

Medical & First Aid Policy

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1 INTRODUCTION

It is the responsibility of the Governing Body of the School, under the *Health and Safety at Work Act 1974 (HSWA)* to ensure that, appropriate First Aid provision is made available:

- for pupils, staff or visitors at all times on the School premises
- for staff and pupils during off-site visits and activities

It is the School's policy that:

- a sufficient number of personnel are qualified to administer First Aid, and that appropriate equipment is always available during School teaching hours
- appropriate First Aid arrangements are made whenever staff and pupils are engaged in off-site activities and visits

2 HEALTH & SAFETY COMMITTEE RESPONSIBILITIES

The **Health & Safety Committee** reports to the Governing body on Health and Safety issues. The committee comprises of:

- the School Health and Safety Officer (the Assistant Bursar)
- representatives from the teaching staff of the Prep & Senior Schools, the Sports staff, catering, maintenance, administrative departments and the School Nurse

It is responsible for:

- regular review of the Health & Safety Policies
- reporting and making recommendations to the Governing Body
- acting as a clearing house for complaints
- investigating incidents

3 RESPONSIBILITIES OF OTHERS

3.1 The School Nurse is responsible for:

- providing First Aid support during School hours
- maintaining records of pupil injuries/illness/and accident reports of all injuries on and off-site and to visiting pupils
- informing staff of those pupils who have medical conditions (on a need to know basis and within the realm of confidentiality)
- updating all medical information on iSAMS.
- ensuring that appropriate First Aid cover is available at all sports activities during the School day
- informing parents/guardian of injuries or illness that cause concern
- organising the transfer of injured pupils by ambulance to hospital
- liaising with the Health and Safety Committee on First Aid issues
- organising provision and regular replenishment of First Aid equipment



- helping to prevent the spread of infection in School and work closely with Public Health England and/or the local Environment Health Department as appropriate
- providing on-going support to pupils with medical and emotional needs
- providing staff with medical training where appropriate
- the dispensing of all medication within the School with the exception of emergency medication, such as inhalers and adrenaline pens, where other employees may need to assist in the event that the School Nurse is not present

3.2 Qualified First Aiders are responsible for:

- responding promptly to calls for assistance
- providing First Aid support within their level of training
- summoning medical help as necessary
- recording details of treatment given on the online Accident Report Forms

3.3 Sports masters are responsible for:

- ensuring that First Aid kits are taken to all practice sessions and matches
- making themselves aware of all pupils' medical conditions and the care they require as documented in their Individual care plans, and passing the information on when needed
- ensuring the safe transfer of injured pupils into the care of the parent/guardian or medical care
- completing the online Accident Report Forms
- ensuring a concussion log is kept, recording details of any pupil who has had a concussion injury and when written notification has been received that that a doctor has assessed them. For further details, see appendix 4
- ensuring that appropriate First Aid cover is available at all sports activities after the School day and at weekends

3.4 All staff in charge of pupils:

All staff in charge of pupils are expected to use their best endeavours at all times, particularly in emergencies, to secure the welfare of the pupils at the School in the same way that parents might be expected to act towards their children.

All staff must ensure that they are familiar with the School guidance on the emergency care of an injured pupil, the Hospitalisation Procedure (Appendix 1), which details guidance on emergency treatment, and the Protocol for calling an ambulance (Appendix 1A).

They are expected to:

- accurately submit all accidents on the Accident Report Forms and forward these to the Senior Nurse and Assistant Bursar
- carry out risks assessments for any off-site trips and ensure adequate first aid provisions are taken
- discuss any medical concerns with the School Nurse and familiarise themselves with pupil's medical condition and their care, if appropriate
- ensure that they are familiar with any pupil's Personal Emergency Evacuation Plan (PEEP) if any pupils in their care has impaired mobility



4 FIRST AID TRAINING

- **4.1** The Health and Safety Officer (the Assistant Bursar) carries out continuous risk assessments to ascertain:
 - the numbers of First Aiders needed
 - the equipment and facilities needed

4.1.1 An Advanced First Aider

An Advanced First Aider is a person qualified to give immediate help to casualties with common injuries and illnesses and those arising from specific hazards in School and must:

- complete a 3-day HSE-approved "First Aid at Work" (FAW) training course
- hold a valid certificate of competence; the certificate is valid for 3 years (the School Nurse will
 organise refresher training before the expiry date)
- attend annual onsite refresher training

4.1.2 A First Aider:

A First Aider will, in the absence of an Advanced First Aider, take charge of an injured person until an Advanced First Aider arrives and takes responsibility for First Aid equipment. He/she must complete either an Emergency First aid (1 day) or Paediatric First Aid (2 day) HSE-approved training course in basic First Aid.

4.2 First Aid Training

First Aid training includes information and emergency treatment for asthma, anaphylaxis, diabetes and epilepsy.

- **4.2.1** Chartwells (catering) staff are offered training in First Aid and anaphylaxis treatment enabling them to recognise food allergies.
- **4.2.2** Year 9 pupils are also offered First Aid training through Enrichment.
- **4.2.3** As the administration of medication requires medical knowledge, individual training will be provided for the relevant First Aider by the School Nurse prior to any overnight trip.
- **4.3** All courses are arranged on site by the School Nurse & the Senior Deputy Head (Pastoral) and are delivered by instructors whose training and qualifications are approved by the HSE.
- **4.4** Members of staff who agree to become Advanced First Aiders / First Aiders do so on a voluntary basis unless the provision of First Aid cover is part of their contract of employment.



- **4.5** All Advanced First Aiders/ First Aiders are fully indemnified by Wellingborough School against claims for negligence, provided that they are suitably trained and are acting within the scope of their employment and within the School's guidelines for the administration of First Aid.
- **4.6** A list of qualified Advanced First Aiders / First Aiders is regularly updated and published on the P: Drive and sent to all staff on a half termly basis. The School ensures that there is an Advanced First Aider/ First Aider available in each teaching and administrative department on the School site.

5 FIRST AID BOXES AND LOCATION:

- **5.1** The School Nurse is responsible for stocking and checking the boxes on a regular basis. The contents of the First Aid box may vary depending on needs of a particular location (for example, blue detectable plasters and burns dressings in kitchens). Alcohol gel is included in First Aid bags for away trips where hand-washing facilities may not be readily available.
- **5.2** First Aid boxes are green and marked with a white cross, and are sited at the locations shown in Appendix 2 to this Policy, along with:
 - Protocol for calling an ambulance (Appendix 1A).

A location list of all First Aid Boxes is maintained by the Medical Room and is posted in all Common Room areas around the School.

- **5.3** First Aid boxes are kept:
 - on all School minibuses
 - in all Receptions
 - by all sports coaches for practices and matches
 - in the Thatched and Tea Pavilions (on the games fields)

There are a number of First Aid bags kept in the Medical Room, which are available to be used for all trips and returned afterwards.

6 FIRST AID FOR ACCIDENTAL SILLAGE TO EYES

Eyewash stations, specifically for emergency eye irrigation, are located in all Senior School and Prep School laboratories and the Art Department and are clearly identified by Eye Wash Irrigation posters.

If an accidental spillage occurs to the eye, eye irrigation must be carried out immediately for at least 10 -15 minutes, ensuring the water runs away from the good eye and the Medical Room notified. Posters on emergency treatment for Chemical Spills and Eye Care are posted in visible positions in all Science Laboratories.

7 FIRST AID PROVISION FOR GAMES



7.1 General

The master-in-charge must ensure that a First Aid box is at each pitch side during each home and away fixture or training session. This ensures that pupils with open wounds/nose bleeds can be provided with a suitable dressing to stem the bleeding at the pitch side and do not need to walk across the pitches with uncontrolled bleeding.

7.2 Home Fixtures

The Medical Room is responsible for ensuring that First Aid cover is provided at all School matches involving visiting teams during the School day. The Directors of Sport are responsible for arranging the cover for matches after School and at weekends.

If a hospital transfer is required (9) 999 should be dialled and the Pupils Hospitalisation Procedure followed.

7.3 Away fixtures

While the hosting school will usually provide the appropriate level of First Aid cover, the Wellingborough master-in-charge will:

- take a separate First Aid box for each fixture
- familiarise themselves with the medical conditions of all pupils in their charge and be aware of care they may require as detailed in their Individual Care Plans/ asthma plans
- ensure pupils who carry adrenaline pens/ inhalers have them with them. If they require adrenaline pens, they must be reminded to carry two. For Prep pupils this will require the sports teacher to take the pupils spare emergency medication bag to the event
- ensure that the injured Wellingborough pupil has received appropriate First Aid care, particularly if the injured party has received a head injury (Appendix 4), an Injury Report Form has been completed and the School Nurse informed at the earliest opportunity
- notify parent/guardian of the nature of the injury
- make sure that suitable arrangements have been made for the transfer of pupil care to the parent

In the event of hospitalisation, and in the absence of parents, a member of staff will be allocated to accompany the injured pupil to hospital and remain with them until the parent/guardian arrive. If a staff member has any concerns regarding the First Aid provided at an away sports fixture for pupils, they must inform the Director of Sports. It may be that an extra staff member with First Aid qualifications will have to accompany the team to the venue.

7.4 School Practice and Training

First Aid cover will be provided during School weekday working hours for School practice and training as follows:

Playing fields: Medical Room

Should an injury occur during play, the pupil must be accompanied to the Medical Room or the School Nurse called to the pitch to assess the injury.



If a pupil is unable to return before the end of the sports activity, the sports teacher should call into the Medical Room at the end of play and confirm that:

- the injured person has been attended to
- suitable arrangements have been made for the pupil to be collected by a parent/guardian or transferred back to the School in the care of the master-in-charge and delivered into the care of the School Nurse or parent/guardian

Pupils who carry Adrenalin Pens or Inhalers will be reminded that they must inform the sports master/First Aider of their location prior to the commencement of the match.

8 FIRST AID PROVISION FOR EDUCATIONAL VISITS (EVs)

8.1 A risk assessment is carried out by the trip leader, prior to a School trip, to ensure that adequate provision is made for the needs of individual pupils (e.g. ensuring that, if a pupil has an Adrenaline Pen, an accompanying member of staff has had training in dealing with Anaphylaxis).

The risk assessment will address:

- any specific medical issues relating to the party
- any additional training required to meet the specific needs of individuals with medical conditions within the party
- ensuring that the trained First Aider on the trip has received medication training if they are to administer any medication to pupils whilst on a residential trip
- ensure pupils who carry adrenaline pens/ inhalers have them with them. If they require adrenaline pens, they must be reminded to carry two. For Prep pupils, the staff will be required to take the pupils spare emergency medication bag with them when they attend anything offsite
- provision of adequate health insurance
- the level of medical services in the host country and their health policies on communicable disease e.g. swine flu
- the need for any additional immunisations or anti-malarial medication

Please refer to the sections concerning Educational Visits in the Guide to the School for more details.

8.2 The trip leader is responsible for collecting the First Aid box and emergency

medication required by individual pupils (Adrenalin Pens/Inhalers, etc.) from the Medical Room before all School trips. Staff within the Senior School are also responsible for making sure that individual pupils have brought their own medication with them, before departing from School.

8.3 Managing Medicines on Trips & Outings



- If the pupils are going on outings, the trip leader and other staff accompanying them must be aware of any long-term medical conditions and medication required for any individual. In the Prep School, their individual emergency medication box will accompany them.
- For any Prep residential trips, a locked box of homely remedies will be provided. This medication can ONLY be administered by the trip First Aider who has received additional medication administration training, in accordance with both the homely remedies protocols and, with prior written consent provided by the parents on the 'Medication Administration Consent Form'. Before any medication is administered, a phone call to the parents must be made to gain additional verbal consent as detailed in the EV medication protocol. Any medication given will be documented by the member of staff and on return from the trip; the member of staff will inform the School Nurses who will file the documentation in the pupil's medical records.
- As the administration of medication requires medical knowledge, individual training will be provided for the relevant First Aider by the School Nurse.
- For any individual where a short-term course of **prescribed** medication is required during the trip, it should be provided by the parents in a pharmacy labelled box with the name of the pupil, along with the name of the medication, form, dose, expiry date and dosage regime. The label must also contain the dispensing pharmacy logo and their address details.
- For any individual who requires any **over the counter** (OTC) medication or treatments, in addition to those supplied by School, it should be provided by the parents and will be administered provided that;
 - The medication is in its original box and the dose and written instructions, which the parents give, match exactly the instructions, which are on the packaging.
 - The pupils' age also makes the OTC medication appropriate for that age group.
 - The purpose of the medication does not make it obvious that the pupil should not be on the trip in the first place.
 - That the trip First Aider understands the purpose of the medication and is happy to give it out on behalf of the parents.
- If the pupil has been or will be, requiring the medication for longer than a 72-hour period, the parents will be required to confirm to the trip First Aider that this has been agreed as being appropriate by a doctor, either through a face to face or telephone consultation.
- All medicines supplied by parents, and to be administered by staff, must be accompanied by an individual '**Request for staff to administer medication**' form. The appropriately trained First Aider accompanying the pupils will then administer the medication as requested and document appropriately; on their return, the member of staff will inform the School Nurses who will file the documentation in the pupil's medical records.
- All of the medication supplied by parents will be kept in a locked box or bag with the exception of any emergency medication (i.e. inhalers and adrenaline pens).
- Any remaining medication supplied by parents MUST be returned to them at the end of the trip by the Trip First Aider.
- Within Senior School, parents of any pupil under 16 years of age will be required to complete a 'consent to self-medicate' google document for each residential trip attended. Those pupils over 16 years will be able to self-consent. Any medication that might be required on the trip should be supplied by the parent's, or if the pupil is over 16 years of age, they can supply it themselves. Any medication that is self-administered should be documented by the trip First Aider; on their return, the member of staff will notify the School Nurses who will file the documentation in the pupil's medical records. If the parent's do not feel that the pupil has the capacity to self-medicate, they should inform the School in writing.



• If a pupil who is on medication has to be taken to hospital, their medication will be taken with them in the pharmacy box clearly labelled with the pupil's name and all the relevant medication details mentioned above.

9 FIRST AID, ACCIDENT REPORTING AND INFORMING PARENTS

9.1 Reporting of Accidents to School Health and Safety Officer

- **9.1.1** A report on any accident, however minor, that occurs during any School activity must be submitted online using accident reporting, via Smartlog, and then report accident/incident.
- **9.1.2** Smartlog is available to each member of staff through their personal login that is given to them during their induction to the School.
- **9.1.3** If an injury occurs during away games or School trips, a completed accident form must be submitted and must also be copied to the School Nurse at the earliest opportunity. The Nurse will make follow up calls to parents and ensure relevant staff are aware of injury and that the accident log is updated as soon as is practicably possible.
- **9.1.4** The Assistant Bursar must be informed if an accident occurs because of unsafe or faulty equipment and this must be detailed on the accident log.
- **9.1.5** The accident must be logged by the member of staff in charge of the activity. If an injury occurs when a pupil is unsupervised, the report is completed by the first person to give treatment, the School Nurse or the First Aider on duty.
- **9.1.6** All emergency contact numbers for parents/guardians/and other designated contact number are available on iSAMS. All serious/significant injuries/head injuries are reported to the parents at the earliest opportunity by phone. If unable to contact parent /guardian, the designated emergency contact number must be used.
- **9.1.7** All information on the register is confidential and all medical notes are stored within a secure locked cupboard or the secure computer drive within the Medical Room. Information is shared with staff on a need-to-know basis only, in compliance with **Data Protection Act 2018**.
- **9.1.8** All accidents (near misses, potential hazards and damage) will be investigated by the Assistant Bursar who will be responsible for ensuring that corrective action is taken, where appropriate, to prevent a recurrence. If appropriate, the accident will be reported to the HSE under **RIDDOR** (Appendix 6).
- **9.2** Reporting of Injuries, Diseases and Dangerous Occurrence Regulations 1995 (RIDDOR) RIDDOR places a legal duty on Employers and people in control of premises to report the following:

Please refer to Appendix 6

9.3 Additional reporting



A written record is kept of all significant accidents that occur both on the premises and off the premises during away trips/games. Any pupil who is injured on site will be seen by the School Nurse or in her absence the First Aider on duty.

The School Nurse will record a report of the injury within the pupil's medical records if the injury has occurred on site and inform the parents of the injury. If the accident occurs off site, the masterin-charge will inform the School Nurse at the earliest opportunity so that she can make a follow up call to parents, if necessary discuss care on return to School. If a pupil sustains an injury that requires crutches to mobilise themselves around the School, the House Master/House Mistress/Club President/Class teacher will complete a **Personal Emergency Evacuation Plan** (PEEP) to ensure the individual is able to safely evacuate in the event of a fire. A summary of the details collected will be entered onto the master PEEP log and reviewed as required. The information will be forwarded to Medical and the Assistant Bursar; it is the Assistant Bursar's responsibility to address any additional requirements that may have been highlighted such as the use of a lift / ramp.

An audit of serious injuries occurring to pupils and staff on site or on residential trips is compiled and presented at the Health & Safety meetings by the Assistant Bursar.

Where a significant injury occurs, an "Injury Report Form" will be emailed by the School Nurse to the relevant Headmaster/mistress or Club President (as appropriate), Assistant Bursar and the pupil's Form Teacher or Tutor.

10 MONITORING ILLNESS IN SCHOOL

- **10.1** The Governing Body of Wellingborough has a duty of care to protect staff and children. The nurse monitors the level of infection in the School using information reported on iSAMS.
- **10.2** If the School Nurse is aware of any increase in illness or any concerns about infections, she will inform the Headmaster and then liaise with **Public Health England** on 020 7654 8000 during office hours 0900-1700 and will keep staff and parents informed as directed by them. Many infectious diseases are most transmissible just before symptoms are present. She will therefore contact parents to collect a pupil who appears unwell during the School day.
- **10.3** Pupils and staff are advised to stay at home until they are fully recovered. Public Health England recommends that those presenting with diarrhoea or vomiting should remain at home for a period of 48 hours after the resolution of symptoms and should be excluded from swimming for two weeks following the last episode of diarrhoea.
- **10.4** In the event of a severe outbreak of diarrhoea and vomiting the nurse will inform the Headmaster and then liaise with Public Health England and will advise staff to be diligent in reminding pupils of the importance of hand washing with soap and water.
- **10.5** Further information, on the recommended period that pupils should be kept away from School following gastro-intestinal illness, respiratory infections, rashes and skin infections that we follow under Control of Cross infection and Communicable Disease (as advised by the Health Protection Unit) can be found on the P: Drive. Posters on **"Guidance on Infection Control in Schools and**



other Child Care Settings" by Public Health England are posted in prominent positions around the School.

10.6 A coronavirus, COVID-19, is a type of virus. Coronaviruses are common across the world. Most people infected will experience mild to moderate respiratory illness and will recover without requiring special treatment. Coronavirus can cause more severe symptoms in older people and those with underlying health conditions. The most common symptoms are: a new continuous cough, high temperature and a loss of, or change to, your sense of smell or taste. The main route of transmission is from cough and sneeze droplets. As a School, we will follow and adhere to the guidance set out by gov.uk. For more information, please use the links below. If there is a suspected case, the correct and most current procedures must be followed and the relevant members of staff must be informed.

https://www.nhs.uk/conditions/coronavirus-covid-19/

https://www.gov.uk/government/collections/guidance-for-schools-coronavirus-covid-19

11 THE MEDICAL ROOM AND THE SCHOOL NURSE

11.1 Location and hours

The School Nurse is located in the Medical Room situated opposite the Sports Hall and next to the MFL Department and main car park.

The School Nurse is on duty from 08.00 – 16.30 daily and can be contacted on extension 254 or mobile 07968 872768 during the School Term.

11.2 First Aid Cover in the absence of the School Nurse

If the Nurse is absent, she will ensure that cover is provided by a First Aider. The three Receptions, the Senior Deputy Head (Pastoral) and the Assistant Bursar will also be informed of her absence. The administrative staff on duty from 09.00-16.00 will always be aware of the whereabouts of the on-duty Nurse/First Aider and he/she can always be contacted by them on his/her mobile phone.

11.3 Responsibilities

The School Nurse along with staff who work with pupils are responsible for safeguarding pupils in their care. The National Service Framework for England 'Every Child Matters' highlights the five outcomes that are most important to children:

- Be Healthy
- Stay Safe
- Enjoy and Achieve
- Make a Positive Contribution
- Achieve Economic Wellbeing

11.4 Screening



To promote wellbeing and identify individual needs, all new pupils to the School have the opportunity to meet with the School Nurse. Parents will be asked to complete a Health Questionnaire giving details of medical history, current medical conditions, allergies, immunisations, and any emergency medication required. Consent will be sought separately for the NHS Nurses to complete any screening.

Pupils' consent will always be requested before providing any First Aid treatment unless in a life threatening situation, when the person is unable to give consent. All information shared with the Nurse by a pupil is treated as confidential. If the nurse feels it is in the pupil's best interest to breach their confidentiality, for example, in case of safeguarding or if the pupil's life was in danger, they must inform the pupil prior to disclosing any confidential information to the relevant DSL.

- Senior School Senior School DSL & Senior School Deputy DSL
- Prep School Prep School DSL & Prep School Deputy DSL

11.4.1 The screening will include:

- height, weight, BMI (in line with government targets to reduce childhood obesity); this
 information may then indicate that further intervention and support may be needed by the
 pupil.
- Hearing and vision for Reception aged pupils; this information may then indicate that further intervention and support may be needed by the pupil.

Support will be given by the Nurse as appropriate and discussed with parent i.e. monitoring weight /advice on diet and privacy is ensured when a pupil visits the Medical Room to allow them to express any concerns.

11.5 Visiting the Medical Room

11.5.1 Pupils and staff who are ill can visit the Medical Room at any time during stated hours. If a teacher has a concern regarding a pupil he, or she, should call the Nurse on Ext 254 or send the pupil, accompanied by a responsible person, to the Medical Room.

All visits to the Medical Room are recorded in the Medical Module on iSAMS. The preserving and destroying of pupil's health records are based on the Department of Health (1999) Guidance HC 1999/053. Consent will always be obtained from a pupil before any First Aid treatment is administered unless it is a life-threatening situation.

- **11.5.2** If the pupil shows more serious symptoms, for example:
 - shortness of breath (follow guidelines on asthma)
 - dizziness or feeling faint
 - suspected hypoglycaemic attack, due to diabetes
 - seizures (follow guidelines on epilepsy)
 - bleeding

Or presents with:

- an allergic reaction (follow guidelines on anaphylaxis section 12.2)
- a neck or spinal injury



- a suspected fracture
- head injury (follow policy on head injury)
- any other condition that causes concern

The School Nurse must be called to attend to the pupil.

- **11.5.3** Pupils in Year groups up to and including Year 11 who have visited the Medical Room and need to go home because of their condition must be accompanied by a parent or guardian.
- **11.5.4** Sixth Form pupils who are ill and whose condition warrants them going home may do so after parents/guardians have been informed and have consented to them going home unaccompanied. The pupil is then required to ring the Medical Room on their arrival home.

The relevant School Office must be informed of any pupils who are sent home and they will mark them as absent on iSAMS.

11.6 Administering Medication during the School Day

To enable the administration of homely remedies to a pupil under the age of 16, written consent will be required in advance. Additional verbal consent will be sought at the time of administration for pupils in Year 6 and below. Pupils in Year 7 and above who are under the age of 16, will be assessed on an individual basis as to whether they have the capacity and competence to verbally consent to medication at the time of administration; if, however there is any doubt or if the parents so request, verbal consent would be sought at the time from the parent or guardian.

Telephone consent (Additional to Signed Consent Forms) will be sought:

- for all pupils in Year 6 and below who are to be given a non- prescribed medicine, it is important to know if any previous dose has been given and when. This also alerts the parent that the child is not well
- for any pupil in Year 7 and above who is unsure of what medication they may have been given and when
- if an accompanying letter is not clear and needs clarification

Prescribed medication can only be administered by the School Nurse when he/she has written consent from the pupil's parent/guardian. This is requested in the form of the **'Request for staff to administer medication**' form.

Pupils over the age of 16 years can self-consent for medication. If, however the parents do not feel that they have the capacity to do so, they should inform the School in writing.

Pupils must not carry medication on their person, or store any within their locker/ personal belongings with the exceptions of emergency medicines (i.e. adrenaline pens and reliever inhalers) or those for long-term medical conditions as detailed below. Parents who wish their children to take medicines whilst in School should arrange for them to be administered through the School Nurse. All medication will be stored in a locked cupboard / fridge in the Medical Room.



Pupils with asthma must have immediate access to their reliever inhalers. Please refer to the policy on Pupils with Asthma in the School Handbook.

Pupils with allergies must have immediate access to their antihistamines and adrenaline pens. Please refer to section 12.2 of this policy.

Pupils with long-term medical conditions that require regular medication throughout the School day will be allowed to carry it on their person at the Nurse Manager's discretion, in accordance to their ICP (Individual Care Plan), and with consent from their parents and the Head teacher of the relevant part of the School.

All spare emergency medication provided by the parents will be labelled and kept in an unlocked cupboard within the medical room.

Employees are required to keep any personal medication with the exception of their emergency medication (such as an inhaler or adrenaline pen) within a locked drawer or cupboard.

Please follow the guidelines detailed in the Administration of Medicines in the Staff Handbook for self-medication. No one should administer medicines to a pupil unless authorised to do so.

Stock medication and all medication administered will be checked to ensure all medicines are within the expiry date. Parent will be informed when medication is administered to a pupil either by note or by telephone as appropriate. All expired medication will be safely disposed of by the School Nurses.

For full details regarding the administration of medicines in School, please refer to the Administration of Medicines in School policy.

11.7 Fire procedures for the Medical Room

If a fire evacuation takes place, any pupils in the Medical Room who are capable of going to their normal assembly point should go there.

11.8 All pupils with impaired mobility due to injury will have a Personal Emergency Evacuation Plan completed by House Master/ House Mistress/ Club President/Class teacher If a pupil cannot be safely moved, then the School Nurse should send a message (via Reception staff) to the Control Point. A decision will be made by the incident officer as to the safe transfer of the pupil.

12 GENERAL PROCEDURES

12.1 Pupils with medical conditions

All parents will be asked by means of a medical form when their son/daughter starts at the School about their son/daughter's past and current medical history. To ensure the medical information that is held then remains current, it is the parents' responsibility to provide written information regarding any changes to their medical circumstances. To do this we request that parents complete the 'Change in Medical Circumstances Form', which can be found on the Medical page of the School website.



Support is given to pupils with all on-going conditions such as diabetes, epilepsy, asthma, reduced mobility or any other medical conditions. The parents of these pupils are invited to meet with the School Nurse so that their son/daughter's needs can be assessed and documented, and if required, an Individual Care Plan (ICP) will be written. All ICP's are reviewed annually or whenever a pupil's needs change. Pupils, their parents and staff are then aware of how they can obtain help if the pupil feels unwell whilst at School.

The names of pupils with medical conditions are highlighted on iSAMS with a medical alert. For those pupils with an ICP, a copy of it will be kept in the Medical Room, the Lower-Prep staff room if the pupil is in Year 2 or below, the catering office and will be available on iSAMS. Pupils should also carry a copy of their ICP on their person. When a pupil attends any Educational Visits, a copy of the care plan will be given to the nominated trip First Aider.

If emergency medication is required (i.e. adrenaline pens/inhalers) pupils should carry this with them at all times. In Senior and Upper Prep, this should be kept in the zipped pocket within their blazer and in Lower Prep, it should be provided in a labelled bag that can be taken with the pupil wherever they go.

Spare emergency medication should be provided by the parents and will be kept in the Medical Room within individually named yellow bags. Parents are notified of expiry dates of such medication and it is their responsibility to provide replacement medication and dispose of the expired medication.

For School trips and fixtures, Senior School pupils are expected to take all their own emergency medication with them and in the case of adrenaline pens, they should carry two. In Prep, in addition to the medication that the pupil carries, the spare emergency medication held in School will be collected by the member of staff-in-charge of the School trips/fixtures and taken on their behalf. For further details on this, please refer to the Administration of Medicines in School policy.

The School's policy with respect to food allergies is available below and in summary in the Staff Handbook. The School's policies for asthma, diabetes and epilepsy can be found on the P Drive and Smart log.

The School Nurse is available to advise teachers on the use of adrenalin pens and inhalers and answer any concerns they may have.

The School Nurses will provide annual awareness training in anaphylaxis, basic life support and asthma to all staff. They will provide additional awareness training of other medical conditions to the relevant staff as required or necessary for specific pupils.

12.2 Food allergies Managing Nut and Peanut Allergies

Anaphylaxis

Anaphylaxis is a severe allergic reaction at the extreme end of the allergic spectrum. The whole body is affected by the allergen, often within minutes of exposure, but sometimes hours later.



The causes of allergic reaction can include food such as nuts, seafood, eggs, wheat, insect stings and drugs but, on rare occasions, there may be no obvious cause.

How can Anaphylaxis be reduced?

Some schools choose to enforce "nut bans". The Anaphylaxis Campaign highlights several problems with this approach. For example, if a nut ban was to be implemented:

- It would not be possible to provide an absolute guarantee that the School would be completely nut free without going through every pupil's bag and pockets every day.
- There would be a risk that allergic children may be led into a false sense of security.
- Parents may ask for similar bans in relation to other foods.

The Anaphylaxis Campaign argues that there is a strong case that food allergic children will gain a better awareness of their allergies and learn avoidance strategies if they operate in an environment where allergens turn up unexpectedly. If they are educated to be vigilant, their growing awareness may pay dividends one day if, for example, a friend offers them a biscuit at a party. If they are used to a nut- free environment, they may take the biscuit without thinking.

The School has a number of pupils who have allergies to certain foods, insect stings and drugs. To minimise the risk of anaphylaxis occurring, we have taken precautions and are working towards being nut safe and allergy aware. The success of this policy requires the co-operation of *all* parents, pupils and School staff.

Parents of non-allergic children

We have a number of children at School who have food allergies, but would remind *all* parents of the danger that even small amounts of an allergen pose to these children.

Most severe allergic reactions are the result of ingestion but other reactions can be triggered by touching surfaces, such as computer keyboards, books or a piano, if these surfaces have previously been used by someone who has eaten nut products. Nuts and seeds are part of a healthy diet for those without allergy but we would appreciate that such pupils eat them at home rather than bring them into School, since there are pupils who do have severe nut allergies.

Therefore, we would ask all parents not to provide pupils with snacks that include nuts/sesame seeds.

Family's Responsibility

We ask the parents of allergic pupils to:

- Notify the School of the pupil's allergies. This should be done before the pupil starts at the School or as soon as a diagnosis is made, if they are a current pupil
- Meet with the Medical Team to write an Individual Care Plan (ICP) and to provide a second adrenalin pen, clearly labelled with the pupil's name
- Replace such medication after use or upon expiry
- Educate the pupil in self-management of his allergy, including:
 - 1. which foods are safe and unsafe
 - 2. the symptoms of allergic reaction
 - 3. how and when to tell adults about a reaction



- 4. how to read food labels or to ask an adult to read the label
- 5. provide emergency contact information and inform the School of any changes.

Ensure the pupil carries their emergency medication (i.e. adrenalin pen and inhaler if they have one) with them at all times – zipped up in their blazer pocket - during the School day and takes these and a second adrenaline pen to all off-site sports fixtures and trips.

Pupil's Responsibility

We ask each pupil with a food allergy to be proactive in the care and management of their food allergies and reactions and, in particular:

- not to exchange food with others
- to eat only food that is labelled with ingredients and to read the label before eating
- to be aware of other people eating around them and always to wash their hands before eating in case of contamination
- to know where their medication is kept in the Medical Room and, that they are responsible for carrying their medication (i.e. adrenalin pen and inhaler if they have one) with them at all times
- for Senior School pupils to take a second adrenaline pen with them on any off-site trips/activities
- to tell their friends of their allergies, so they know if an emergency should arise
- to wear a Medic Alert talisman at all times, if they own one
- to notify an adult immediately if they eat something they believe may contain the food they are allergic to
- to notify an adult immediately if they believe they are having a reaction, even if the cause is unknown.

Cakes and biscuits brought into School may have been contaminated in their preparation and our advice is therefore that pupils with nut/peanut or food allergies should avoid buying cakes at these sales.

School's Responsibility

The School's responsibility is to educate staff on the risks, prevention and responses to anaphylaxis and Members of the Anaphylaxis Campaign are invited to talk to both staff and pupils to raise awareness about the condition.

- The School ensures that staff are provided with appropriate training:
 - i. First Aid training is offered on site to all staff. This includes the recognition of the symptoms of anaphylaxis and how to deal with an emergency.
 - ii. Videos on anaphylaxis are available in the Medical Room and the Nurse on duty is available to show staff how to use adrenalin pens.
 - iii. Parents will be informed by the Medical Room of the expiry date of the adrenalin pens. The Nurse is on duty from 08.00 16.30 Monday to Friday, during term time.
- The School implements procedures to mitigate the risks presented by anaphylaxis:
 - i. Science laboratories must not use nuts in their experiments



- ii. Photos and names of pupils with severe allergies are posted in the Dining Office, all Work Rooms and that pupils' names are flagged on iSAMS and any EVs
- iii. Staff are strongly advised that if they have any concerns about a pupil presenting with even a minor reaction to summon the School Nurse.

Catering's Responsibility

- I. Catering staff are informed of pupils' allergies.
- II. Photographs of pupils with allergies are displayed in the kitchen area.
- III. Catering staff are offered First Aid training which covers the causes and symptoms of anaphylaxis and food allergies.
- IV. We cannot guarantee bought-in ready-made products such as bread and cakes are nut free. Manufacturers will not generally guarantee them to be nut free.
- V. The School catering staff will not knowingly use any peanut or peanut products in their cooking. Other nuts, such as flaked almonds, may on occasions be used but will always be visible and a note will be displayed to advise staff and pupils of their presence.
- VI. The School menus will be displayed on the School website and choices that use diary, fish or nut products will be marked so parents can discuss the menus with their children.
- VII. Any parent who wishes to discuss menu choices is invited to email or meet with our Catering Manager.

School Trips and Sports Fixtures

- Pupil allergies are highlighted on iSAMS and the allergy is identified by a medical alert icon. Relevant staff are informed of pupils' medical conditions.
- Staff are required to ensure pupils who carry adrenaline pens/ inhalers have them with them. If they require adrenaline pens, pupils must be reminded to carry two. For Prep pupils this will require the teacher to take the pupils spare emergency medication bag to the trip /event.
- All Prep pupils' emergency medication will be collected from the Medical Room by the master in-charge prior to all School trips.
- Prior to commencement of any game, pupils are advised to inform sports staff of the location of their adrenalin pen and/or inhaler.

Nut Allergies and School Cakes Sales/Birthday Cakes



Clubs and Houses regularly run cake sales for charity. Pupils with nut/peanut allergies who buy cakes at the sales cannot be guaranteed that these cakes are completely nut free.

Our advice is therefore that pupils with nut/peanut or food allergies should avoid buying cakes at these sales.

The organisers of the cake sales will also be required to display a sign to remind pupils with allergies to check ingredients.

12.3 Illness during Exams

A pupil who falls ill during an exam must be referred to the School Nurse immediately. Details of any medication that they are taking will be recorded by the Nurse along with clinical observations of blood pressure, temperature and pulse. The School Nurse will send a written report to the Exams Officer explaining the nature of the illness that caused the pupil to leave the exam room. A copy of the letter will be sent to the Headmaster/mistress and another copy kept in the pupil's file in the Medical Room.

12.4 Vulnerable Children

Some medical conditions make children vulnerable to infections that would rarely be serious in most children; these include those being treated for leukaemia or other cancers, on high doses of steroids and with conditions that seriously reduce immunity. Parents are requested to notify the School Nurse if their child falls into this category. As these children are particularly vulnerable to chickenpox, measles or parvovirus B19 and, if exposed to these, the parent/carer will be informed promptly and advised to gain further medical advice. It may be advisable for these children to have additional immunisations, for example pneumococcal and influenza.

12.5 Pregnancy

If a pregnant woman develops a rash or is in direct contact with someone with a potentially infectious rash, this should be investigated according to PHE guidelines by a doctor. The greatest risk to pregnant women from such infections comes from their own child/children, rather than the workplace. Some specific risks are:

- Chickenpox can affect the pregnancy if a woman has not already had the infection. If exposed to
 this, they should report it to midwife and GP at any stage of exposure. The GP and antenatal carer
 will arrange a blood test to check for immunity. Shingles is caused by the same virus as chickenpox,
 so anyone who has not had chickenpox is potentially vulnerable to the infection if they have close
 contact with a case of shingles
- German measles (rubella). If a pregnant woman comes into contact with German measles, she should inform her GP and antenatal carer immediately to ensure investigation. The infection may affect the developing baby if the woman is not immune and is exposed in early pregnancy
- Slapped cheek disease (parvovirus B19) can occasionally affect an unborn child. If exposed early in pregnancy (before 20 weeks), the pregnant women should inform whoever is giving antenatal care as this must be investigated promptly
- Measles during pregnancy can result in early delivery or even loss of the baby. If a pregnant woman is exposed, she should immediately inform whoever is giving antenatal care to ensure investigation



To assist anyone who is pregnant, once the School Nurses are aware that a pupil at the School has a confirmed case of any of the above illnesses, they will send out written communication to all parents and staff advising them to seek appropriate advice.

12.6 Open wounds on sports pitches

Pupils who sustain open wounds/nose bleeds on sports pitches must be immediately treated using dressings from the First Aid box at pitch side. The wound should always be dressed before leaving the pitch.

All staff must take precautions to avoid infection when dealing with open wounds and must follow basic hygiene procedures:

- hand washing is of the utmost importance before and after treating wounds,
- disposable gloves must be worn and are available in all First Aid Boxes,
- care must be used when removing and disposing of gloves and washing hands after removing gloves,
- blood contaminated dressings should only be disposed of in the yellow bags in the clinical waste bins located in the Medical Room.

12.7 Animals

Animals may carry infections, so hands must be washed after handling any animals. Health and Safety Executive (HSE) guidelines for protecting the health and safety of children should be followed.

Animals in School (permanent or visiting)

Ensure animals' living quarters are kept clean and away from food areas. Waste should be disposed of regularly, and litter boxes not accessible to children. Children should not play with animals unsupervised. Veterinary advice should be sought on animal welfare and animal health issues and the suitability of the animal as a pet. Reptiles are not suitable as pets in schools and nurseries, as all species carry salmonella.

Visits to farms

Please contact your local environmental health department, which will provide you with help and advice when you are planning a visit to a farm or similar establishment. For more information, follow the link below

https://www.hse.gov.uk/agriculture/topics/visitor-attractions.htm

12.8 Control of Cross Infection and Communicable Diseases

An important part of First Aid is preventing "cross infection" either transmitting germs or contracting an infection. General measures to reduce infections in School and to reduce cross infection include the promotion of good standards of personal hygiene.

These include:

• reminding pupils about the importance of hand washing on a regular basis, especially after using the toilet, before eating or handling food, if touching their mouth or nose, after handling animals or touching surfaces that may be contaminated



- advising that all cuts and abrasions are covered with a waterproof dressing
- posting posters in relevant places to remind everyone of the importance of hand washing
- encouraging the use of tissues when coughing or sneezing and the disposal of soiled tissues in closed lid bins provided around the School. Once the tissue has been disposed of, pupils should be reminded to wash their hands
- routinely checking all cloakrooms to ensure that an adequate supply of hand-washing and handdrying equipment is available and working
- opening windows in between classes to ventilate the room
- monitoring the Absentee List on iSAMS with early follow-up calls to those presenting with flu-like symptoms
- pupils and staff advised to stay at home if they are presenting with any flu-like symptoms
- pupils and staff are advised to stay at home if they are presenting with any diarrhoea or vomiting symptoms such as a stomach bug and they should remain away from School until 48 hours after the last episode

<u>Immunisations.</u> Pupils are recommended to have all immunisations as per the routine child immunisation programme. Children with asthma are encouraged to have their annual flu vaccination at their GP's.

Sharps injuries and bites

If skin is broken, encourage the wound to bleed/ wash thoroughly using soap and water. Contact GP or occupational health or go to A&E immediately.

12.9 Cleaning and Hygiene Procedure for the Spillages of body fluid.

Biohazard Spill Policy

1. General statement

The aim of this policy is to decrease the exposure risk to blood-borne and body fluid pathogens. Adherence to this policy is the responsibility of all staff that may come into contact with spillages of blood or other body fluids. All staff need to be aware of their personal responsibilities in preventing the spread of infection.

Disinfection aims to reduce the number of microorganisms to a safe level. Whilst a variety of chemical disinfectants is available, high concentration chlorine-releasing compounds provide an effective method of treating body fluid spills with activity against a range of bacteria and viruses.

2. Legal position

The School has a duty to protect its staff from hazards encountered during their work: this includes microbiological hazards (COSHH 2002). For the purposes of this policy, biohazards are defined as:

- o Blood
- Respiratory and Oral Secretions
- Vomit
- Faeces
- o Urine
- Wound Drainage



o Gastric Aspiration

3. Personal Protective Equipment (PPE)

All staff dealing with a biohazard spill are to ensure that they:

- wear a plastic disposable apron
- wear disposable gloves
- protect eyes and mouth with goggles and mask (or full face visor) if splash or spray is anticipated
- wear protective footwear when dealing with extensive floor spillages
- use the biohazard spill kits provided by the School (not "just a cloth or mop")
- always dispose of PPE and contaminated waste in a sealed (yellow) disposable bag

4. Procedure

All staff dealing with a biohazard spill must follow the guidelines detailed below:

- Take precautions so as not to come into contact with blood or body fluids, wet or dry, either on themselves, their clothing or protective equipment. In particular, avoid blood or body fluids reaching the eyes or the areas inside the mouth and nose.
- Wear appropriate PPE.
- Use the biohazard spill kits provided by the School.
- Place all soiled paper towel and gloves in a sealed (yellow) disposable bag to dispose in an approved manner.
- Immediately after **every** clean-up of blood or body fluid, hands including arms to the elbow must be washed with warm water and soap. This should be performed **even** if gloves have been worn.
- Wash all areas that have come into contact with blood.
- All biohazard spills are to be reported to the School Nurse and the Assistant Bursar.

Cleaning staff have been instructed on the importance of regular thorough cleaning, paying special attention to door handles, phones and communal areas. Computer keyboards are cleaned on a regular basis. Cloakrooms will be checked on a regular basis to ensure that they are stocked with adequate liquid soap and that all hand drying equipment is working.

Cleaning staff are made aware of the guidance **"Cleaning up body fluid spills**" (Universal Precautions, Department of Health). All spillages of body fluids should be dealt with immediately using appropriate utensils and cleaning agents. Disposable gloves should be worn at all times when dealing with body spills and disposed of carefully in closed bins. Hands should be washed immediately afterwards. Clinical waste is disposed of as per the guidelines to comply with legislation/COSHH (Control of Substances Hazardous to Health). The Head of Cleaning staff is advised on 'The Top Tips for Cleaning' as advised by the SWLHPU.

Sharp bins are available in Medical Rooms to dispose of sharps/needles conforming to BS7320 and UN3291 standards. They are stored off the floor and out of the reach of pupils. They are disposed of safely by Cathedral Hygiene.

12.10 Laundry

Laundry should be dealt with in a separate dedicated facility. Soiled linen should be washed separately at the hottest wash the fabric will tolerate. Wear PPE when handling soiled linen. Children's soiled clothing should be bagged to go home, never rinsed by hand.



12.11 Information

It is essential that there is accurate accessible information about how to obtain emergency First Aid assistance. All new staff and pupils are provided with information about how to obtain First Aid assistance and a copy of Pupil Hospitalisation Procedure is posted in all Classrooms and Work Rooms.

References:Health and Safety at Work Act 1974 (HSWA)
Data Protection Act 1998
Reporting of Injuries, Diseases and Dangerous Occurrence Regulations 1995
(RIDDOR)
Keeping Children Safe in Education 2014 (KCSIE) & Every Child Matters
Public Health England Guidelines
Guidance on Infection Control in Schools and other Childcare Settings
2016 Public Health England Guidelines