EMERGENCY MEDICATION must be brought. This is the responsibility of the Class Teacher or Group Leader

ADMINISTRATION OF EMERGENCY MEDICATION

Severe Allergic Reaction

Administer Zirtek or other antihistamine immediately (This is only in the case of a child who has had an antihistamine prescribed in relation to an allergy. The relevant forms must have been completed and submitted to the Board of Management prior to administering this). The pupil should be treated in accordance with his/her individual Allergy Action Plan. It is important that the pupil be kept calm to allow him/ her to breathe calmly. It is the responsibility of parents to provide these details to the school.

Only in the event of anaphylactic shock should the Pen (i.e. epipen, anapen, jext pen or equivalent) be administered. An ambulance must be called immediately after Pen has been administered.

Epileptic Seizure

Take care to protect the person and Stay with the person

1. Clear a space around the person
2. Ensure that the person's airway is clear
3. Note the time the seizure began
4. Loosen clothing around the person's neck

5. Remove any objects that may injure the person during the seizure, e.g. glasses
6. Put a pillow, a blanket or a coat under the person's head
7. Roll the person onto his/her side to assist breathing
8. DO NOT hold the person down or try to stop the movements
9. DO NOT place anything in the person's mouth
10. Allow the seizure to run its course (you cannot stop a seizure and in most cases it will last for a few seconds to a few minutes)
11. If seizure has not stopped **after 5 minutes** , administer 1 dose of buccolam
12. Call an ambulance
13. Reassure the person after the seizure is over and explain what has happened.

First Aid Procedures:

ASSESSMENT

The Degree of Injury, it will be determined by the staff member nearest to the child at that time. It is the responsibility of the attending staff member to assess the injury and decide whether it is minor, moderate, serious or very serious. He/she will make a common-sense judgement, as any responsible parent would, and take into account the specific needs of the child concerned. The assistance of the class teacher, the principal or any other staff member should be sought if the injury appears to be other than minor.

Examples of Degree of Injury

Minor Injury: scrape, graze, bump, bruise, minor cut, twist, etc.

Moderate Injury: a visible lump, swelling, sprain, wound (possibly requiring glue or stitches) 1st degree burn, etc.

Serious Injury: suspected fracture/broken bone, deep wound, profuse bleeding, broken or dislodged teeth, 2nd degree burn, etc.

Very Serious Injury: compound fracture, 3rd degree burn, electrocution, venous or arterial bleeding, etc.

- All teachers will be expected to deal with instances of minor first aid in accordance with the treatment procedures outlined below
- A serious accident or injury is one where a child has received injury which may require further treatment. All head or eye injuries are considered to be potentially serious. Severe bleeding and suspected broken bones are to be treated as extremely serious
- If an injury is judged to be other than minor, parents/guardians are to be contacted immediately and asked to come to the school. Until the parents arrive the child is kept under observation. If the considered opinion of the attending staff is that immediate professional help is required then an ambulance will be called. If the ambulance arrives before the parents do then, in line with the advice of the paramedics, a teacher (designated by the principal) will travel in the ambulance with the child. Parents are kept informed of the developing situation

- An Accident/Injury Report Form (Appendix 8) should be completed in respect of all other than minor injuries.
- Procedures for treating specific injuries are outlined below
-

Treatment Procedures

Minor Cuts

- Wear disposable gloves and clean around cut using anti-septic wipe, cleaning from the centre outwards
- Check for any dirt/foreign bodies that may be embedded in the wound
- Place a plaster on the wound if necessary for comfort/hygiene

Bleeding

It is important to assess the nature of the bleeding. The colour and rate of flow of the blood should be observed:

- **Capillary:** Blood trickles slowly from wound. This bleeding will usually stop of its own accord
 - **Veinous:** A steady, profuse flow of blood, dark red in colour. This type of bleeding should be treated as very serious
 - **Arterial:** Bright red blood spurts out of the wound. This type of bleeding should be treated as life-threatening
1. Wear disposable gloves
 2. Rinse the wound with water
 3. Cover the wound with a gauze or bandage
 4. Apply direct pressure to stem blood flow
 5. Elevate the bleeding body part above the heart
 6. Add additional layers of gauze/bandage if necessary. DO NOT REMOVE INITIAL LAYERS
 7. In the case of profuse bleeding, DO NOT REMOVE EMBEDDED OBJECTS
 8. Seek medical help and contact parents

SEEK MEDICAL HELP IMMEDIATELY IF

- The wound is deep
- The wound is gaping
- The wound oozes blood after pressure has been applied
- The wound is the result of an animal or human bite
- The wound is a puncture
- There is arterial bleeding
- Blood is soaking the dressing/bandages
- The bleeding does not seem to be slowing

Sprains/Bruises

- Apply an ice pack and, if possible, elevated the affected area
- Arnica may be applied
- Parents may be contacted by phone to inform them and for advice

Nose Bleeds

- DO NOT tilt the head back. Have the pupil sit up straight and lean slightly forward
- Pinch the pupil's nose just below the bridge and apply constant pressure for 5 minutes. If the bleeding hasn't stopped continue treatment for 5 more minutes
- An icepack may be applied to the back of the neck
- Seek medical help and contact parents if the bleed does not stop after 10 minutes of pressure
- Seek medical help immediately if the bleed follows a severe/traumatic blow to the head or face

Head Injuries

- All head injuries are to be treated as potentially serious pending assessment by the staff member in charge
- The staff member in charge should assess the injury and make a common-sense judgement, as any responsible parent would, as to whether it is serious, potentially serious or non-serious
- The ambulance should be called in the case of *very serious* head injuries, i.e. loss of consciousness, obvious concussion, compression of skull, presentation with severe pain, bleeding from nose and/or ears due to impact to skull
- In the case of injuries that are not *very serious*, treat the injury as appropriate for either bruising or bleeding
- Apply ice in case of swelling
- Observe the child carefully looking out for signs of concussion such as double vision, blurred vision, inability to focus, dizziness, impaired balance, inability to respond appropriately to simple questions, nausea, pallor, clamminess
- In the case of serious, or potentially serious head injuries, contact parents so that they may continue to observe the child for signs of concussion
- Staff member in charge must complete a Notification of Head Injury Form (Appendix 7) The original is given to the collecting parent. A copy is retained in the office
- Head injuries presenting as non-serious do not require the completion of a Notification of Head Injury Form

Eye Injuries

- All eye injuries are to be treated as potentially serious pending assessment by the staff member in charge
- In the case of foreign bodies in the eye, it may be irrigated with sterile water
- In the case of bruising, an icepack may relieve pain and reduce swelling

- If there is cause for concern both eyes should be covered with a loose sterile dressing and medical help should be sought promptly. Parents should be contacted immediately

Stings

- If the sting is still in the skin (e.g. bee sting) it is important to remove it. The sting should be scraped out carefully with the edge of a card/knife/fingernail
- Apply an ice pack to reduce inflammation and swelling
- If the pupil presents with signs of general allergic reaction (swelling of the mouth or lips, difficulty breathing) medical help must be sought immediately

Faints and Shocks

If a pupil briefly faints and recovers consciousness quickly, allow him/her to sit, supported, or to lie down, in the recovery position, if necessary.

The pupils should be closely monitored and his/her parents contacted immediately.

In the case of an [unconscious](#), or unresponsive, pupil, follow the ABC rule:

- **Airway:** If the pupil is not breathing, check and clear his/her airway.
- **Breathing:** If the airway is clear and the pupil is still not breathing, perform CPR.
- **Circulation:** Perform CPR. If the pupil is breathing but unresponsive, check his/her pulse. If his/her heart has stopped, provide chest compressions.

Medical assistance should be sought immediately.

Burns/ Scalds

Burns vary in their degree of severity

- **First-degree burn:** Minor redness and swelling. Treat with First Aid
- **Second-degree burn:** Blistering, redness, and swelling. To be treated as serious if more than 10cm in width or is on the face, hands, feet, genitals, buttocks, or over a major joint. Treat with First Aid and get medical help
- **Third-degree burn:** White or blackened skin that may be numb. To be treated as extremely serious. Treat with First Aid and call an ambulance
- Remove the child from the danger area
- Carefully assess the injury to determine the degree of burning
- Cool burnt area with cold running water for at least 10 minutes
- Do not remove objects or clothing stuck to the skin
- Do not break any blisters that may have formed.
- In the case of First Degree Burns, apply an ointment and a light gauze bandage

Unconsciousness

- Contact parents immediately
- If the child does not recover consciousness quickly, call an ambulance
- Check vital signs
- If child is not breathing commence artificial respiration
- If the child is breathing but you suspect broken bones in neck or back do not move them. Otherwise place the child in the recovery position

Choking

Signs of choking include

- Gagging, gasping, or wheezing
- Inability to talk or make noise
- Turning blue in the face
- Grabbing at the throat
- Waving arms
- Appearing panicked

The Heimlich Manoeuvre may only be performed if the child is choking. If he/she can cough or talk, he/she isn't choking.

1. Stand behind the person and lean them slightly forward
2. Put your arms around their waist
3. Clench your fist and place it between their navel and rib cage
4. Grab your fist with your other hand
5. Pull the clenched fist sharply backward and upward under the rib cage in 5 quick thrusts. Repeat until the object is coughed up

In the case of an unconscious child:

1. Place them on their back and kneel over them
2. Place the heel of your hand slightly above the navel
3. Place your other hand on top of it
4. Give quick upward thrusts to dislodge the obstruction

Record Keeping

- All minor injuries/accidents which happen on the yard are recorded in the Yard Supervision Book. The class teacher is informed
- Serious injuries are recorded on an Accident Report Form (Appendix 7) It is the responsibility of the person who dealt with the injury to gather the facts about how the injury occurred from witnesses, so that they may pass on accurate details to the parent and, if necessary, the insurers. The Accident Report Form must be signed by the attending teacher and the principal and then maintained on file in the office

- Very serious accidents/injuries will also be notified to the school's insurers on the special Incident Report Form. This will be done by the Principal

Informing Parents

- The class teacher will inform parents of minor injuries
- Where the child is very distressed or the injury is significant, parents will be informed by phone, usually by the School Secretary
- Parents/guardians are asked to provide at least two emergency contact numbers at the start of each school year. It is the responsibility of the parents to ensure these numbers are updated as necessary. These numbers are available at all times in the school secretary's office and on Aladdin
- When informing parents by phone Emergency Contact 1 will be phoned first and a voice message left if it is not possible to speak directly. If the secretary has not been able to speak directly to Emergency Contact 1, then Emergency Contact 2 will be contacted and a voice message left if necessary. If no contact is made an ambulance will be called if the injury is considered serious

First Aid Resources:

- A First Aid bag is kept in each individual classroom and SEN room. Teachers take this bag with them when on yard supervision
- First Aid bags contain disposable gloves, anti-septic wipes, plasters, Savlon cream, Arnica cream, cotton pads, tissues, hand sanitizer, sterilise water, plastic disposal bags. Each bag also contains a Yard Injury/Incident book
- A more substantial **First Aid Box** is available in the hall outside the office. This box contains disposable gloves, anti-septic wipes, assorted plasters, Savlon cream, cotton pads, tissues, hand sanitizer, sterilise water, plastic disposal bags, dressings, adhesive tape, conforming bandages, eye-pad
- Travel/sports kits are available in the office and must be taken by teachers when going off-site with children. These kits contain disposable gloves, anti-septic wipes, assorted plasters, Savlon cream, cotton pads, tissues, hand sanitizer, baby wipes, sterilise water, plastic disposal bags, dressings, adhesive tape, conforming bandages, sprain bandage, triangular bandage, eye-pad, instant ice pack, scissors
- Single use ice packs are kept in the office
- Reusable ice packs are kept in the freezer in the staff-room

Provision of First Aid Resources:

- All First Aid supplies will be monitored and replenished as necessary. Teachers are responsible for keeping their First Aid bags fully stocked
- The secretary fully re-stocks all First Aid bags before the beginning of each school year. Out of date resources are carefully disposed of
- The secretary is responsible for ensuring that the substantial First Aid Box and Travel/Sports Kit are fully stocked

First Aid Station:

Location:

The First Aid Station is located in the hall opposite the office

Dealing with common illnesses and infections:

- Any child who suffers from diarrhoea or vomiting during the school day will be required to be collected and taken home
- Any child who has suffered from diarrhoea or vomiting must not return to school until they have been completely clear of symptoms for 24 hours. It is the responsibility of the parent to ensure that the health and safety of everyone at school is considered when deciding when to return their child to school
- If a child is found to have live head-lice, their parents will be informed by the school office. All of the other children in that class will be given a standard letter regarding head-lice and treatment to take home, asking their parents to inspect their heads and to treat any infestation accordingly. Furthermore, parents are encouraged to check regularly for head head-lice and to inform the school if their child has a head-louse infection
- The parents of any child suspected of having a highly infectious condition will be contacted. If the infection is severe, they will be asked to collect the child. If it is minor, they will be asked to seek advice about treatment from their GP
- Parents are asked to inform the school immediately in the case of contagious diseases (chicken-pox, infective hepatitis, measles, mumps, rubella, (German Measles), scarlet fever, glandular fever, whooping cough, impetigo (School Sores), ring worm (tinea), scabies, head-lice)
- Parents can seek advice from the HSE about other common illnesses and infections

General Recommendations:

We recommend that any child who shows signs of illness should be kept at home. Requests from parents to keep their children in at lunch break are not encouraged. A child too sick to play with peers should not be in school.

Ratification and Review:

This policy was ratified by the Board of Management on _____. It will be reviewed in the event of incidents or on the enrolment of child/children with a significant medical condition but no later than 2025.

| | |
|----------------------------------|--|
| Chairperson, Board of Management | |
| Principal | |

Appendix 1

| Scoil Mhuire Maigh Cuilinn | |
|--|--|
| Notification of Medical/Health Issues Please update us, as applicable, on any developments/changes regarding your child's health/medical situation and of any medication he/she may require. If the school currently holds medication for your child, please replace/renew as necessary according to the date of expiry. | |
| Name of Child | |
| Class | |
| Teacher | |
| Doctor | |
| Doctor's Contact No. | |
| Nature of Medical/Health Issue e.g. asthma, nut allergy, epilepsy, diabetes If none, state NONE | |
| Medication to be Administered, if any e.g. inhaler, epipen If none, state NONE | |
| Have you provided the school with medication? (if applicable) | |
| Instructions to be followed in the event of an episode, attack, etc. | |
| Parent/Guardian who has filled this form | |

Consent of Parent/Guardian to Medical Attention

In the event of (pupil's name) requiring medical attention

for any reason during the school day or during any activities under supervision of the school, I consent to his/her referral to my child's doctor as named above and, if he/she is unavailable, or if the situation so dictates, to such doctor or hospital authority as the school authorities shall see fit.

I also consent to the doctor or hospital authority concerned carrying out such treatment or operative measures as may be considered necessary, including the administration of general or other anaesthetics.

I understand that the school authorities will make every effort to contact me first and will only act on their own initiative having tried and failed several times to make contact with me.

I request that the Board of Management authorise the taking of prescription medicine during the school day as it is absolutely necessary for the continued well-being of my/our child.

I further request that the Board of Management authorise a member of staff to administer the prescription medicine. Please tick

YES

☐

NO

I understand that the school has no facilities for the safe storage of prescription medicines and that the prescribed amounts be brought in daily.

I understand that we must inform the school/teacher of any changes of medicine/dose in writing and that we must inform the new class teacher each year of the prescription/medical condition.

I understand that the school has a limited number of staff members with First Aid Responder, CPR and Administration of Emergency Medicines training and we indemnify the Board from any liability that may arise from the administration of the medication by any staff member.

ACKNOWLEDGEMENT AND CONSENT

PARENT/GUARDIAN 1

DATE

PARENT/GUARDIAN 2

DATE

Appendix 2

| Notification of Allergy D | | | |
|---|--|---------------|--|
| Name of Child | | Date of Birth | |
| Child's Doctor/GP | | | |
| Doctor's/GP's Contact No. | | | |
| Type of Allergy | | | |
| Reaction Level | | | |
| Medication | | | |
| Medication Storage Instructions | | | |
| Required Dosage | | | |
| Administration Procedure When to be given How to be given | | | |
| Parent's/Guardian's Signature | | | |
| Date | | | |

Appendix 3**Medical Emergency Procedures**

In the event of displaying symptoms

of concern due to his/her medical condition, the following procedures should be followed.

Symptoms of Concern:

Procedures:

When to contact us:

When to call Ambulance:

DATE

PARENT/GUARDIAN 1

DATE

PARENT/GUARDIAN 2

Appendix 4

| Record of Administration of Medicine | | | |
|---|--|---------------|--|
| Name of Child | | Date of Birth | |
| Child's Doctor/GP | | | |
| Doctor's/GP's Contact No. | | | |
| Medical Condition/Illness | | | |
| Medication | | | |
| Required Dosage | | | |
| Administration Procedure When to be given How to be given | | | |
| Parent's/Guardian's Signature | | | |
| Date | | | |

Pupil's Name: _____

Date of Birth: _____

Appendix 5

ADMINISTRATION OF MEDICINES IN SCHOOLS INDEMNITY FORM

THIS INDEMNITY is made on the day of 20
between Parent(s)/Legal Guardian(s) of
 hereinafter called 'the parents' of the One Part
and for and on behalf of the Board of Management of
Scoil Mhuire, Moycullen, Co.Galway (hereinafter called 'the Board') of the Other Part.

WHEREAS:

1. The parents are respectively the legal guardians of
a pupil of the above school.
2. The pupil suffers from the ongoing condition
3. The pupil may, while attending school, require, in emergency circumstances, the administration
of the medication
4. The parents have agreed that the said medication may, in emergency circumstances, be administered by
the pupil's classroom teacher and/or such other member of staff of the said school as may be designated
from time to time by the Board. NOW IT IS HEREBY AGREED by and between the parties hereto as
follows:

In consideration of the Board entering into the within Agreement, the Parent(s)Legal Guardian(s) of the
said pupil HEREBY AGREE to indemnify and keep indemnified the Board, its servants and agents
including, without prejudice to the generality, the said pupil's class teacher and/or the Principal of the
said school from and against all claims, both present and future, arising from the administration or
failure to administer the said medicines.

IN WITNESS whereof the parties hereto have hereunto set their hands and affixed their seals the day and
year first herein WRITTEN.

SIGNED AND SEALED by the parents in the presence of:

| | |
|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> |
| The Parent(s) | The Witness |

SIGNED AND SEALED by the Board in the presence of:

| | |
|------------------------|----------------------|
| <input type="text"/> | <input type="text"/> |
| On behalf of the Board | The Witness |

Appendix 6



Scoil Mhuire, Maigh Cuilinn, Co. na Gaillimhe Scoil Mhuire, Moycullen, Co. Galway

Seoladh/**Address:** Scoil Mhuire, Church Rd., Moycullen, Co. Galway H91 HF10
Uimhir Ghutháin/**Phone:** (091) 555454/(091) 868176
Ríomhphost/**Email:** office@moycns.ie
Suíomh Idirlín/**Website:** www.moycullencentralschool.ie
Uimhir Rolla/**Roll No. :** 19529C

Dear Parents/Guardians.

Regarding your request for the Administration of Medicine to your child _____,
_____, staff member at Scoil Mhuire, has agreed to do so, and the Board of
Management hereby grants him/her permission to administer said medication.

In order to accede to your request, as the administration of medication is not a role or
responsibility of school personnel, the Board of Management requires you to indemnify school
personnel and the Board from any liability that may arise from the administration of medication.

Please sign the attached Indemnity Form and return it to school.

Go raibh maith agat.

Thank you.

T. Kavanagh

Príomhoide/Principal

Appendix 7



Scoil Mhuire Maigh Cuilinn

Notification of Head Injury

Dear Parent/Guardian,

Your child _____ sustained a minor head injury at school today. It is the school's policy to bring minor head injuries, however innocuous they may appear, to the attention of Parents/Guardians, so that they can keep their child under close observation for the next 48 hours and note any symptoms that develop that may indicate concussion.

| Details of the Injury | | | |
|---|----------------------|---------------------|------------------|
| Date | | Time | |
| Location | | | |
| How the Injury Occurred | | | |
| Description of Injury | | | |
| Action Taken <i>Please tick as appropriate</i> | | | Relevant details |
| | Injury checked | | |
| | Ice pack applied | | |
| | Dressing applied | | |
| | Memory check | | |
| | Vision check | | |
| | Balance check | | |
| | Pupil dilation check | | |
| | Observed for 30 mins | | |
| | Parents contacted | | Name: |
| Child collected | | Time of collection: | |
| Staff Member in charge: | | | |


Please note that symptoms of concussion may not develop for quite some time (symptoms may take up to 72 hours to appear) after an injury to the head. If any of the following occur or are observed, please seek urgent medical attention.

- Increasing drowsiness or lethargy
- Incoherent speech, impaired comprehension
- Worsening headache
- Pupils do not contract/dilate or one pupil larger than the other
- Confusion or strange behaviour
- Unusual breathing patterns
- Nausea or vomiting
- Weakness in an arm or leg
- Dizziness, loss of balance or convulsions
- Any visual problems such as blurring of vision or double vision
- Blood, or clear fluid, leaking from the nose or ear
- Loss of consciousness

If you have reason to believe that your child may be suffering from concussion, call 999 or 112 immediately and:

- Ask for the ambulance service
- Give your location and the phone number you are calling from
- Explain that your child is suffering from concussion, noting the symptoms
- Describe the injury sustained, as per the details above
- Please inform your child's teacher of any relevant details on return to school.

Appendix 8

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|---|---|
|  | Scoil Mhuire Maigh Cuilinn Accident/Injury Report Form |
|---|---|

| | | | |
|------------------------------|--|----------|--|
| Name of Pupil | | Class | |
| Class Teacher | | Reporter | |
| Accident Details | | | |
| Location of Accident | | Date | |
| | | Time | |
| How the accident occurred | | | |
| Presenting Injury/Complaint | | | |
| Action taken/Treatment given | | | |
| Follow-up actions | | | |
| Reporter's Signature | | Date | |