

# First Aid, Intimate Care and Medicines in School Policy

**Adopted December 2009** 

THIS POLICY IS TO BE REVIEWED BI-ANNUALLY

**Chair of Governors, Claire Sayers** 

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#### Introduction

This policy outlines the School's responsibility to provide adequate and appropriate first aid to pupils, staff, parents and visitors and the procedures in place to meet that responsibility. The policy is reviewed every three years.

East Preston Infant School is a Rights Respecting School. All pupils, staff and visitors have the right to be healthy, safe, educated, listened to and treated fairly. These principles are at the heart of our school ethos, and our policies and practices support these rights. We are committed to equal rights, mutual respect and shared responsibility.

#### Aims

- To ensure the efficient application of First Aid to children and staff who are on site during the school working day and during off-site activities
- To draw to employees attention the need to be vigilant with regard to potential hazards in order to assist in reducing the need for First Aid

#### Section 2

#### Staffing Provision

- A qualified First Aider or an 'appointed person' will be available to administer first aid as required during the school working day. The 'appointed person' will have received the necessary training.
- A qualified First Aider will be available to take charge of an accident or illness if required to do so by an 'appointed person'.
- Teachers who hold a First Aid qualification will be available if the designated First Aiders are not on site.
- There will be a qualified First Aider accompanying off site activities and visits.

NB. Unqualified staff should only administer first aid if a qualified first aider or appointed person is not on site

A list of current First Aiders is held in the First Aid area and the Bursar's Office.

#### Section 3

#### First Aid Equipment and Facilities

#### First Aid Area

First Aid materials are stored in the First Aid area and in the YR classroom. They contain only the following approved equipment, together with guidance

on the treatment of injured people:

- Protective latex gloves
- Individually wrapped sterile adhesive dressings
- Sterile eye pads
- Triangular bandages
- Safety pins
- Individually wrapped sterile unmedicated wound dressings
- Extra large sterile individually wrapped unmedicated wound dressings
- Forehead, oral and under arm thermometers
- Ice packs (kept in staffroom freezer)
- Resuscitation mouthpieces

Mains tap water only will be used to irrigate wounds. First Aiders may only use items that they have been trained to use. A First Aider will be responsible for keeping the First Aid stock up to date.

# **Travelling First Aid Kits**

There are 4 travelling kits containing:

- Individually wrapped sterile adhesive dressings
- Large sterile unmedicated dressing
- Triangular bandage
- Safety pins
- Individually wrapped moist cleaning wipes
- Micropore tape
- Cool packs
- Hand gel
- Protective latex gloves
- Scissors
- Tissues
- Resuscitation mouthpieces

If the kits are used then Val Bishop must be informed so that she can replenish them.

In addition the Midday Meals Supervisors carry first aid bum bags which contain:

- Plasters
- Tissues
- Individually wrapped moist cleaning wipes
- Information cards with specific medical information for some pupils
- Resuscitation mouthpieces

#### Supplementary Equipment available

Bed (stored in staff toilets), pillow and blanket (in disabled toilet)

- Blunt end scissors and tweezers
- Cotton wool
- Swabs
- Plasters
- Pandemic equipment masks, aprons, gloves (under First Aid desk)

# Procedures

In case of concern about the health of or injury to an individual the following precautions should be followed:

- 1. Individual sent to a First Aider or Appointed Person
- 2. Injury or concern checked and an assessment made of the level of treatment needed
- 3. Treatment administered or individual referred to qualified First Aider for treatment (in the event of an Appointed Person being on duty)
- 4. Appropriate persons informed depending on level of injury class teacher, parents, Headteacher
- 5. Incident recorded in Accident book

There is a rota to ensure that a qualified First Aider is on the school premises throughout the day

Secondary aid will be sought if necessary and at the same time the parent/guardian will be informed

If an appropriate adult cannot accompany the casualty to hospital, a member of staff will accompany him/her if necessary

The First Aider or appointed person is responsible for recording details of the accident (such as injury type and treatment given) in the accident book and if necessary complete other documentation.

Universal first aid procedures are to be followed to prevent blood-borne infection (see section 6)

The First aid list containing specific pupil information is to be kept up to date by the designated First Aider. The Medical Information file is in the First Aid desk.

#### **Accident Book**

The accident book is kept in the First Aid area. The following details should be recorded: Child's name, class, date time, type of injury, how the injury occurred, treatment given and the signature of the person treating the injury. For major accidents an additional county form should be completed online.

#### Communications

The notice board in the First Aid area displays the names of the First Aider or Appointed person who is on duty.

A copy of the First Aid manual, notes of general first aid guidance and information regarding children's medical needs are kept in the First Aid desk and also in the office.

#### Treatment

Following Government advice, First Aiders must take precautions where possible to protect themselves for Aids and Hepatitis by:

- Using protective gloves and covering exposed cuts or abrasions with a waterproof or fabric dressing, before treating a casualty
- Washing hands before and after applying dressings
- Mouth pieces should be used when giving mouth to mouth resuscitation.
- If direct skin contact with blood or body fluids occurs, the affected area should be washed as soon as possible and medical advice sought.

If there is any slight cause for concern parents must be contacted and informed so that they may make a decision on treatment. Parents must always be contacted in the event of:

- 1. A significant bump on the head
- 2. On-going distress
- 3. Potential illness
- 4. Very high or very low temperature

#### Section 6

#### Intimate Care and Examinations

No intimate examination of a child must be made except after consultation with the Headteacher or Deputy Headteacher or in an emergency.

If it is necessary to make an intimate examination or provide intimate care then the following protocol must be followed.

#### **Policy for Providing Intimate Care**

Not all staff are willing to undertake toileting support, nor are intimate hygiene procedures included within their job descriptions. However, there is an expectation that members of the teaching support staff would be willing (if trained) to undertake this duty occasionally. Therefore, at East Preston Infant School, no member of staff is <u>required</u> to change soiled or wet children, however, all staff are expected to

change children on an <u>occasional</u> basis if they are happy to do so and they follow the agreed Protocol.

For children who have a recognised, ongoing incontinence difficulty it may be necessary for the school to provide regular toileting support and intimate care as part of a Healthcare Plan. At East Preston Infant School, all teaching assistants have undergone intimate care training and we have two teaching assistants who are willing to regularly change children and provide intimate care as part of a Healthcare Plan. These are: Carol McCoubrey, Sue Keiley and Laura Wheatley.

# **Agreed Protocol**

- If a child has an ongoing, recognised problem with soiling and/or wetting, written permission from the parents should be sought for the named members of staff to regularly change the child in school and provide intimate care as part of the child's Healthcare Plan. Only the named members of staff may provide intimate care on a regular basis.
- 2. If an occasional soiling/wetting incident occurs the child should be encouraged to change and clean themselves, with verbal support and guidance from an adult. Every effort must be made to encourage the child's independence and minimize staff intervention.
- 3. If the child is unable to adequately clean/change themselves then the supervising adult should ask permission from the child to help change/clean them.
- 4. If the child does not agree or is particularly distressed then parents should be asked to come into school to change their child.
- 5. If parents cannot be contacted staff must deal sensitively with the child, encouraging him/her to clean themselves or accept help from the adult. No child should be left to remain uncomfortable or excluded from the class for any considerable length of time.
- 6. When a child is being cleaned by a member of staff then another adult must be in close proximity. All efforts must be made to ensure the privacy of the child and to avoid loss of the child's personal dignity.
- 7. All staff must be familiar and comply with the Code of Conduct and school safeguarding procedures.

#### Section 7

#### **Medicines in School**

#### Statement of Intent

Section 100 of the Children and Families Act 2014 places a duty on governing bodies of maintained schools, proprietors of academies and management

committees of PRUs to make arrangements for supporting pupils at their school with medical conditions. The governing body of East Preston Infant School will ensure that these arrangements fulfil their statutory duties and follow guidance outline in 'Supporting pupils at school with medical conditions' April 2014'.

School staff do not have a statutory duty to give medicines or medical treatment. However medicines will be administered to enable the inclusion of pupils with medical needs, promote regular attendance and minimise the impact on a pupil's ability to learn. In an emergency all teachers and other staff in charge of children have a common law duty of care to act for the health and safety of a child in their care – this might mean giving medicines or medical care.

#### Organisation

The governing body will develop policies and procedures to ensure the medical needs of pupils at East Preston Infant School are managed appropriately. They will be supported with the implementation of these arrangements by the Head teacher and school staff.

The lead for the management of medicines at East Preston Infant School is Lucy Owens or in her absence Valerie Bishop. In their duties staff will be guided by their training, this policy and related procedures.

#### Implementation monitoring and review

All staff, governors, parents/carers and members of the East Preston Infant School community will be made aware of and have access to this policy. This policy will be reviewed bi-annually and its implementation reviewed as part of the head teacher's annual report to Governors.

# **Prescription Medicines**

Medicine should only be brought to school when it is essential to administer it during the school day. In the vast majority of cases, doses of medicine can be arranged around the school day thus avoiding the need for medicine in school. Antibiotics for example are usually taken three times a day, so can be given with breakfast, on getting home from school and then at bedtime.

Occasionally a GP may prescribe that a medicine has to be taken during the school day. Parents may call into the school and administer medicine to their child, or they may request that a member of school staff administers the medicine. When school staff administer medicines, the parent or guardian must supply the medicine in the original pharmacist's container clearly labelled including details of possible side effects to the school office and must complete a 'Parental agreement for setting to administer medicine' form (Appendix 1 Template B). On no account should a child come to school with medicine if he/she is unwell.

#### Non-prescription Medicines

Non-prescription medicines are not administered at school and pupils should not bring them to school for self-administration. Only non-prescription travel sickness

medication will be administered by staff providing they are supplied in the original packaging and accompanied by a 'Parental agreement for setting to administer medicine' form (Appendix 1 Template B). Medication must be suitable for the pupil's age, supplied by the parent (not the school) and in its original packaging, with manufacturer's instructions. Staff will check that the medicine has been administered without adverse effect to the child in the past and parents must certify this is the case – a note to this effect should be recorded on the consent form. The medication will be stored and administration recorded as for prescription medicines.

#### **Controlled Drugs**

The school does not deem a pupil prescribed a controlled drug (as defined by the Misuse of Drugs Act 1971) as competent to carry the medication themselves. Controlled drugs will be stored securely in a non-portable container and only named staff will have access, controlled drugs for emergency use must also be easily accessible. The administration of a controlled drug will be witnessed by a second member of staff and records kept. In addition to the records required for the administration of any medication, a record will be kept of any doses used and the amount of controlled drug held in school.

#### Pupils with Long-term or Complex Medical Needs

Parents or carers should provide the head teacher with sufficient information about their child's medical condition and treatment or special care needed at school. Arrangements can then be made, between the parents, head teacher and other relevant health professionals to ensure that the pupil's medical needs are managed well during their time in school. For pupils with significant needs, arrangements will be documented in an Individual Healthcare Plan (IHP) or Educational Health and Care Plan (EHC). These plans will be reviewed by the school annually or following a significant change in a pupil's medical condition.

#### **Admissions**

When the school is notified of the admission of a pupil with medical needs the Lead for Managing Medicines will complete an assessment of the support required. This might include the development of an IHP and additional staff training. The school will endeavour to put arrangements in place to support that pupil as quickly as possible. However the school may decide (based on risk assessment) to delay the admission of a pupil until sufficient arrangements can be put in place.

# Pupils taking their own medication

For certain long-term medical conditions, it is important for children to learn how to self-administer their medication. Appropriate arrangements for medication should be agreed and documented in the pupil's individual healthcare plan and parents should complete the relevant section of 'Parental agreement for setting to administer medicine' form (Appendix 1 Template B).

#### Staff Training

The school will ensure that the staff who administer medicine to control specific chronic conditions are trained to administer those specific medicines, for example, Anaphylaxis (epipens), Diabetes (insulin) Epilepsy (midazolam). Training in the administration of these specific medicines is arranged via the school nurse. A record of training must be maintained to show the date of training for each member of staff and when repeat or refresher training is required. see 'Staff training record – Supporting pupils with medical conditions' Templates - Template E.

The school will also ensure that other staff who may occasionally need to administer a prescribed medicine supplied by the parent with a valid consent form and, or an IHP, are trained in the procedure adopted by the school by the person who has completed the Managing Medicines course. A record of training must be maintained to show the date of training for each member of staff and when repeat or refresher training is required. see 'Staff training record – Supporting pupils with medical conditions' Templates - Template E.

The school will ensure that a record is made of every dose of medicine administered in school. This record is completed by the person that administers the medicine. See record of medicine administered to an individual child Template C and Template D record of medicines administered to all children - Supporting pupils with medical conditions' Templates.

#### Storage and Access to Medicines

All medicines apart from emergency medicines (inhalers, epipens etc) are kept in a locked store cupboard. Medicines are always stored in the original pharmacist's container. Pupils are told where their medication is stored and who holds the key. In the event that a pupil requires an emergency medication that must be locked away, staff will be fully briefed on the procedures for obtaining the medication in an emergency.

Emergency medicines such as inhalers and epipens are either held by the pupil or kept in a clearly identified container in his/her classroom. Staff must ensure that emergency medication is readily available at all times i.e. during outside PE lessons, educational visits and in the event of an unforeseen emergency like a fire. Parents will be asked to supply a spare epipen for each child and they will be kept in the school office. In accordance with the Human Medicines (Amendment No 2) Regulations 2014 the school will keep a small supply of salbutamol inhalers for emergency use.

Medicines that require refrigeration are kept in the staffroom fridge, clearly labelled in an airtight container or in the metal first aid container which is locked on top of the lockers, key in key safe in office (on heart keyring).

Inhalers are sent home at the end of each term and it is the parent's responsibility to check that they have medication in them, that they are in date and that spacers are clean.

It is the parent's responsibility to check Epipen's termly in order to ensure that they are in date.

To ensure that all staff members are aware of those children with serious allergies, a photograph and a brief description of each child's allergy is placed on the board in the staffroom and in the First Aid area.

# Record Keeping

For legal reasons records of all medicines administered are kept at the school until the pupil reaches the age of 24. This includes medicines administered by staff during all educational visits. A parent or guardian will be informed if their child has been unwell during the school day. For record sheets see 'record of medicine administered to an individual child' Template C and 'record of medicine administered to all children' template D Appendix 1.

#### **Emergency Procedures**

In a medical emergency, first aid is given, an ambulance is called and parents/carers are notified. Should an emergency situation occur to a pupil who has an IHP, the emergency procedures detailed on the plan are followed, and a copy of the IHP is given to the ambulance crew. IHP's will also be given to those companies and staff providing transportation of pupils to and from school, in order that the IHP can be passed to the ambulance crew in the event of an emergency. Instructions for calling an ambulance are displayed prominently by the telephone in the school office. A blank proforma is attached in Appendix 1 'contacting the emergency services' Template F.

#### Medicines on Educational Visits

Staff will administer prescription medicines to pupils when required during educational visits. Parents should ensure they complete a consent form (Appendix 1) and to supply a sufficient supply of medication in its pharmacist's container. Non-prescription medicines (apart from travel sickness medication) cannot be administered by staff and pupils must not carry them for self-administration. Hay fever remedies etc. should therefore be provided, if necessary, on prescription.

Pupils with medical needs shall be included in educational visits as far as this is reasonably practicable. School staff will discuss any issues with parents and/or health professionals in suitable time so that extra measures (if appropriate) can be put in place for the visit.

All staff will be briefed about any emergency procedures needed with reference to pupils where needs are known and copies of care plans will be taken by the responsible person.

#### Complaints

Issues arising from the medical treatment of a pupil whilst in school should in the first instance be directed to the Head teacher. If the issues cannot easily be resolved the Head teacher will inform the governing body who will seek resolution.

#### Off-site Activities

When children are involved in off-site visits the following will apply:

- 1. The required number of stocked travel First Aid Kits will be taken (1 per year group)
- 2. A qualified First Aider will accompany the children
- 3. If an accident occurs the First Aider or teacher in charge will deal with it using the following strategies:
  - Treat the injury and if it is considered to be sufficiently minor then let the pupil continue with the activity, under supervision.
  - If there is any doubt then the teacher in charge must phone the school to seek advice
  - If necessary the teacher will seek specialised advice from a hospital casualty department and inform the school immediately. An adult (preferably a teacher) must stay with the child until treatment is completed or a parent/guardian arrives
  - On return to school <u>any</u> accident must be reported immediately by the teacher directly to the Headteacher and the parent/guardian of the child and an accident report completed as soon as is reasonably possible.

#### Section 9

# Out of Hours Working

The first aid facilities and a telephone will be available. If children are involved, the supervising adult will administer First Aid. He/she may not be a qualified first aider or appointed person.

#### Visitors and Contractors

First Aid will be given where necessary to individuals who have been invited onto the site.

Non-employees will be treated under 'good neighbour' terms if first aid facilities are requested.



# **East Preston Infant School**

# **Parental Permission for Intimate Care**

School Policy (available on Moodle).
I give my permission for to receive intimate care (for example helping with changing or following toileting) should the need arise.
I understand the staff are doing this on a voluntary basis and wil endeavour to encourage my child to achieve independence in this area with dignity and respect.
I will provide the necessary clothes.
I understand I will be informed discreetly on each occasion this happens.
Signed
Person with legal responsibility for