



Cullercoats Primary School  
Headteacher: Mr Gavin Storey  
Marden Avenue  
North Shields  
Tyne & Wear  
NE30 4PB  
Tel: (0191) 643 3200  
E-mail: [info@cullercoatsprimaryschool.org.uk](mailto:info@cullercoatsprimaryschool.org.uk)

## **Procedures for reporting a child's sickness/absence, appointments, lateness**

Contact the school office **as soon as possible** when the child is absent. To help with attendance regulations we ask that on the first day of your child's illness you contact the school as soon as possible to register the absence (there is a specific voice mail for this purpose on the school phone 0191 643 3200). No further phone calls are necessary but we do ask that you send a note explaining fully the reason for absence on their return to school.

The Health Protection Agency, Infection Control Department recommend that if your child is absent from school with **sickness and/or diarrhoea** they must be symptom free for a full **48 hours** before returning. We appreciate that at times this may be difficult for working parents but in order to try and eradicate the virus in school we feel we must strongly request that this advice is followed.

### **Child appointment procedures e.g. hospital, Doctors appointment, ballet/musical exam:**

Contact the school office as soon as possible to inform us of the child's appointment. Please provide a copy of the appointment/examination letter so that we can place it on the child's file. We will then arrange for the teacher to send your child to the school office for collection at the correct time.

### **Child late procedures**

School starts at:

**8.50am** for years 1-6

**8.45am** for Reception children. Key Stage 1 and Key Stage 2 doors will close promptly at this time.

**8.45am** for AM Nursery

**12.30pm** for PM Nursery

School gates close at **9.00am** prompt.

Late children must come to the school office where their names will be entered into the Late Register. All of these important procedures are in place in accordance with our Safeguarding Policy.

### **Absence Request Form**

There is a strong link between how successful your child is at school and how good their attendance is; it is essential that we work together to make sure that all our children have the best possible chance of reaching their potential. Every lesson missed in school is a valuable moment lost, and pupils can fall behind very quickly and often feel lost when they go back to class. For example, if you take your child out of school for a holiday (10 days of holiday is equivalent to 20 missed sessions) in addition to time off for illness, you can see how quickly they could fall behind and start to struggle.

The law states it is at the discretion of the school that absence during term time is agreed and it should only be in *exceptional circumstances*. The explanation 'Family Holiday' is not a valid reason to authorise an absence and therefore a more detailed explanation is required as to the

exceptional circumstances for the period of absence; each application is reviewed against advice from the Local Authority.

Should you decide to take your child out of school during term time, school cannot be expected to provide work for the duration of the absence.

If you wish to apply for agreed absence, such as a holiday during term time for your child, please complete the form (appendix 3) and return it to the school office as soon as possible. Forms are also available from the school office. Any form received **less than 48 hours** prior to the first day of holiday will automatically be registered as an unauthorised absence. You will receive an email indicating whether the absence has been agreed.

### **Medicine procedures/policy:**

**Please take a moment to read through the following important procedures**

The staff at Cullercoats Primary School are committed to educating all children in a safe and happy environment and the Admission of Medication Policy contributes to school structures and processes that ensure the wellbeing of all children is safeguarded at all times. This policy has been written following Local Authority Guidelines and contributes to the First Aid policy in accordance with the most current guidance from the Department of Education:

- “Teachers and other School staff in charge of pupils have a common law duty to act as any reasonable prudent parent would to make sure that pupils are healthy and safe on school premises and this might, in exceptional circumstances, extend to administering medicine and/or taking action in an emergency. This duty also extends to teachers leading activities taking place off the school site, such as educational visits, school outings or field trips. Section 3(5) of the Children Act 1989 provides scope for teachers to do what is reasonable for the purpose of safeguarding or promoting children’s welfare. This can give protection to teachers acting reasonably in emergency situations such as a school trip.”  
‘Supporting Pupils with Medical Needs in School 14/96’ DfEE
- Employees working under the School Teachers’ Terms and Conditions of employment have no contractual obligation to administer medicines. Any agreement so to do can therefore only be a voluntary act by an individual person.
- Where staff agree to administer medication in accordance with the Local Authority and School Guidelines, they are included within the Council’s insurance provision in the event of any legal action by parents on behalf of their child.
- The School will not be responsible for the administration of medication where the timing of its administration is crucial to the health of the child or, where technical or medical knowledge and/or training is required except in emergency treatment situations.

## **Procedure**

### **1. Short Term Medication**

School Office staff have agreed to administer medications in accordance with the Local Authority and School guidelines. Where a child is recovering from a short term illness and is well enough to return to school but has been prescribed medication a parent should complete the appropriate Administration of Medication Form at the school office. (appendix 1)

## **2. Medication Prescribed on a Regular and Repeat Basis**

### **Asthma Inhalers**

We recognise that asthma is a condition affecting many school children. The school encourages and helps children with asthma to participate fully in all aspects of school life and will ensure that immediate access to inhalers is possible at times.

It is the responsibility of parents to ensure that, if their child suffers from asthma and could experience an asthma attack in school, they have provided a current inhaler for use within school for their child. The inhaler must be in the container provided by the pharmacist, labelled with the child's name and when (except in the case of an emergency) the inhaler should be used. A child who needs to use an inhaler should be encouraged to administer this him or herself with a minimum of supervision.

### **A parent is responsible for changing an inhaler on the date of expiry.**

The Administration of Medication Policy will be issued to the parents together with an Asthma Management Plan (appendix 2) to complete each school year.

Inhalers for children will be kept within a cupboard in the child's classroom, a spare will also be kept in the school office.

### **Long term medication**

A member of staff is under no obligation to administer this medication to a child (unless a person has been formally appointed for this specific purpose). The following directions refer to when a member of staff has volunteered to administer the medication.

The Administration of Medication Policy will be issued to the parents together with a parent consent form (appendix 1) for completion and return to school. The parent will be asked to give information on this form regarding the name of the medication and the time of day that it is to be taken, if this is on a regular basis. It is the responsibility of the parent to renew information regarding the dosage and medication prescribed.

The medication should be in the original container provided by the pharmacist, bearing the child's name and the daily dosage. Parents will be asked to request from the pharmacist separate medication, which is to be stored in school.

### **Diabetes**

The handling of a child's diabetes will be agreed between School and parents/carers. This agreement will be written down and kept in the child's records, it will also be displayed in the staffroom and a copy kept in the class register to ensure that any teacher taking the class is aware of the child's needs.

## **3. Medical Conditions requiring Emergency Treatment**

"The Medicines Act 1968 places restrictions on dealings with medicinal products, including their administration. In the case of prescription-only medicines, anyone administering such a medicinal product by injection must be an appropriate practitioner (e.g. a doctor) or else must act in accordance with the practitioner's directions. There are exceptions for the administration of certain prescription-only medicines by injection in emergencies (in order to save life)."

*'Supporting Pupils with Medical Needs in School 14/96' DfE*

## **Anaphylaxis**

Anaphylaxis is a severe allergic reaction of rapid onset with circulatory collapse and hypotension and is life threatening. If a child appears to demonstrate symptoms the school must call emergency services immediately, and request a paramedic stating the patient has 'apparent anaphylactic reaction'. Details of children who may suffer possible symptoms of anaphylaxis are displayed in the staffroom with their name, an up to date photograph and details of what to look for and how to treat the situation as provided by the parent. The child will also be identified in the appropriate class register to ensure that any teacher who may take the class is aware of the situation.

Staff will require training to enable them to administer such treatment. This training will be organised in consultation with the Local Authority Health Centre. A member of staff is under no obligation to attend such training or to administer the medication to a child (unless a person has been formally appointed for this specific purpose).

It is the responsibility of parent to ensure that they have provided the correct medication for use within school for their child. The medication must be in the container provided by the pharmacist, labelled with the child's name and when (except in the case of an emergency) the medication should be used.

The following directions refer to when a member of staff has volunteered to administer the medication.

The Administration of Medication Policy will be issued to the parents together with a record of a child with a food allergy in school form (appendix 3) to complete each school year. The parent will also be asked to give information, on this form, regarding the name of the medication, time of day to be taken if this is on a regular basis. The parent is responsible for changing 'a pen' on the date of expiry.

### **4. Storage of Medication**

The School does not have facilities for the storage of any medication that needs special requirements.

All medication (other than inhalers - see above) will be stored in an appropriate container either within the school office, and/or the classroom. No more than one month's supply of any medication for any child will be stored in school. A parent will be responsible for delivering the medication to school in the original pharmacist's container, giving the name of the child, name of medication, dose and time it is to be administered.

All medication must be collected by the responsible adult. Any uncollected medication at the end of a school year will be disposed of accordingly by the school administration team.

Volunteer staff must follow the following procedures when administering medicine to children.

### **5. Two members of staff must be available for this process.**

- Two members of staff to check date and time of last medication (Initial appropriate record for child)
- The first member of staff will remove the medication from the point of storage at the appropriate time (initial and date to verify appropriate record for the child).
- The medication will be verified by a second member of staff as the correct medication for that child. (Initial appropriate record for the child)

- Where possible, the medication will be given to the child to take/administer themselves.
- The first member of staff will initial and date the appropriate record for the child.
- The second member of staff will also initial the child's record indicating that he/she saw the medication being given to the child.
- A record will be kept until a date the child completes his formal education.
- The medication will be administered as discreetly as possible to a child.

## 6. Illness During the School Day

Staff should not administer medication to children who fall ill during the school day. Parent and emergency contact numbers for a child are kept in files within the main office. Parents will be asked via the school newsletter to **update their child's records immediately of any changes** in contact details.

When a child becomes seriously unwell or is injured an ambulance will be called immediately and parents contacted as soon as possible. If a parent is unable to come to school before the ambulance arrives a member of the staff with whom the child is familiar will accompany the child to the hospital.

Regular updates of this document will be made, as necessary e.g. if a child is admitted to the School and has a specific medical problem that is not covered above.

All original (not copies) correspondence between parents and school will be kept in the child's records.

N.B. The term 'parent' refers to the person who has responsibility for caring for the child.

If your child requires medication for an **allergy**, eg Epipen or cetirizine etc, please read the following information;

We are in the process of updating our pupil records as part of our safeguarding policy and would be grateful if, on the first day back to school, you could ensure a new up to date Medical Information Sheet for your child, including a recent original photograph (not a printed picture) is handed into the School Office along with the relevant **prescribed** medication which should be clearly named.

The Medical Information Sheet should have your child's name, date of birth and class clearly marked at the top of the sheet alongside their photograph and have **bullet point** instructions for emergency use. Please keep the information **concise** and to **one side of A4 paper**.

Any out of date medication will be returned for you to dispose of. If you have any queries regarding this process, please do not hesitate to contact us when we return in September.

Yours sincerely

Mr Storey  
Headteacher

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Pupils benefit from a rich and varied curriculum beyond the core of English and Mathematics. (Ofsted 2017)





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### Medication Form

Child's full name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Class \_\_\_\_\_

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

Name/Type of Medication (as described on the container)

\_\_\_\_\_

Length of prescribed course of medication \_\_\_\_\_

Date dispensed \_\_\_\_\_ Expiry Date \_\_\_\_\_

Dosage to be given in school \_\_\_\_\_ Time \_\_\_\_\_

Last day for school to administer medication \_\_\_\_\_

Special Instructions \_\_\_\_\_

Possible Side Effects \_\_\_\_\_

Self Administration Yes ☐ No ☐

Contact details in case of emergency:

Name \_\_\_\_\_ Telephone Number \_\_\_\_\_

Relationship to Child \_\_\_\_\_

I hereby give permission for and trust the school office team, a teacher or a member of the support staff to administer the medication detailed above to my child as per my instructions. I understand every effort will be made to ensure the medicine is administered but that there may be an unavoidable occasion when a dosage may be missed. I understand that the medicine in its prescribed container must be handed to and collected from the office staff each day by a responsible adult and accept that this is a service which the school is not obliged to undertake.

Parent/Carer name (Please print) \_\_\_\_\_

Parent/Carer signature \_\_\_\_\_ Date \_\_\_\_\_



## Asthma Form

Name: \_\_\_\_\_ Class \_\_\_\_\_

Date of birth: \_\_\_\_\_

Condition: \_\_\_\_\_

Viral Induced Asthma ☐

Parent will ring school if child requires inhaler on the day ☐

Self-Administration ☐

Consent given for my child to use the school's "spare" inhaler in case of emergency where my child's own prescribed inhaler is not immediately available (for example, because it is broken or out-of-date) ☐

### EMERGENCY CONTACT NUMBERS:

Name \_\_\_\_\_ Telephone \_\_\_\_\_

Name \_\_\_\_\_ Telephone \_\_\_\_\_

Name \_\_\_\_\_ Telephone \_\_\_\_\_

Doctor (G.P.)

Practise Name \_\_\_\_\_

Doctor Name \_\_\_\_\_ Telephone \_\_\_\_\_

Hospital Contact Telephone Number(if appropriate) \_\_\_\_\_

### DAILY MANAGEMENT OF \_\_\_\_\_'S CONDITION AND EMERGENCY CARE

\_\_\_\_\_ will have an in-date inhaler at all times in the classroom and a spare to be kept in the office.

**PLAN 1 - No Treatment**(your child is fit and well, can participate in school activities)

**PLAN 2 - Preventative Treatment** (does your child require a preventer(brown) inhaler before school etc. , what triggers your child's asthma)

PLAN 3 - ACUTE SYMPTOMS (dosage (how many puffs of inhaler), what symptoms does your child get when they need their inhaler, instructions on how to use inhaler e.g. does your child have use a spacer)

EMERGENCY TREATMENT (if symptoms not relieved, call 999, contact parent etc.)

I have read the Administration of Medication Policy and agree with the appropriate section referring to my child's medical needs.

Parent/Carers Name: \_\_\_\_\_  
(please print)

Signed \_\_\_\_\_ Date \_\_\_\_\_



