**Supporting Pupils with Medical Needs Policy**

**Temporary addendum during COVID-19**

**ADMINISTERING MEDICATIONS**

If a child is unwell and has been prescribed antibiotics for a viral or bacterial illness (not COVID-19) they may attend school.  If the child attends school, antibiotics should only be administered at school if the prescription states four times daily (as per the school’s Supporting Pupils with Medical Needs policy).

There will be no change in the support provided to pupils with long term medical conditions with individual health care plans or support with emergency medication such as autoinjectors, inhalers etc.

If non prescribed pain relief is required to manage a physical injury such as a sprained ankle, broken limb, this will be agreed case by case.

**First aid risk assessment/procedure**

**Temporary addendum during COVID-19**

**PPE FOR FIRST AID RESPONDERS IN AN EDUCTIONAL SETTING**

Suitable PPE will be provided for staff working in a first aid capacity in line with the DfE Coronavirus guidelines.

The guidance states as follows:

Additional PPE for coronavirus (COVID-19) is only required in a very limited number of scenarios, for example, when:

* a pupil becomes ill with coronavirus (COVID-19) symptoms, and only then if a 2 metre distance cannot be maintained
* performing aerosol generating procedures (AGPs)

When working with children and young people who cough, spit or vomit but do not have coronavirus (COVID-19) symptoms, only any PPE that would be routinely worn, should be worn.

The guidance on safe working in education, childcare and children’s social care provides more information about preventing and controlling infection. This includes:

* when and how PPE should be used
* what type of PPE to use
* how to source it

*https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\_data/file/964351/Schools\_coronavirus\_operational\_guidance.pdf*

**TEMPERATURE TESTING**

A student presenting as unwell in school will be routinely temperature tested with an infrared, non-contact temperature gun by the duty first aid responder. A temperature of 37.8C or greater will require immediate collection by a parent/carer and advised to self-isolate at home for the following 10 days in line with current NHS COVID-19 symptoms guidance.

**OUT OF HOSPITAL ADMINISTRATION OF CARDIOPULMONARY RESUSCITATION (CPR)**

Due to the Coronavirus Pandemic (COVID-19), the school has updated its administration of emergency CPR in line with Public Health England guidelines (18 May 2020 secn 7.2). This guidance states as follows:

**For out of hospital cardiac arrest, the importance of calling an ambulance and taking immediate action cannot be stressed highly enough.**

* *In adults, it is recommended that you do not perform rescue breaths or mouth-to-mouth ventilation; perform chest compressions only. Compression-only CPR may be as effective as combined ventilation and compression in the first few minutes after non-asphyxia arrest (cardiac arrest not due to lack of oxygen).*
* *In children, If a child is not breathing normally and no actions are taken, their heart will stop and full cardiac arrest will occur. Therefore, if there is any doubt about what to do, the guidance in the* [Resuscitation Council UK Statement on COVID-19 in relation to CPR and resuscitation in first aid and community settings](https://www.resus.org.uk/media/statements/resuscitation-council-uk-statements-on-covid-19-coronavirus-cpr-and-resuscitation/covid-community/) *should be used.*
* *It is likely that the child/infant having an out-of-hospital cardiac arrest will be known to you. We accept that doing rescue breaths will increase the risk of transmitting the COVID-19 virus, either to the rescuer or the child/infant. However, this risk is small compared to the risk of taking no action as this will result in certain cardiac arrest and the death of the child.*

<https://www.gov.uk/government/publications/novel-coronavirus-2019-ncov-interim-guidance-for-first-responders/interim-guidance-for-first-responders-and-others-in-close-contact-with-symptomatic-people-with-potential-2019-ncov>