



Children's Welfare in School Policy

Including

Supporting Pupils with Medical Conditions in School

This policy is intended to set out the school's procedures and arrangements to ensure the physical welfare of children in school. It covers our procedures and arrangements for first aid, administration of medication and health care plans.

First Aid

1. The Governors and the Headteacher will ensure that there is at least one qualified first aider in school at all times. At the time of print the school has three members of staff who hold a First Aid at Work and Paediatric First Aid qualification and 16 who hold a Paediatric First Aid qualification.
2. The school also has two Appointed People who oversee all medical emergencies and procedures, Alejandra Gonzalez and Sue Freeman (Pastoral Support)
3. The First Aid at Work Certificate does **not** cover any emergency first aid procedures for children e.g. resuscitation and other emergency procedures. The Paediatric First Aid Certificate covers children from 0-12, including these emergency procedures.
4. Unless first-aid cover is part of a staff member's contract of employment, people who agree to become first-aiders do so on a voluntary basis.
5. Teachers and support staff who undertake responsibilities within this policy are covered by the school's insurance.

First Aid Procedure

6. First aiders **must always**:-
 - Think of their own safety before dealing with a medical emergency.
 - Wear disposable gloves when administering first aid treatment that involves body fluids, e.g. blood, urine, vomit etc. in order to prevent the spread of HIV/AIDS, hepatitis and other communicable diseases.
 - Complete any accident report forms that are necessary. (see paragraph 5)
 - Inform parent/carers/headteacher/class teacher of any injury to a child as necessary.
 - Clean up, or summon the caretaker to clean up any body fluids, using bleach in hot water as necessary.
 - Make sure that any used tissues/swabs/wipes etc. are put into the medical waste bin in the medical room.
7. First aiders **must not**:
 - Use cotton wool to clean a wound, in case fibres are left behind which could cause infection. Water can be used on a tissue/gauze swab or a non-alcoholic wipe can be used.
 - Use any creams, lotions, sprays etc. on any child unless they are for the control of eczema and are part of the child's healthcare plan.
8. If a child has an accident anywhere in the school, a first aider should be alerted.
 - Playground/Dining Room - if they can walk the child should be sent or taken by another child or if necessary, an adult to the medical room so they can be seen by the first aider on duty. If that is not possible, someone should be sent to get a first aider and bring them to the scene of the accident.
 - Classroom (lesson time) - children should be seen by the first aider in class, or one from another class in that year group.
9. For all injuries, the first aider dealing with the incident should decide whether to call the parent/carers to take the child home or to hospital, or whether there is a medical emergency and an ambulance should be called first.
 - In medical emergencies parents should be informed after an ambulance has been called.
 - If it is felt necessary to call an ambulance, the first aider will inform the parents and will accompany the child in the ambulance if the parents cannot get to school or cannot be contacted.

- Sometimes it may be quicker for the parents to come to school and take the child to hospital themselves, if this is appropriate. This may mean that the child will receive medical treatment quicker than waiting for an ambulance.

Accident Reports

10. Accident reports must be completed for **all** accidents as follows:

- Very minor accidents (knee/elbow grazes etc.) should be recorded on the daily log sheet in medical room.
- Minor accidents and **all** head injuries must be recorded on an accident form and placed in the Minor Accident or Head Injury Report folder in the medical room.
- **All** head and minor injuries must be reported to the parent/carer at the end of the day, if they haven't already been called. There is a parent letter to complete in the medical room for this purpose. Sometimes it may be advisable to telephone the parent just to inform them that their child has had an accident in school but that it is not necessary to collect them, unless they want to. First aid staff to use their discretion on this point.
- If a child or adult is taken straight to hospital with a major injury or illness, either by a parent/carer or an ambulance, the first aider dealing with the accident must complete an online accident/incident report for the Barnet Health & Safety Unit, and a RIDDOR accident report on the Health and Safety Executive's website. Sue Freeman or Alejandra Gonzales will advise how to do this. Always make a copy for the child's file and for the accident report file in the medical room.
- A report of any child treated on trips away from school should be completed on return to school.

First aid boxes

11. A first aid box is kept in every classroom, staff room, hall, dining room, rainbow room, cooking room and resource room. The boxes should contain a sufficient quantity of the following first aid materials and **nothing** else:
- Individually wrapped assorted plasters
 - Sterile eye pad
 - Triangular bandage
 - Individually wrapped sterile un-medicated wound dressings – large and medium
 - Alcohol free wipes
 - Disposable gloves
 - Vomit bags
 - Face shield for resuscitation
12. Contents of the box should be replenished by the school first aiders, as soon as possible after use to ensure there is always an adequate supply of materials. Extra supplies can be obtained from the medical room. Items should not be used after the expiry date shown on the packet. It is therefore essential that first aid boxes are checked at the beginning of each half term by the Appointed People in school to ensure that there are sufficient quantities of usable items.
13. First aid bags are kept in the medical room for when the children go on outings. They should contain medical items as in First aid box, children's medication, vomit bags, spare clothes, a bottle of water, carrier bags and a supply of accident report forms. When travelling by coach one first aider with a first aid bag should be on each coach wherever possible. When taking short walking trips one first aider should accompany them.

Administering Medicine in School

14. At Garden Suburb Infant School we strive to ensure that pupils with medical needs receive the health related support to enable them to be included fully into school life.
Whilst all staff have a duty to take reasonable care for the health and safety of pupils in school there is no contractual requirement for any member of staff to administer medicines or undertake training to administer medication and, therefore, any such role is voluntary on their part.
15. Medicine will be kept in school:
- When administration is required regularly during the school day
 - Where the pupil may require medication in an emergency situation.
 - Medicines will only be administered at school when it would be detrimental to a pupil's health or school attendance not to do so.
 - The school will only accept medicines that are in-date, labelled, in their original container, and contain instructions for administration, dosage and storage. The only exception to this is insulin, which must still be in-date, but is available in an insulin pen or pump, rather than its original container.
 - All medicines will be stored safely.
16. Non-prescription medicines may be administered in the following situations:
- When it would be detrimental to the pupil's health not to do so
 - When instructed by a medical professional
17. **Pain relief** - Pain relief medicines are kept in school, they will not be administered without first checking for parental approval, when the previous dose was taken and the maximum dosage allowed. Parents will be informed any time medication is administered that is not agreed in a healthcare plan.
18. **Antibiotics** - these will only be given to a child in school in very exceptional circumstances, this is at the discretion of the head teacher/appointed person.
19. Over the counter medicines/creams, including painkillers and homeopathic remedies, will not be given under any circumstances.
20. If a child does have medicine in school that needs to be given daily or when required (i.e. inhaler), a record of this must be made in the appropriate file in the medical room, showing date, time and dosage given. A note should then be sent home informing the parents that this has been done, again showing the date, time and dosage given.
21. It is the responsibility of the parent/carer to ensure that expiry dates do not run out on their child's medication that is kept in school.
22. When there is a school trip the first aider going with the group should take all relevant children's medication and health care plans with them. If the child's parent/carer goes on the trip, then they will take responsibility for their own child's medication.

Storage of Medication

23. All medicines should be stored in an appropriate place for safety, usually the medical room and classroom, out of children's reach. Consideration should be given for medicines which may be required in an emergency to be accessed immediately.

Controlled drugs (such as Ritalin, a drug used for the treatment of ADHD) must be kept in a locked cupboard at all times. Records of the number of tablets stored and administered must be accurately maintained and may be requested for monitoring purpose

Health Care Plans

24. The governing body will aim to ensure that all children with medical conditions, in terms of both physical and mental health, are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential.
25. Parent/carers are responsible for informing the school of any medical needs or change in circumstances of pupils.
26. Children with severe allergies, epilepsy, diabetes, haemophilia or any other complex medical condition must have an individual health care plan drawn up as soon as possible on entry to the school. Healthcare plans should be drawn up by the Pastoral Support staff, and the parent/carer asked to sign it.
27. Individual healthcare plans help the school effectively support pupils with medical conditions. They provide clarity about what needs to be done, when and by whom. These plans should be reviewed annually, or earlier if evidence is presented that the child's needs have changed. Where a child has SEN but does not have a statement or EHC plan, their special educational need should be mentioned in their healthcare plan. Where a pupil has an Education, Health and Care Plan (EHCP), the Health Care Plan will be linked to it or become part of it.
28. The school should keep the original copy of the Health Care Plan in the file in the office and a photocopy should be kept with the medication, and another photocopy given to the parent/carer.
29. All school staff should be aware of any child with a healthcare plan, with due regard to confidentiality. Supply staff should be made aware of any child who has a healthcare plan or any other medical/special need, in the class they are teaching.
30. Where a child is returning from a period of hospital education or alternative provision or home tuition, we will work with the LA and education provider to ensure that the healthcare plan identifies the support the child needs to reintegrate.

Allergies

31. Any child who has been identified by a professional as having an allergy, must have an individual health care plan, and medication in school. The medication is an adrenaline auto- injector (AAI) usually an EPIPEN and/or Piriton syrup. Parent/carers should provide 2 EPIPENS for their child. One is to be kept in the medical room and one in the classroom, both with a copy of the healthcare plan. **Only trained staff should administer this medication.**
32. All staff should be made aware of any child who could suffer an allergic reaction, and know the procedures to follow should an emergency occur. If a child suffers an allergic reaction at any time in school a first aider should be alerted at once, who will then follow the correct procedure for that particular child, as set out in their health care plan.
33. The school also has a spare Epipen which is kept in the dining room for use in an emergency. The spare AAI will only be administered to pupils at risk of anaphylaxis and where written parental consent has been gained. Where a pupil's prescribed AAI cannot be administered correctly and without delay, the spare will be used. Where a pupil who does not have a prescribed AAI, appears to be having a severe allergic reaction, the emergency services will be contacted and advice sought as to whether administration of the spare AAI is appropriate.

Epilepsy

34. Children with this condition must have an individual Health Care Plan, and medication in school.
Only trained staff should administer these medications.

35. Medication should be kept in the medical room, with a copy of the Health Care Plan. All staff should be made aware of any child who could suffer an epileptic seizure, and know the procedures to follow should an emergency occur. If a child has a seizure at any time in school, a first aider should be alerted at once, who will then follow the correct procedure for that particular child as set out in their Health Care Plan.

Asthma

36. Inhalers will be stored in school for children with asthma. The inhalers are kept in the child's classroom, with a disclaimer form, signed by the parent and giving precise instructions on dosage, frequency etc.
37. Inhalers should be in the original container and prescribed by a doctor. The child's name and dosage should be on the container.
38. All children with asthma medication in school must have a Healthcare Plan.
39. All staff should be aware of who they are. If a child has an asthma attack in school a first aider should be alerted at once, who will then follow the correct procedure for that particular child.
40. The school also has spare inhalers in the medical room, hall, cooking room and dining room. These are only to be used for children who have a healthcare plan detailing the need for use of an inhaler, a list of all children with asthma is included with each spare inhaler.

Other Medical Conditions

41. All children with life threatening conditions, disabilities or any other chronic medical condition, must have an individual healthcare plan. All staff should be aware of these children with due regard to confidentiality and know the procedures to follow should an emergency occur.
42. Only staff who receive appropriate training for this role may administer prescription medicines or give drugs by injection.
43. The school administrator will keep a record of training undertaken and a list of staff qualified to undertake responsibilities in this policy.
44. Staff members may refuse to administer medication. If a member of staff refuses to administer medication, the headteacher will delegate the responsibility to another staff member who is willing.

Complaints

45. Should a parent/carer be dissatisfied with the support provided for their child, they should discuss their concerns directly with the school. If for whatever reason this does not resolve the issue, they may make a formal complaint via the schools' complaints procedure. The procedure to follow is on the school website www.gardensuburbschools.co.uk