



The Caldecott School

First Aid, Medication & Supporting Pupils with Medical Conditions Policy

Latest Ratification by <i>Governors</i>	
Next Review of Policy	September 2023
Latest update	September 2021

Mission Statement

Every member of the Caldecott Team understands that it is their duty to keep the pupils, their colleagues and themselves safe. All stakeholders aim to give pupils their best education possible. They uphold the values of our school and work as a team, using their skills and talents to benefit others. Everyone shows they care for each other; there is no discrimination and religious and cultural differences are embraced.

Our pupils will be presented with and motivated to engage in a rich and broad curriculum to develop skills so, that in the future, they are responsible, caring and active members of their communities.

Caldecott School pupils know that we need to value and care for our local environment and the whole eco system of planet Earth.

FIRST AID

The Caldecott Foundation School is committed to providing emergency first aid provision in order to deal with accidents and incidents affecting pupils, employees and visitors.

- We have suitably stocked first aid boxes, which are checked monthly for stock, including expiry dates for equipment and are kept in the staffrooms, school offices and specific classrooms.
- All staff will consider the appropriateness of any first aid treatment, for example allergies such as latex and plasters.
- We have suitably detailed and current individual behavior support plans for all pupils in school and for specific trips and activities.
- All school sites have more trained first aiders than is required by law. First aiders are identified on our information posters at various key points throughout each school site.
- Our first aid and emergency procedure is clear and shared. See below

All staff working at The Caldecott Foundation School, know that when in doubt, calling 999 is the most appropriate and safe course of action

Emergency procedure in the event of an accident, illness or injury

If an accident, illness or injury occurs on school site or during school hours, the member of staff in charge will assess the situation and decide on the appropriate next course of action, which may involve calling immediately for an ambulance or calling for a first aider. If summoned, a first aider will assess the situation and take charge of first aid administration.

Ambulances

The first aider / appointed person is to always call an ambulance on the following occasions:

- In the event of a serious injury and / or any significant head injury
- In the event of a period of unconsciousness
- Whenever there is the possibility of a fracture or where this is suspected
- Whenever the first aider is unsure of the severity of the injuries
- Whenever the first aider is unsure of the correct treatment
- Where there are open wounds requiring further medical attention

If an ambulance is called, then the first aider in charge should make arrangements for the ambulance to have access to the injured person. Arrangements should be made to ensure that any child is accompanied in an ambulance by a member of staff until one of the parents or carers is present.

Managing bodily fluids

Qualified persons administering first aid should wear disposable gloves where bodily fluids are involved. Any dressings or materials which have been in contact with bodily fluids (such as blood or vomit) must be disposed of in the designated yellow bag. Bodily fluids spilt should be cleaned up and bleached or disinfected. If the spillage is significant, pupils and staff should be removed from the area (where necessary) and the school's premises staff should be called upon to clean the area professionally using the appropriate cleaning materials. Parents and carers will be notified as soon as practicable, for more information see the section below.

Accident Reporting

All accidents, administration of first aid and / or medicine will be recorded in the Accident Report Folder, which is located in the school office.

Reporting to Parents & Carers

In the event of accident or injury to a child at least one of the child's parents or carers must be informed as soon as practicable by telephone.

Reporting to the Health & Safety Executive (HSE)

The Caldecott Foundation School is legally required under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (SI 1995/3163) (RIDDOR) to report the following to the HSE (most easily done by calling the Incident Contact Centre (ICC) on 0845 300 99 23):

Accidents where there is a fatality involving either a child or visitor or is taken from the site of an accident to hospital and where the accident arises out of or in connection with:

- Any school activity (on or off the premises)
- The management or organisation of a social activity
- The way a school activity has been organised or managed
- Equipment, machinery, or substances
- The design or condition of the premises

Accidents involving staff:

- Work related accidents resulting in death or major injury (including as a result of physical violence) must be reported to the HSE immediately (major injury examples: dislocation of hip, knee or shoulder; amputation; loss of sight; fracture other than to fingers, toes or thumbs)
- Work related accidents which prevent the injured person from continuing with his/her normal work for more than three days must be reported within 10 days
- Certain cases of work-related disease - i.e., those that a doctor notifies the School of (for example: certain poisonings; lung diseases; infections such as tuberculosis or hepatitis; occupational cancer)

- Certain dangerous occurrences (i.e., near misses - reportable examples: bursting of closed pipes; electrical short circuit causing fire; accidental release of any substance that may cause injury to health)

For more information, please see <http://www.hse.gov.uk/riddor/index.htm>.

ADMINISTRATION OF MEDICATION

Parents are encouraged to ask their child's doctor if it is possible for the timing of doses of any medication be set for outside school hours.

Where it is not possible for parents of pupils requiring medication to come into school to administer the medication to their pupils, medication will be administered on-site after discussion with a senior leader.

While there is no legal or contractual obligation on teachers or school staff to give medication to pupils, the Head Teacher currently agrees to the administration of medicines in school as we acknowledge that the special school context needs to be flexible and practical, especially for pupils with ADHD. However, this does not necessarily include agreement to treatment which requires intimate or invasive application of medicines (eg. injections) and it must be acknowledged that any member of staff who agrees to administer medication to pupils does so on a voluntary basis. All medication in school must be prescribed by a medical practitioner and dispensed by a chemist. This ensures the pupil's name and the correct dosage is on the label on the medication.

- Staff who volunteer to administer medication must receive correct guidance and training before being allowed to administer medication to any child
- The school must seek the parent's / carer's written consent, agreeing for the school to administer medication during school hours
- The Head Teacher provides the overall agreement for any requests for medication to be administered to a child in school hours before any medication is administered
- Staff who administer medication to pupils must record all details in the Controlled Drugs Recording Book.
- Any adverse effects experienced by the child following the administration must be reported to the parent and a senior leader (either immediately or at the end of the school day depending on severity)
- If the child refuses to take his / her medication, then they should not be forced to do so. Parents / carers must be informed. If a child refuses medication in an emergency situation (for example: asthma inhaler during an asthma attack), then professional medical help must be requested and the parents / carers informed immediately
- Staff should ensure that the privacy and dignity of the child is maintained as best as possible, even in an emergency situation

Asthma Inhalers

We will ensure that all pupils with asthma feel secure and are encouraged to participate in all activities, notwithstanding any restrictions imposed by their condition. **Pupils with asthma must carry their inhalers with them at all times (clearly labelled with their names) including their spacer for optimum delivery of the medication, if appropriate.** They should be able to

administer their own inhalers, however if a child is considered too young or immature to take personal responsibility, staff will make sure that it is stored in a safe but readily accessible place, that the child is aware of its location, the medication is clearly marked and labelled with the child's name. Where agreed with parents / carers, a spare asthma pump can be kept on the premises in a labelled container in the school offices, which is made known to the child and all staff.

Anaphylaxis

Anaphylaxis is an acute, life threatening, severe allergic reaction requiring immediate medical attention. It usually occurs within seconds or minutes of exposure to certain foods or other substances but may happen after a few hours. An Epi-pen is a preloaded pen device which contains a single measured dose of adrenalin (also known as epinephrine) for administration in cases of severe allergic reaction.

An Epi-pen can only be administered by school staff who have been professionally trained and designated by the Head Teacher to use it.

Diabetes, Epilepsy & Allergies

Diabetes is a condition where the person's normal hormonal mechanisms do not control their blood levels. In the majority of pupils, the condition is controlled by insulin injections and diet. **Insulin injections can only be administered by school staff who have been professionally trained in the procedure.** Pupils with epilepsy and specific allergies must have tailored care plans, agreed with families and health professionals in advance. These must be shared through whole staff training to ensure that every member of staff working with the specific child knows what to do in the case of, for example, an epileptic seizure.

Paracetamol, Aspirin and other Over-The Counter Medicines (OTCs) Pupils sometimes ask for painkillers, but **school staff will not give any non-prescribed medication (also known as 'over the counter' medicines) to pupils under any circumstances.**

Wherever possible (and generally we appreciate that this is often not realistic), parents/carers must be asked to provide the school with the amount of medication required for the school day only, rather than bringing in a full bottle of medicine or a full bottle/package of tablets.

- The school will not accept any medication which is not in its original container
- All medication must be clearly marked with the child's name, class and date of birth
- All medication will be kept in a locked cabinet/container including controlled drugs with the exception of: asthma inhalers, medication which needs to be kept refrigerated and medication which may be needed urgently in an emergency
- Any medication which requires refrigeration must be stored in the fridge in the school offices. The medication must be kept in an airtight container which is clearly marked with the child's name, date of birth and class
- Pupils considered mature enough to take responsibility for their asthma inhaler are allowed to carry them on their person provided that there has been an agreement between the Associate Head or Head of School and the parent/carer. The staff team should then be made aware, particularly all sports activities staff. During off-site activities, any medication which may be

needed should be carried by the member of staff in charge of the activity or a member of staff with first aid training. Pupils who may urgently require their medication should be in a group which is supervised by the member of staff carrying the medication

- Staff should never transfer medication from its original container to another container except in the event of the original container being damaged. In such cases, the alternative container must be clearly labelled with all of the information held on the label of the original container. The parent/carer must be notified in the event of any damaged containers.
- School staff must not dispose of any unused medication. This is the responsibility of the parent/carer. Any unused medication must be collected by the parent/carer on request. If the parent/carer refuses or fails to do so within 5 school days, or in the case of a child having left the school, school staff must hand any unused medication to a pharmacist (it must never be disposed of).
- If a child's medication runs out or expires, it is the responsibility of the parents/carers to replenish it. See the previous point re: disposal of medication.
- Staff must record when and how much new medication is sent into school, so that at all times there is a record of the exact amount of medication held in school
- Pupils' individual care plans are displayed in staff rooms, and are accessible to all staff on our shared drive.

Recording

Records of medication given to pupils will be kept and staff will sign a record each time medicine is administered.

Confidentiality

All medical information is treated confidentially and access to this information will be provided on a 'need-to-know' basis in consultation with the parent / carer and child, without compromising the child's health, dignity and well-being

SUPPORTING PUPILS AT SCHOOL WITH MEDICAL CONDITIONS

This section reflects the statutory guidance for maintained schools outlined in the DfE's December 2015 publication Supporting Pupils at School with Medical Conditions. The Caldecott Foundation School recognises the need to provide effective support for pupils in school who have a medical condition, with a focus on the needs of each child and how their medical condition impacts upon their school life.

Karen Norman (Head Teacher) is the named person with overall responsibility for ensuring that this policy is implemented. This includes:

- ensuring that all relevant staff are aware of a child's medical condition
- ensuring that sufficient staff are suitably trained
- ensuring that risk assessments for school visits, holidays and other activities outside of the school timetable reflect the medical needs of the child
- writing (in conjunction with the school nurse) Individual Healthcare Plans (IHPs) and monitoring them periodically

However, supporting a child with a medical condition during school hours is not the sole responsibility of one person. At The Caldecott Foundation School we work in partnership with pupils, parents, external agencies, healthcare professionals and local authorities in order to ensure that we provide effective support to all pupils with medical conditions.

Procedure following notification that a pupil has a medical condition

- The named person will ensure that all relevant staff are made aware of the child's diagnosis
- The named person will seek further information from the relevant medical staff working with the child.
- It is the responsibility of the parent to provide the school with any relevant medical information, and to notify the school of any changes to their child's health.
- The named person will ensure that an Individual Healthcare Plan (IHP) is written for the child and any necessary arrangements are put in place by the start of the school term (for new pupils) or within two weeks (for existing pupils with a new diagnosis).

Individual Healthcare Plans

- Individual Healthcare Plans (IHPs) will be put in place if the school, healthcare professionals and parents agree that it is necessary
- IHPs aim to ensure that the school effectively supports pupils with medical conditions. They provide clarity about what needs to be done, when and by whom.
- IHPs capture the key information about a child's medical condition, the healthcare professionals that are supporting them, and anything that needs to be put in place to support them at school

Staff Training and Support

Every member of school staff providing support to a child with medical needs should receive suitable training. This may be provided by an external training provider, or internally by the school nurse.

Training needs should be identified by the relevant healthcare professional during the development of the Individual Healthcare Plan. They will identify which staff require training, and the type of training needed.

The school should arrange any necessary training and ensure that training remains up to date. At times, whole staff awareness training may be necessary in order to ensure that all staff are aware of their role in supporting specific pupils with medical conditions.

Emergency Procedures

This section should be read in conjunction with our Health and Safety Policy and Educational Visits Policy.

Where a child has an Individual Healthcare Plan, this should clearly define what constitutes an emergency and explain what should be done, including ensuring that all staff are aware of emergency symptoms and procedures. Other pupils should also be told what to do in general terms, such as informing a teacher if they think help is needed.

If a child needs to be taken to hospital, staff should stay with the child until the parent arrives, or accompany a child taken to hospital by ambulance.

Home to school transport

Home to school transport is the responsibility of local authorities. Local authorities should be made aware of any child they transport who has an Individual Healthcare Plan, in order that they know what it contains and how to respond in an emergency situation. It is the responsibility of the named person to ensure that IHPs are shared with transport providers.

Unacceptable practice

We recognise that it is generally not acceptable practice to:

- prevent pupils from easily accessing their inhalers and medication and administering their medication when and where necessary
- assume that every child with the same condition requires the same treatment
- ignore the views of the child or the parent; or ignore medical evidence or opinion (although this may be challenged)
- send pupils with medical conditions home frequently or prevent them from staying for normal school activities, unless specified in their IHP
- penalise pupils for their attendance record if their absences are related to their medical condition. However, school may ask for medical certificates to evidence absences.
- prevent pupils from drinking, eating or taking toilet breaks whenever they need to in order to manage their medical condition effectively
- require parents to attend school to administer medication or provide medical support to their child, including with toileting issues
- prevent pupils from participating, or creating unnecessary barriers to pupils participating in any aspect of school life, including school trips

Policy statement on Equality and Community Cohesion

Working within this policy we aim to make sure that no-one experiences less-favourable treatment or discrimination because of their 'protected characteristics' as follows:

- Their age
- A disability
- Their ethnicity, colour or national origin
- Their gender
- Their gender identity (they have reassigned or plan to reassign)
- Their marital or civil partnership status
- Being pregnant or having recently had a baby
- Their religion or belief
- Their sexual identity and orientation
(Equality Act 2010)