

MEDICAL AND FIRST AID POLICY

Last review date: July 2024 Latest review date: July 2025 Staff responsible: Carey Buxton (School Nurse) Chair of Governors: Mark Taylor

This policy should be read in conjunction with the following St Michael's policies:

- Safeguarding and Child Protection Policy
- Health and Safety Policy
- Food Allergens Policy
- Intimate Care Policy
- Supervision Policy
- Supervision and Safety on School Trips Policy

Rights Respecting School policy statement

Our school's vision and values have at their heart the importance of treating each other as we would want to be treated ourselves. This is one of the reasons why the work of UNICEF and Rights Respecting Schools is so significant to us. We are committed to respecting, upholding and promoting the rights of every child. This policy links specifically to our commitment to the the following articles:

- Article 2 No discrimination
- Article 3 Best interest of the child
- Article 4 Making rights real
- Article 24 Health, Water, Food and Environment

INTRODUCTION

The Health and Safety at Work Law (Jersey) 1989, places duties on employers for the health and safety of their staff and anyone else on the premises.

The UK Health and Safety (First Aid Regulations) 1981 require employers to provide adequate and appropriate first-aid equipment, facilities and people, so staff can be given immediate help if they are injured or taken ill at work. St Michael's follows these Regulations as best practice and, as far as reasonably practicable, extends these arrangements to those who may be affected by its activities, including pupils, parents and other members of the public.



RESPONSIBILITIES

The Head, Governors, Senior Management Team and other responsible persons will ensure that:

- This policy is implemented and adhered to
- Adequate numbers of appropriately trained First-Aiders are provided
- Refresher training is undertaken as appropriate normally every 3 years (minimum) under St John's Ambulance (training) regulations
- Suitable equipment and facilities are provided for first aid treatment
- An up to date list of all first aid trained staff is available and accessible to all staff
- All first aid treatments/accidents for pupils are recorded in the electronic Daybook on the Portal
- Employee accidents are recorded and logged in the electronic staff database

AIMS AND OBJECTIVES

The aim of this policy is to provide a framework for responding to incidents, and recording and reporting outcomes.

First aid policy requirements are achieved by:

- Ensuring that there is at least one qualified member of staff on site when pupils are present
- Ensuring that there are suitable and sufficient facilities and equipment available to administer first aid
- Including first aid information in new employee induction. Existing employees must be informed of any changes that are made
- Ensuring that all staff, including temporary staff, are aware of the first aid arrangements
- Ensuring that at least one member of staff trained in paediatric first aid is in attendance on any EYFS trip or visit

FIRST AID PERSONNEL

School Nurse or her Designate

The School nurse or their designate/s should take charge of first aid arrangements including medical stock, looking after medical equipment, informing parents/careers and calling emergency services.

Emergency First-Aiders

Some staff at St Michael's are 'Emergency First-Aid' qualified and hold a valid certificate of competence showing that they have completed an HSE approved 1-day emergency first aid (EFAW) course (usually with St John's Ambulance), and that they have attended refresher courses as required.

Qualified 'First-Aid at Work' Staff



The majority of St Michael's first aiders (working in administration and with Years 3 and above) are qualified to 'First Aid at Work' standards, and hold a valid certificate of competence showing that they have completed an HSE approved 3-day First Aid at Work (FAW) course (usually with St John's Ambulance), and that they have attended refresher courses as required.

Paediatric First Aid Trained Staff

Standard First Aid at work training courses do not include Paediatric First Aid training, including resuscitation procedures for children under 5 years of age. At St Michael's staff who work in the EYFS Department are qualified Paediatric First Aiders.

The Statutory Framework for the Early Years Foundation Stage (EYFS) states that at least one person who has a current paediatric first aid certificate must be on the premises at all times when early years children are present, and must accompany children on outings and this is the case at St Michael's.

<u>National Rescue Award for Swimming Teachers and Coaches (NRASTC)</u> As part of their poolside qualification, some staff qualify through NRASTC every two years which includes Emergency First Aid training.

A register of appointed First-Aiders is available to all staff.

FACILITIES AND EQUIPMENT

First Aid Room - The Medical Room

The Medical Room is the designated first aid room and is appropriately stocked for providing first aid to both pupils and staff.

First Aid Boxes

These are marked with a white cross on a green/blue/black background and are appropriately stocked by the School Nurse monthly. First Aid boxes are placed in clearly identified and readily accessible locations around the school site, including the following:

- The Medical Room
- School Office
- Catering Department
- Maintenance Department
- Engineering Room
- Sports Departments
- Swimming pool

Defibrillator

There is a defibrillator appliance located in the School Office and a second Defibrillator is located on the far end of the cricket pavilion. The Defibrillators are checked monthly by the School Nurse and the log for this is kept in the medical room.



FIRST AID PROCEDURES

Recording of first aid / accidents:

Records of accidents and first aid given to pupils are recorded electronically in the Portal Pupil Daybook. This will be shared with the parents via their portal system.

Procedures for dealing with sick or injured children:

- All children who visit the medical room, except in an emergency, must have been sent by a member of staff
- Children should visit the medical room on their own where possible, visiting in groups should be discouraged
- In the case of an accident, the School Nurse should ensure that the member of staff on duty is aware of the incident and that any other children involved are also logged on the School Portal
- All visits to the School Nurse where first aid is provided, will be documented via the Portal and shared with the appropriate staff and parents each day
- The School Nurse may also contact parents if they feel it is necessary via telephone.
- If children arrive at the end of break or between lessons, they must report to the member of staff to whom they should be going, or their class teacher, and then come back to the medical room. If children arrive during class time, they must be questioned as to why and how they came to be there and whether their teacher is aware of the fact that they are visiting the School Nurse. This will ensure that the whereabouts of all children is known at all times.
- Children in Nursery and Reception (EYFS) should be accompanied by their class teacher or a teaching assistant when they need to see the School Nurse
- Parents of a child in the EYFS Department must always be informed of any accident or injury and treatments given on the same day or as soon as possible. An accident form is completed and signed by parents on the day and returned to school for records. These accident forms are then stored yearly on the Portal for records.
- If the child appears too unwell to go unaccompanied then the School Nurse will let the member of staff know as soon as possible.
- If the problem is a playground incident, the School Nurse will check that the duty member of staff was aware of the incident and, if not, inform them.
- Children being sent home must be marked as having left school with the time of departure on the electronic Register (on the Portal) and the school office informed.
- If the School Nurse decides that a child is unfit for games during the course of the day, the relevant games staff should be informed and, if appropriate, the Form Teacher.
- Children should be encouraged to continue at school whenever reasonably possible. They should be sent home only as a last resort, or if there is a risk to other children or staff.

Bruises, sprains and suspected breaks

• In urgent cases e.g. suspected fractures or haemorrhage, the School Nurse will arrange for the child to be transferred to Accident and Emergency and for parents to meet their child at the hospital.



 In less urgent cases the School Nurse will telephone parents and arrange for them to collect the casualty from school and take them to Accident and Emergency. In the event that this is not possible, then alternative transport will be arranged and the child will be accompanied to the hospital by the School Nurse.

Cuts and Grazes

- These should be washed with water or antiseptic liquids until clean, dried and then covered with an appropriate dressing.
- It is the duty of the first aider in question to protect themselves from body fluids by the wearing of protective gloves and other PPE as required.

Head Injuries

- No matter how minor, head injuries must always be taken very seriously and children should be assessed by the School Nurse or their designee.
- The School Nurse (or their designee) will always contact parents in the case of a head injury for children in Reception to Shell. Nursery staff will contact parents directly if a Nursery pupil experiences a head injury, unless the child is brought directly to the School Nurse.
- The School Nurse will assess head injuries and will discuss the incident with parents. Parents may decide to come and assess their child themselves and whether they would prefer to take them home.
- The School Nurse may monitor the child for up to 15 minutes or more if it is felt necessary. They will then decide if the child is fit to return to class or may need to be closely monitored at home in case of signs of concussion. The child must then be collected from school. The School Nurse will always document on the Portal under "head injury" and will make a note of a plan of care.
- In EYFS and Pre-Prep, if a pupil is to remain in school following a head injury, they will be given a "bump sticker" so that staff know to keep a close eye on them. The School Nurse may decide to speak to the class teacher directly.
- If the head injury seems more severe or in any doubt re- concussion, the School Nurse will advise parents that the child should be taken to the Accident and Emergency Department for a check up.
- All head injuries and bumps are recorded on the Portal, so that all adults will know to observe abnormal behaviour, or if the child reports dizziness, headache or vomits. In this case, the School Nurse (or their designee) should be informed immediately.

Head Lice and Chicken Pox

- St Michael's does not have a regular screening programme. Children are checked at the request of a teacher or parent. Information is regularly distributed to parents about the detection and treatment of head lice and chicken pox.
- If head lice or chicken pox are discovered, the parent of the child concerned will be contacted by the School Nurse and informed that their child needs to be treated. In the case of head lice, children can return to school following the 1st treatment, but may still need a 2nd treatment 7 to 14 later, as head lice can remain active for up to 30 days. In the case of chickenpox, pupils must be kept at home until their spots have crusted over (which is usually 5-6 days after the start of the rash).



• A letter will be sent home to pupils to inform parents of chickenpox or head lice, so that they can monitor their children.

Puncture Wounds Caused by a Bite [to a member of staff or another child]

- Encourage the wound to bleed freely.
- Wash thoroughly with water and then cover with a clean dressing.
- Parents of the pupil who has been bitten must be informed.

Sickness

- All children should be observed for signs of illness when they arrive at school and throughout the day, this is the responsibility of all staff.
- Children suffering from ailments such as toothache, tummy ache or headache should be sent from class to the medical room for assessment and appropriate treatment. The decision whether to keep the child at school or send home will be at the discretion of the School Nurse or the First Aider and how they view the problem.
- A child's normal temperature is 36.4C but this can vary slightly from child to child. A high temperature is 38C or above. A child with a temperature above 38C should not remain in school if this temperature can not be stabilised with paracetamol.
- Children recovering from diarrhoea and sickness should be kept at home until 48 hours after the last episode of illness.
- Children suffering from infectious diseases should stay at home (refer to <u>Prevention and</u> <u>Control of Infection Guidelines for Early Years and School Settings</u>)

Verrucae

- St Michael's does not have a regular screening programme. Children are checked at the request of a teacher or parent.
- If a vertuca is discovered, the parent of the child concerned will be contacted by the School Nurse and informed that their child needs to be treated. It is recommended that children with vertucae have them covered with a waterproof dressing.

Information on health related matters can be obtained from the School Nurse or the School Nurses at Le Bas Centre.

The School Nurse is here to provide medical care and first aid to all children and staff during school hours. If treatment is advanced or a diagnosis is required parents will be advised to see their GP or attend A&E.

PROVISION OF MEDICATION

<u>The Medicines Jersey Law 1995</u> places restrictions on dealings with medicinal products, including their administration. In the case of prescription–only medicines, anyone administering such a medicinal product by injection must be an appropriate practitioner (e.g. a doctor) or else must act in accordance with the practitioner's directions. There are



exceptions for the administration of certain prescriptions-only medicines by injection in emergencies (in order to save life).

With the exception of the School Nurse, there is no legal or contractual duty on school staff to administer medicine or supervise a pupil taking it. This is a voluntary role. Other staff may have specific duties to provide medical assistance as part of their contract. However, swift action would need to be taken by a member of staff to assist any pupil in an emergency.

The school's insurance policy provides appropriate cover for staff willing to support pupils with medical needs.

St Michael's staff in charge of pupils have a 'common law' duty to act as any reasonably prudent parent would to make sure that pupils are healthy and safe on school premises and this extends to taking action in an emergency. The School Nurse or their designate would generally be in charge of administering medicine.

School Trips / Visits and provision of Medication

This 'common law' duty of care also extends to teachers leading activities taking place off the school site, such as educational visits, school outings or field trips. <u>The Education Law</u> (Jersey) 1999 provides scope for teachers to do what is reasonable for the purpose of safeguarding or promoting children's welfare. This can give protection to teachers acting reasonably in emergency situations such as on a school trip.

The Education (Jersey) Law 1999 <u>The Education Law (Jersey) 1999</u> states that every school should have accommodation for medical or dental examination and treatment, and for the care of pupils during school hours. At St Michael's we have a dedicated medical room with a School Nurse to ensure the medical needs of all our pupils are met.

When children have trips on or off island, at least one medical bag and medical action list will be provided by the School Nurse for the children or Year Groups attending. It is the responsibility of the staff member arranging the trip to inform the School Nurse in advance of a list of pupils' names or Year Groups, so medication can be tailored to the pupils' needs. Staff leading the trip will also take with them a 'School Trip' Report, printed from the School Portal. This includes parental contact information and medical needs/allergies.

School Policies and Procedures for Supporting Pupils with Medical Needs

A clear policy understood and accepted by staff, parents and pupils provides a sound basis for ensuring that pupils with medical needs receive proper care and support at school. Formal systems and procedures, drawn up in partnership with parents and staff, should back up the policy.

Parents are responsible for their child's medication. The School Nurse is responsible for deciding whether School can assist a pupil who needs medication. Such decisions should, as far as practicable, encourage regular attendance and full participation in school life. Children with medical needs have the same rights of admission to school as other children, and cannot generally be excluded from school for medical reasons. St Michael's staff should not, as a general rule, administer medication without first receiving appropriate information



and/or training and supporting documentation from parents. Please see our Admissions Policy for more information.

Drawing up an Individual Health Care Plan

Most pupils will at some time have a medical condition that may affect their participation in school activities. For many this will be short-term.

Other pupils have medical conditions that, if not properly managed, could limit their access to education. Such pupils are regarded as having medical needs. Most pupils with medical needs are able to attend school regularly and, with some support from school, can take part in most normal school activities. However, St Michael's staff may need to take extra care in supervising some activities to make sure that these pupils, and others, are not put at risk. In some cases, it may be helpful to draw up individual procedures, in the form of a health care plan, to ensure the safety of such pupils.

Not all pupils who have medical needs will require a Health Care Plan. The purpose of such plans is to ensure that school staff have sufficient information to understand and support a pupil with long-term medical needs.

The plans should be drawn up in conjunction with the parents and, where appropriate, the child and the child's medical carers and should set out in detail the measures needed to support a pupil in school, including preparing for an emergency situation.

The information contained within the plans will be treated in confidence and will not be used for any other purpose than for the school to set up a good support system. Pupils' Health Care Plans are held on Google Drive and key notes are also on the Pupils' Portal.

Dealing with Medicines Safely

The safety of staff and pupils must be considered at all times. Particular attention must be paid to the safe storage, handling, and disposal of medicines. Training for staff includes guidance in safety procedures. Some medications, e.g. inhalers and autoinjectors are readily available (the medical room) in case of an emergency and are not locked away. The rest of the school's medication is locked away in the Medical Room, or stored safely in the first aid medical boxes around the school.

Management of Oral or Inhaled Medicines

- The School Nurse or their designate will administer medicines. Such administration is undertaken on a voluntary basis.
- It should be the exception rather than the rule for medicines to be brought into school.
- Each request for medicine to be administered to a pupil in school should be considered on an individual basis. It is normally expected that parents administer medicine to their children. Parents should be advised to request that GPs be asked to prescribe in a way which avoids the need for medicines to be taken onto school premises.
- School seeks to have the best interests of the pupil at heart and considers the implications for School and staff. Where the School Nurse considers it appropriate



for medicines to be administered at school they will ensure that the guidelines are followed carefully (see below).

- All members of staff are made aware of (St Michael's) guidelines and the school policies with respect to administering medicines and first aid treatment, particularly where there are pupils with known medical problems.
- Whether agreeing or refusing to administer medicines in school, the School Nurse's decision (in conjunction with the Head) will be defensible, if it is clear that they have acted reasonably. The Head has an unquestioned duty to all the children in their care, but before accepting responsibility for administering drugs to a pupil they (*the School Nurse/Head*) will first consider all the circumstances of the case.

Responsibilities of the Management of Oral or Inhaled Medicines

The following responsibilities should be understood and agreed in any case where the Head /the School Nurse accepts the need for administering oral medicines to children:

- The School Nurse / Head will ensure that procedures are understood and adhered to
- Day-to-day mechanics of supervising the management of medicine administration may be delegated to members of staff
- The term "parents" in these guidelines includes guardians/carers.
- All parents should provide school with a clear written statement detailing:
- How to make a request for medicines to be given at school (i.e. in writing in person to the School Nurse or their designate and not brought in by the child) (See Appendix 1).
- How medicine should be provided to the school, i.e. in original container from pharmacy and clearly labelled with: Child's name Name of medicine How much to give (ie dose)
 - When to be given
 - Any other instructions
- The form, (see Appendix 1) is to be kept by the School Nurse or their designate administering the medicine
- Parents must notify the school in writing of any changes of medicines
- Parents must replenish the supply of medicines if necessary
- Parents must give written permission for information concerning any medical condition or allergy their child may have, subject to confidentiality, and this must be passed on to the School Nurse.
- The need for them to give ALL medicines to the School Nurse or their designate for safekeeping and administration. Pupils should never carry medicine on their person in school (excluding inhalers).

Inhalers

Where appropriate, with parental and school agreement, pupils should be responsible for their own inhalers, which should be clearly marked with the child's name. School has an emergency procedure for dealing with asthma sufferers, which is kept in the medical room. At St Michael's we consider it appropriate for a spare inhaler to be provided for the child, to be kept at school (in the Medical Room). **Inhalers must always be taken on school trips.**



Administration / Record

- The label on the individual medicine container should be checked against the school medicine record (see Appendix 1 completed by parent).
- Any discrepancy should be queried with the parent before administering a medicine.
- A parent should confirm their intentions in writing if their instructions differ from those on the medicine container.
- The **RIGHT** medicine in the **RIGHT** dose should be given at the **RIGHT** time to the **RIGHT** pupil.
- A record of doses given to a child is recorded in the 'Daybook' (under the child's profile) on the Portal.
- Within the Nursery setting the staff are responsible for administering the medication and the form is signed by the staff member with the time of medication administered. It is then signed at the end of the day by the parent/carer collecting the children and the medication is handed to the parent/carer.

Disposal

In circumstances where it has not been possible to restrict the medicine coming into school to a single dose, medicines no longer required should not be allowed to accumulate.

Guidance on Infection Control:

Hygiene and Infection Control: Common sense infection control measures (such as hand washing and the use of disposable gloves when dealing with blood or bodily fluids) must be followed by <u>all staff</u>

- Single-use disposable gloves are to be found in First Aid kits and must be used at all times when providing treatment involving blood or body fluids.
- Spillage Kits for dealing with bodily fluid are located in the Medical Room and can also be found alongside most First Aid kits around School. Spillage Kits usually contain the following items:
- Disposable apron
- Disposable glove
- Yellow plastic disposal bag for clinical waste
- Body fluid spillage granules
- Scraper & scoop
- Disinfectant / Sanitizer spray
- Antiseptic hand wipes
- Any **items contaminated** must be disposed of in a '**Clinical Waste**' bag (from the Spillage kit), and disposed of in the bin.
- For larger spillages, relevant cleaning equipment is available to/from the Maintenance and/or Cleaning Team.

Further guidance on infection control, including dealing with body fluid spillages, can be found on the Public Health England website

(<u>https://www.gov.uk/government/organisations/public-health-england</u>) by searching 'infection control in schools'



Conditions Requiring Emergency Action

As a matter of routine, St Michael's has clear procedures for summoning an ambulance in an emergency. However, some life-threatening conditions may require immediate treatment. Some staff may volunteer to stand by to administer the medicine prescribed and if they do so they must have received appropriate training and guidance. Medicines for these purposes should only be held where an individual protocol for the child concerned has been written up for School by a doctor. The full indemnity provisions referred to earlier apply in these emergency situations.

If the normal routine for administering treatment of an unusual nature breaks down e.g. the trained member of staff is absent, immediate contact with the parent needs to be made to agree alternative arrangements, such as the parent attending school to administer the treatment. If appropriate contact is delayed the emergency services shall be contacted.

Acute Allergy to Bee Stings and Nuts

A very small number of people are particularly sensitive to bee stings or nuts and require an immediate injection of adrenalin to save life. The majority of staff at St Michael's have received training (via the School Nurse) in the use of autoinjectors, and refreshers are offered at twice yearly. Piriton is also available in first aid kits and in the Medical Room. All schools are recommended to adopt the guidance provided by the Department of Health titled "Managing Medicines in Schools and Early Years Settings".(<u>Managing Medicines in</u> School and Early Years Settings.

Major Fits

It is important to distinguish a fit from a fainting spell (syncope). Some children who faint may make twitching movements just prior to losing consciousness. This is normal. However, if the child continues to make rhythmic movements of the arms and legs lasting more than a minute, this is a fit and will need treatment should it continue.

Some children require Stesolid (rectal valium) if a fit does not stop spontaneously. This is becoming obsolete. The new method for treatment of fits is buccal or intranasal midazolam, and this is administered if the fit does not cease after 5 minutes and the emergency services have not arrived. It is less invasive, easier to deliver and more effective. Instruction on the use of midazolam will be provided in due course to the School Nurse (and those staff who have authority to administer medication) and, in the meantime, advice should be sought in the event of an incident from the Accident and Emergency section at the General Hospital.

If it is necessary to administer rectal valuem, then the member of staff administering the medication must be of the same gender as the child. A second member of staff should be present during such administrations and whenever possible should be of the same gender as the child.



Staff should not undertake this responsibility unless they have received suitable training from a qualified nurse or medical practitioner; and where the written consent of the patient's general practitioner has been obtained; and the parents/guardians of the pupil concerned have been consulted and had given their written consent to the named member of staff (usually the School Nurse) administering the drug.

Hypoglycaemia

Blood sugar level in diabetics may drop to a very low level causing confusion and even unconsciousness. If the child does not respond to biscuits or other food/drink containing sugar, then the drink 'GlucoGel' is required, or alternatively 50-100 mls of non-diet Lucozade or Coca-Cola would be an adequate substitute. An injection of Glucagon (GlucaGen Hypokit) may also be required.

Medi-Alerts

Some children wear bracelets or necklaces, which alert others to their medical condition in an emergency. As with jewellery, these items are a potential source of injury in games or certain practical activities. In appropriate circumstances they should be covered with sweatbands or removed temporarily.

Impaired Mobility

Providing the approval of the GP or Consultant has been given there is no reason why children wearing plaster casts or using crutches should not attend school. Restrictions will be necessary on games or practical work to protect the child or others. Similarly, some relaxation of normal routine in relation to times of attendance, or movement around School may be made in the interests of safety.

Administration of Analgesics to Pupils

Analgesics (painkillers) if prescribed, can be administered under the same procedures as any other oral medication. Schools may provide paracetamol/Ibuprofen to pupils where necessary, with the exception of EYFS (Nursery and Reception) so staff are clear as to year groups under the umbrella of EYFS, where written parental consent is required. In all cases a record is kept in the individual pupil's Daybook (on the electronic Staff Portal), of dosage and at what time this was administered.

The School Nurse, or their designate, will, from time to time, administer medication to children that, in their opinion, is necessary, for example, Calpol, for high temperatures or headache or Strepsils, for a sore throat. If parents do not wish this 'ad hoc' medication to be administered they have the right to decline such treatment on the form provided during the admissions process.

Parental Consent for Treatment - trips and visits



Children (under 16) requiring medical treatment (surgical, medical or dental) normally need parental consent. St Michael's asks parents to complete a 'medical consent' form before their child goes on trips lasting longer than one day.

Other

For school guidance for a pupil at risk of anaphylaxis, please see the Food Allergen Policy.

Wellbeing and Safeguarding

Some children who are experiencing difficulties at school may use the School Nurse as a means to avoid specific lessons or situations within the school day. Removal of a child from a situation that is worrying them does not always help their cause; often the reverse is true and what they are seeking is reassurance to help them overcome the difficulty. A united front by supporting adults will help them achieve this. The School Nurse will pass all concerns onto the pupil's Form Tutor and/or the Designated Safeguarding Lead/Assistant Head, Pastoral as appropriate.

St Michael's is committed to safeguarding all children. For more detailed information please see our Safeguarding and Child Protection Policy.



APPENDIX

Γ

Permission for administering (pupil) medicine in school

Permission to administer specified medication in School Please complete this form with the School Nurse or send it in with the medication
Name of pupil:
<u>D.O.B.</u> :
<u>Form:</u>
Name of medication:
PrescriptionNon prescription
Dosage and frequency:
Reason for medication and any additional information or instructions:
I give permission for the school nurse or her Designate to administer medication to my son/daughter:
Signed:
Name (print):
Date:
Contact number if different from Portal records: