

1. MEDICAL AND FIRST AID POLICY

The Education (Independent School Standards) Regulations (2014) Paragraphs 13 and 14 require the school to:

- A.** ensure that first aid is administered in a timely and competent manner by the drawing up and effective implementation of a written first aid policy;
- B.** ensure that suitable accommodation is provided in order to cater for the medical and therapy needs of pupils, including — (a) accommodation for the medical examination and treatment of pupils; (b) accommodation for the short-term care of sick and injured pupils, which includes a washing facility and is near to a toilet facility; and (c) where a school caters for pupils with complex needs, additional medical accommodation which caters for those needs. (2) The accommodation provided may be used for other purposes (apart from teaching) provided it is always readily available to be used for the purposes set out in sub-paragraphs (1)(a) and (b).

This policy has due regard to KCSIE 2019; it also reflects the guidance in 'Guidance on First Aid for Schools', 2014 and The Statutory Framework for the EYFS (2017). This policy also has due regard to the terms of the Equality Act 2010 and guidance provided by the Equality and Human Rights Commission as to its implementation in school.

This policy applies to all pupils, including those in the EYFS, and to all members of staff.

The School's policy and procedures include information and guidance on the following:

- 1.** practical arrangements at the point of need;
- 2.** the names of those qualified in first aid and the requirement for updated training every three years (also refer to the Staff Training Log Policy Handbook Section 5);
- 3.** having at least one person qualified in first aid on each school site when children are present;
- 4.** showing how accidents are to be recorded and parents informed;
- 5.** details of how medicines are stored and administered
- 6.** location of first aid kits;
- 7.** arrangements for pupils with particular medical conditions (for example, asthma, epilepsy, diabetes);
- 8.** hygiene procedures for dealing with the spillage of body fluids;
- 9.** guidance on when to call an ambulance;
- 10.** reference to RIDDOR (also refer to the Welfare Health and Safety Policy – Policy Handbook Section 3).

The school provides medical care when required under the guidance of The First Aid Officer. Most members of school staff are also trained in First Aid. The school is situated near to Chelsea and Westminster Hospital if needed for emergencies or advice.

PRACTICAL ARRANGEMENTS AT THE POINT OF NEED

Any child who feels unwell or has a minor injury should report immediately to their Class Teacher or a member of staff on duty and then the First Aid Officer if necessary. Occasionally, it may be necessary for a child to be sent home or to receive appropriate medical care elsewhere other than in school.

If a child is unwell and awaiting collection to be taken home, a quiet place is provided for them to lie down and rest (in the Staffroom). Accommodation for the medical examination and treatment of pupils and for the short-term care of sick or injured pupils, which includes a washing facility and is near a toilet facility, is available. There is also a foldout bed and medical

blanket for the child's additional comfort if needed. The accommodation provided may be used for other purposes at other times but it is always readily available to be used for medical purposes when needed.

Children who may have certain health or emotional issues are welcome to discuss these with the First Aid Coordinator or any other member of staff in confidence. Occasionally, it may be necessary to involve other healthcare professionals or support from within the school.

In the case of a serious accident, a member of staff must stay with the child and send another member of staff / a child to inform the office to call 999. When the paramedic arrives, the supervising member of staff should give as much detail as possible. Parents will be informed straight away.

Should a child need to go to hospital, a member of staff will accompany the child and stay with them until parents arrive.

In the case of an adult having a serious accident, a member of staff must stay with them and send another member of staff / a child to inform the office to call 999. When the paramedic arrives, the supervising member of staff should give as much detail as possible. The school office will call the member of staff's emergency contact. If the adult is not a member of staff, we will aim to contact a friend or relative.

In the case of a head injury, the severity is assessed by a paediatric trained first aider. If a minor bump, a bump form is completed and the child will be assessed regularly throughout the school day.

If the child has a headache / blurred vision / sickness then parents will be called. If concerned that child is deteriorating then we will call 999.

Parents of EY children will be informed of any head bump.

MEDICAL RECORDS

On entry to the school all parents complete a pupil medical information form.

Personal health care plans must be submitted if a pupil suffers from severe asthma / epilepsy / diabetes / severe allergies, or any other condition where more information may be required.

Medical records are kept confidentially and securely (locked) in the School Office. Medical information may be provided to the Head or specific teachers if necessary (i.e. if the child is going out of school on a visit.)

STAFF TRAINING

The School's First Aid is overseen by the Class 1 Assistant (Dianne Redbond) who has attended the three Day Paediatric first aid course and acts as the school's First Aid coordinator in partnership with the Health and Safety Officer.

For the Early Year's pupils, the Reception Teacher and Teaching Assistant complete the two-day Paediatric first aid course. This is also completed by Annie Worlledge (EYFS coordinator/Deputy DSL), Sian Barraclough (EY teaching assistant), Olivia Reeve-Tucker (School office), Suzanne Haigh (Deputy Head / DSL), Zoe Venbles (Class 2 Teacher), Claire Cahill (Class 3 teacher), Mike Green (teaching assistant), Yolanda Petronelli (French and Latin teacher).

Other staff complete the 'Emergency First Aid' course at least every 3 years.

There are regular staff training sessions (run by external agencies if appropriate) on dealing with medical emergencies in the school. The sessions include dealing with asthma, diabetes, epilepsy, anaphylactic shock and how to use an Epi-pen. The



various procedures for getting assistance and an ambulance are covered. A list of children with medical conditions is made available to all relevant staff and discussed regularly at staff meetings.

There must always be at least one person qualified in first aid on site when children are present (including when offsite e.g. during sports lessons).

Training in paediatric first aid continues to be a requirement for the EYFS, with at least one person with a current certificate on the premises at all times when children are present and accompanying children on outings.

HOW ACCIDENTS ARE TO BE RECORDED AND PARENTS INFORMED

The school is aware of its duty to inform parents of any accident or injury sustained by the child on the same day, or as soon as reasonably practicable, and any first aid treatment given.

Any accidents (which are more than something very minor like a small bump (not to the head) must be recorded in the School's Official Accident Book. This is kept by the playground door. Once completed by the member of staff who witnessed the accident, it must then be shown and counter signed by a member of the SLT. Parents must also be informed and a bump form completed (parents/carers must then sign this to show they have read it and are aware of the accident). Bump forms should also be completed by a member of staff for all minor accidents (e.g. during playtime). This is a whole school procedure and includes accidents which occur within the EYFS setting.

NOTIFICATION TO PARENTS REGARDING CONTAGIOUS ILLNESS

Should a child be diagnosed with a contagious illness, such as chicken pox, a letter will be sent to all parents informing that a pupil in the school (and specific class) has been diagnosed. This letter will advise of symptoms also.

NITS

Should we be aware that a child has hair lice (nits) we will speak to the parents of that child (unless it is the parent who has informed us) and request that this is treated urgently. We will send a letter to the parents of the other children in the class to inform them that nits have been identified in their child's class, what to look out for and how to treat the problem.

PARENTAL RESPONSIBILITY

Parents must accept responsibility for their child's welfare and are asked not to send them into school if they are infectious, have been suffering from diarrhoea or vomiting in the previous 48 hours or are unable to attend lessons. Parents will be informed and asked to collect their child if they become ill or sustain an injury and are unable to continue with lessons. Children may not go home unless permission has been given by the Head for them to leave. The Deputy Heads may give permission in the absence of the Head. Children will not be sent home to an empty house.

CONFIDENTIALITY

Medical information will be managed within the guidelines and procedures identified in the school's data protection policy. All staff will also abide by the school's child protection and anti-bullying policies and ensure that where issues concerning child protection are raised that the procedures are followed. Where children make staff aware of issues that have pastoral implications (such as bullying) the children will be strongly advised to share the information with a member of the staff team so that appropriate support mechanisms can be put in place.

ACCESS TO FIRST AID KITS

First aid kits are accessible at all times and include appropriate content for use with children. All classrooms are fully equipped with a first aid kit and first aid kits are also located in the school office, the school hall, IT room, entrance hall, playground

door, sports department and the staff room. The First Aid kit in the EYFS Classroom is stored in the top cupboard above the Teaching Assistant's desk.

The First Aid Coordinator (Dianne Redbond), checks these each term to ensure that the first aid kits are fully stocked at the start of each term. Staff are responsible for ensuring they remain fully stocked during the term if items are used. More useful information for staff is available in the Staff Handbook.

Arrangements for pupils with particular medical conditions (for example, asthma, epilepsy, diabetes)

PRESCRIBED MEDICINES

Staff must not administer medication of any kind (including eye drops, throat lozenges, creams, etc.) without the prior written consent of the parent.

Medicines should only be taken at school when essential; that is where it would be detrimental to a child's health if the medicine were not administered during the school day. Parents must provide written consent to the school by completing and signing the 'Permission for the school to supervise "pupil self-administration" form' (found in the Parents' Handbook), which details the child's name, what the medication is, why it is being taken, the dosage, time and method of administration. A record of medication given is kept in each classroom, detailing the date and time medication is given, the medication and dosage and the member of staff administering the medication.

Parents must bring in the medication in its original container and hand it in at the start of school to the School Office. The First Aid Officer or a First Aid Trained member of staff will then supervise the child taking the medication as prescribed. Pupils are not to carry any medicines on their person during school hours (see below for exceptions).

Parents must ensure that any medicines provided for use at school are in date and replacements are sent in prior to their expiration. Expired medicines cannot be administered.

INHALERS AND EPIPENS

Any child who needs to use an inhaler for asthma should carry it with them at all times, and will be allowed to use it as necessary. A spare named inhaler must be brought in to be kept in an agreed place. Any child prescribed an Epi-pen carries it with them at all times. Their second Epi-pen will be stored in an unlocked cupboard in an agreed place so as to be easily accessible if required in an emergency. Expiry dates for all medication kept in school will be checked regularly by the First Aid Coordinator. Parents will be informed in advance of expiry date that a replacement is required. Any food or other allergies will be recorded in the pupils' file and discussed at staff meetings to ensure all staff are aware of any allergies. Photos of pupils with allergies are shared with all staff, can be found in the staffroom (on the inside of a closed cupboard door for confidentiality purposes) and in each first aid kit along with a copy of the emergency contact details.

All medicines with the exception of Epi-pens must be collected at the end of the academic year. Reminders to this effect will be sent out. Any medicines not collected on the last day will be disposed of. Epi-pens may remain in the school, and must be replaced prior to expiry dates. It is the responsibility of parents to ensure that in date Epi-pens are held by the school. The school will make reasonable checks to ensure that those held are in date.

If prescribed medicine / topical cream needs to be administered at school, parents must complete a permission form, which can be found in the Parent Handbook or is available in the School Office. All medicines will be kept in the School Office / staff refrigerator and may only be administered in the presence of a First Aid Trained member of staff.

Medicine* and topical creams will only be administered if they have been prescribed. The label on the medicine must state the amount and frequency of the required dosage. (*This includes Nurofen / ibuprofen which will not be administered without a prescription.)

The school keeps a supply of Calpol and Piriton, which may be administered in extreme circumstances. This will only be done with written parental consent, and will be administered by a First Aid Trained member of staff.

SIGNS – WHAT TO WATCH OUT FOR

Asthma

The main symptoms of asthma are:

- wheezing (a whistling sound when you breathe)
- shortness of breath
- a tight chest – which may feel like a band is tightening around it
- coughing

Allergic Reactions

If you are allergic to substances in the air – such as pollen, animal dander and dust mites – the symptoms usually include:

- rhinitis – sneezing and a blocked, itchy or runny nose
- conjunctivitis – itchy, red, streaming eyes
- asthma – wheezing, breathlessness and a cough

If you are allergic to a certain food or medication, symptoms can include:

- urticaria (hives) – a raised, itchy, red rash
- swelling – usually affecting the lips, tongue, eyes and face
- abdominal pain, vomiting and diarrhoea
- atopic eczema – the skin becomes dry, red and cracked

Eczema

Eczema is a condition that causes the skin to become itchy, red, dry and cracked. It is a long-term (chronic) condition in most people, although it can improve over time, especially in children. Atopic eczema can affect any part of the body, but the most common areas to be affected are:

- backs or fronts of the knees
- outside or inside of the elbows
- around the neck
- hands
- cheeks
- scalp

People with atopic eczema usually have periods when symptoms are less noticeable, as well as periods when symptoms become more severe (flare-ups).

HYGIENE PROCEDURES FOR DEALING WITH THE SPILLAGE OF BODY FLUIDS

Special care should be taken when dealing with the spillage of bodily fluids (vomit, urine, faeces, blood etc.). Disposable gloves should be worn. These can be found in all first aid kits. The area should be isolated if possible and then treated with the Emergency Spillage Compound, a yellow sachet located in all first aid kits. This will reduce the spillage to a gel allowing for prompt and easy clearance. The gel waste should be cleared (a dustpan and brush can be used) and placed in a plastic bag, knotted tightly and removed to an outside bin. The affected area should then be further cleaned with a sanitising wipe found in the designated First Aid area in the Staffroom cupboard. Additionally, a mop and bucket and additional cleaning products are located in the locked cleaning products cupboard in the cloakroom next to Class 6, should this be required. (padlock code 1947)

RIDDOR IS THE REPORTING OF INJURIES, DISEASES AND DANGEROUS OCCURRENCES REGULATIONS 1995.

For pupils and for staff, in certain specific instances the school is required to make a report in accordance with the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR).

All RIDDOR reports must be made as soon as possible and within ten days of the accident occurring. The Riddor report will be completed by the member of staff who has the greatest involvement with the incident (if appropriate) after consultation with the head. If RIDDOR involves a member of staff and there is nobody else involved, a member of SLT will complete the RIDDOR.

Reportable incidents are made at <http://www.riddor.gov.uk/reportanincident.html>.

Advice on when a report must be made can be found at <http://www.hse.gov.uk/pubns/edis1.pdf> or by telephoning the HSE guidance line on 0845 300 9923.

WHEN TO CALL AN AMBULANCE?

In situations where anyone has serious concern about a child's, visitor's or member of staff's health, everyone has the responsibility to call an ambulance (999) if there is any doubt at all about what to do – this includes visitors, staff and pupils.

STAFF MEDICATIONS

Staff must inform the head if they are taking any medication or develop any medical conditions which may affect their ability to care for children.

Any staff medication must be securely stored at all times. Children must not be able to reach or touch any medication.



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