



APPLEFORD SCHOOL
MEDICAL POLICIES AND PROCEDURES
Inclusive of First Aid and Administration of Medication
This policy applies to the whole school, including boarding

This policy is publicly available on the School's website and upon request a copy (which can be made available in large print or other accessible formats if required) may be obtained from the school office. All who work, volunteer or supply services to our school have an equal responsibility to understand and implement this policy and its procedures, both within and outside of normal school hours, including activities away from school.

Monitoring and Review: This policy is subject to continuous monitoring, refinement and audit by Fiona Filkins (Headmistress) and Megan Allen (Head of Medical and Pastoral). The Proprietor will undertake a full annual review of this policy and procedures, inclusive of its implementation and the efficiency with which the related duties have been discharged. This discussion will be formally documented in writing. The Proprietor recognises the expertise staff develop by undertaking training and managing medication and first aid. As such, staff can contribute to and shape this policy and its appendices policy. Any deficiencies or weaknesses recognised in arrangements or procedures will be remedied immediately and without delay. All staff will be informed of the updated/reviewed policy which will be made available to them in either a hard copy or electronically.

Signed:

September 2022

Peter Gardner
Proprietor

Fiona Filkins
Headmistress

Megan Allen
Head of Medical

This policy was last reviewed and agreed by the Headmistress and Proprietor in September 2022 and will next be reviewed no later than September 2023 or earlier if significant changes to the systems and arrangements take place, or if legislation, regulatory requirements or best practice guidelines so require.

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Health and Well-Being

Well-being is defined in the Children Act 2004 as:

- The physical and mental health and emotional well-being
- Protection from harm and neglect
- Education, training and recreation
- The contribution made by them to society
- Social and economic well-being

At Appleford School we ensure that the physical, mental health and emotional wellbeing of our pupils and boarders is always promoted.

1: Admission Documentation and Procedure

Purpose: This is to ensure that the central surgery provides an efficient and comprehensive health service throughout the School.

Policy: All registered pupils should have the following completed, which should reach the central surgery **prior to the beginning of school:** -

New Boarding and Day Pupils:

- **Pupil Medical Questionnaire** (Appendix 1)
- **Medical Action Plan** (Appendix 2)
- **Homely remedies consent form** (Appendix 8)
- **Medical treatment consent form** (Appendix 9)

For returning boarding and day pupils the consent form is included in the re-enrolment application and parents/guardians are advised to email the school office of any changes to their child's health and vaccination status by the start of the new school term. It is advised that parents update the school as soon as their child develops a new condition/has a new vaccination so accuracy is maintained within the school medical records at all times. This also includes parents/guardians making sure that their emergency contact details remain updated.

When new boarding pupils start at Appleford, a houseparent will always be available in the boarding house to greet the new pupil. At this time the above outstanding forms should be collected if not already received electronically and the following important information documented.

1:1: Collect the outstanding pupil medical questionnaires and examination forms. Ensure that they have been completed including parent/guardian signed consent for the securing of medical treatment. Parent/guardian emergency contact numbers and/or designated guardians residing within the U.K. should also be obtained. Boarding parents are notified that a height and weight check will take place during the first weeks of term and discuss any medications the pupil may have. Height and weights will be taken as and when appropriate or directed by parents.

1:2: Ask if the pupil has any specific medical problems i.e. diabetes, epilepsy, heart conditions, etc. and ascertain their understanding of their condition.

1:3: Note any drug or food allergy and special dietary requirements.

1:4: Advise on immunisation needs. Notify parents/guardians of these needs.

1:5: Note: If any travel or other holiday destinations are planned, travel immunisations may be required.

1:6: Pupil's Controlled Medications: The name and address of prescribing pharmacy must appear on the prescription label detailing the medication regime. Medications within this category include anti-depressants, amphetamine-based drugs such as those used in the treatment of ADHD. Controlled drugs remain in a locked compartment, within a locked cabinet in the central surgery or house surgeries. These are administered by the houseparent on duty as prescribed. If there is any doubt about the nature of the medication, the prescribing doctor or the local surgery is consulted about the appropriate action to take.

1:7: Boarding Pupil's Medications: (including over-the-counter/non-prescriptions medications).

Parents must register **ALL MEDICATIONS (including supplements)** during their meeting with the houseparent. In many countries the laws governing drugs vary, for example, antibiotics are available without prescription. Parents

that wish their child to take supplements must register the supplement with the houseparent and detail their aimed usage. A discussion will be had between the parents, pupil and houseparent on safe use, storage and safety measures. If deemed suitable the pupil can keep and self-administer these supplements after a risk assessment has been undertaken and they will be monitored closely. Any infringement on the safe use will result in confiscation. For pupils under 16, the houseparent will keep the supplement and administer it to the pupil. For pupils **over 16 years of age**, it is at the houseparent's discretion whether the provided medications will remain with the pupil or be stored in the house surgery. Medications are approved only when the pupil has completed a risk assessment and demonstrated a full knowledge of the drugs usage, dosage and possible side effects. **No medication may be kept or used if it does not have an accompanying English information sheet and is not identifiable.** This may take the form of a written translation provided by the pupil's doctor. If a pupil has prescribed medication from their native country without an accompanying letter in English and/or English translation on the medication packaging, the pupil will attend a doctor's appointment for the equivalent UK medications.

2: Registration and Disclosure of Pupil Medical Information

Purpose: All pupils' immunisations, known medical conditions, current treatments, past treatments, medications regularly taken, preferred "over-the-counter" medicines used should be documented. Any drug, food or environmental allergies should also be recorded. This information is recorded on the medical section of the pupil's file on isams (the school management information system) alongside their National Insurance Number.

Policy: All new pupils are to have a completed pupil medical history questionnaire, confidential information form which is signed by the parents/guardians giving Appleford School medical staff designated by the school such as houseparent's permission to secure medical treatment for their child. Returning pupils complete the consent declaration as part of the re-enrolment application and are asked to update the medical staff with any changes to their child's health and vaccination status.

2:1: For all returning pupils. Parents/guardians are requested to update the school by informing them of any new immunisations, allergies, medical conditions or changes to emergency contact details that may have occurred during the school break.

2:2: For all boarding pupils. It is recommended that boarding pupils have a dental check-up at six monthly intervals during the school breaks in order to maintain the health of their teeth. The school medical staff can organise such checks at parental/guardian request.

2:3: The central surgery will undertake the compiling of confidential medical information, which will include:

- Known medical conditions, action to be taken in case of emergency, medications taken, drug, food and environmental allergies, sport/activity restrictions.

This confidential information will be distributed to (as required): -

- The Head of School, Heads of Prep and Senior School and Head of Sixth Form
- Co-Heads of Boarding, houseparents and PE staff.
- Medical information is also provided for field trips and for travel, and away sports activities on a need to know basis, along with an accompanying health risk assessment.

4. Communication

Communications with pupils' parents/guardians.

In case of an accident or serious illness requiring hospital treatment, parents/guardians should be notified immediately by phone if possible. If parents are unavailable, the use of email should be undertaken. In a non-emergency case, if a pupil is unwell and requires a doctor's appointment, the outcome of the consultation should be conveyed to parents/guardians as soon as possible, usually by phone or email, within 24 hours of the appointment. **In all cases, where possible, the pupil's permission should be sought before communicating medical details.**

- a) Whenever a pupil has an accident or a sudden illness which requires emergency treatment, the parents/guardians should be contacted as soon as possible, either by telephone or email.
- b) There is communication with the parents/guardians of any pupil who has been seen by a doctor (including dental, orthodontic or dermatology check-ups) or who have a continuing problem or illness.

5. Admissions to the central surgery

The sickbay within the central surgery and the boarding houses are primarily for the treatment of pupils requiring medical supervision throughout the day or at night. Pupils are not allowed to rest in the dormitories during the school day for medical reasons, as they would be at risk if their condition deteriorated unless this has been approved by the head of boarding in exceptional circumstances, such as a bed shortage in the central surgery. This is because houseparents are not on duty in the boarding houses during the academic day. If available, rooms within the school building can be used for day pupils for short periods of time to rest or to stay until collected by parents/guardians.

The criteria for pupil's admission to the central surgery are as follows:

- Vomiting, diarrhoea, diabetics that are unwell, known asthmatics that present with respiratory problems
- Pupils presenting with moderate to severe respiratory problems (e.g. pneumonia), extreme flu cases
- Temperatures above 38°C, diagnosed or suspected contagious diseases, migraine headaches, head injuries
- Mental health issues, very sudden acute pain, any pupil at risk of self-harm
- Pain control after a painful injury, orthopaedic injuries that restrict mobility
- Epileptic seizure
- or any circumstance that a duty medical person deems necessary

6: Medication

6:1: Medical Profile

An individual, comprehensive and up to date medical history should be documented for each pupil. The document should contain the following details: -

- Pupil's name and date of birth.
- Details of any known sensitivity to medicines, e.g. to penicillin, aspirin.
- Any information on allergies such as topical lotions, soaps, foods and other allergens that trigger conditions such as asthma, hay fever.

All medical visits are logged on isams and a medical appointment sheet, which is kept in the respective house medical files. These sheets are then filed in the individual pupils file at the end of each term.

Aspirin

Giving medication to children, OFSTED Statutory Framework recommends that children under 16 should never be given medicines containing aspirin unless a doctor has prescribed that medicine for that child.

6:2: Storage of Medications

- All medicines throughout the school must be stored in locked receptacles (except inhalers and other emergency medication).
- In the central surgery/house surgeries all medication is safely and securely stored and proper records are kept of administration.
- Pupils who are **sixteen years of age and over** and have completed a risk assessment and been given permission to self-administer “over the counter” and/or regular medications may retain custody of their medications if the medical staff are happy, providing that there is an accompanying English product information sheet and/or translated English doctors letter and that they are stored in the lockable cupboard. The pupil must also adhere to the conditions stated on the risk assessment form. It is also required that the size of boxes of medication conform to the British pharmacology guidelines, i.e. maximum size box for paracetamol 500mg is 16 tablets/capsules.

6:3: Registration of regular medications taken by pupils: All medication brought onto the school premises for pupils must be handed to a houseparent or member of the medical staff by an appropriate adult for documentation and secure storage. All medication taken either on a regular basis or as needed should be registered with the school including supplements. They must have English information sheets and/or accompanying doctor’s letter in English and the medication name, dose, route and frequency be identifiable. In many countries the laws governing drugs vary, for example, antibiotics are available without prescription in many European and Arabic countries. It is at the houseparent’s discretion as to whether provided medications will remain with the pupil or be stored at the central surgery. Medications are approved only when the pupil has demonstrated a full knowledge of the drugs usage, dosage and possible side effects. Only medications listed on the risk assessment form and signed by both the pupil, parent and the houseparent or head of boarding are permitted.

- Self-administration of medication and consent - appendix 3
- Self-administration of medication (student) - appendix 4

6:4: Administering Medication: School staff when administering medication should adhere to the following standard practice. They must:

- Check written instructions received by the school and confirm with details on the medicine container
- Check for any pupil allergies, have they taken any medications today?
- Check the prescribed dosage and check the expiry date of the medicine (note it may be helpful to remind parents if the expiry date is approaching).
- Check timing and frequency details, check record of last dosage given (to avoid double dosage),
- Measure out the prescribed dose, check the pupil’s name on the medicine again.
- Complete documentation of dosage given, including date, time and signature.

6:5: Pupil’s Controlled Medication: All controlled medication brought onto the school premises for pupils must be handed in person to a houseparent or member of the medical staff by an appropriate adult for documentation and secure storage. A medication form should be completed for any prescribed controlled drugs or there should be a doctor’s letter in full detailing diagnosis, medication, frequency, dose, route and when to administer. Medication within this category include anti-depressants, amphetamine-based drugs as used in the treatment of Attention Deficit Hyperactivity Disorder (ADHD). Controlled drugs remain in the surgery(s) and are administered by the houseparents as prescribed. These medications are stored in the controlled drug cupboard (this is a locked cupboard which is located within another locked cupboard). Administration of these drugs are recorded in the “Controlled Drugs Book”. If there is any doubt about the nature of the medication, the prescribing doctor is consulted about the appropriate action to take. There should be a clear identifying label on the box/bottle from the prescribing doctor as with all medication, detailing the pupil’s name, medication name, dosage, lot number and expiry date.

Appleford is committed to safeguarding and promoting the welfare of students and expects all staff and volunteers to share this commitment. It is our aim that all students fulfil their potential.

6:6: 'Over the Counter' medication (household remedies) will be dispensed to pupils by the school houseparent or duty medical person by giving an initial dose and further appropriate doses on consultation with parents.

Any day pupils under 16 years of age that upon assessment by the medical staff it is deemed that medication would be beneficial will have their parent's telephoned notifying them of the pupil's condition and informing them of the medication given. All parents at the beginning of the school year sign medical consent, allowing, in emergency situations, medication, first aid and lifesaving treatment to be administered.

6:7 Staff involved with the administration of medicines should be alert to any excessive requests for medication by pupils or by parents on their behalf. In any cases of doubt, advice may be obtained from the Head of Medical.

Medical staff audit the medications administered and log visits, and notify parents accordingly.

6:8 Faculty/Staff Medication and Medical Conditions: Any member of Appleford staff that takes regular medication requiring administration during the school day must take individual responsibility to keep these medications secure and away from pupils. If a member of staff has any concerns about their medication they must seek advice from the school medical team in central surgery. If the medication or the medical condition is likely to affect the staff members ability to fulfil their job role the staff member should not come to school and must seek guidance from their doctor. It is recommended that any staff member undergoing invasive medical treatment such as chemotherapy notify the school for support and guidance. If a female member of staff becomes pregnant during the course of her employment at Appleford, it is suggested that they inform the school so they can be supported in the workplace and notified of any health concerns around the school that could affect them or their unborn child. She must also inform the Medical team who will create a risk assessment.

7: Treatment for Serious and/or Chronic Medical Conditions

Some pupils may suffer from chronic medical conditions, which may require urgent action to prevent a possible life-threatening situation from developing. In each case, they will have a Medical Action Plan and/or a risk assessment that are circulated to all staff. In the case of a medical incident, these MAPS or Ras must be followed.

In all cases professional training must be obtained before the school makes a commitment. Where pupils have a condition, which may require rapid intervention, all staff should be able to recognize the onset of the condition and take the appropriate action. Training and advice on recognizing symptoms can usually be obtained from the medical team or the pupils individual risk assessment.

This includes but is not limited to; Asthma, epilepsy, diabetes, anaphylaxis

8: First Aid Provision

Rationale

It is a statutory requirement for an employer to make adequate first aid provision for all employees. At Appleford it is recognised that the provision should cover all staff, pupils and visitors.

Our Aims

- To provide first aid treatment where appropriate for all users of the school (with particular reference to pupils and staff).
- To provide or seek secondary first aid where necessary and appropriate.
- To treat a casualty, relatives and others involved with care, compassion and courtesy.

Guidelines

- To ensure that during term time there are sufficient qualified first aider(s) available to provide first aid cover at all times when pupils, staff, parents, visitors or contractors are on the school site.
- To ensure that first aid information is readily available and that all users of the school are aware of the way in which to call for help.
- To ensure that first aid kits for minor injuries are available for use throughout the school by all first aiders and that they are regularly maintained. Location of these kits must be known by all designated persons/first aiders.

Key points

All staff are expected to use their best endeavours in the event of a first aid emergency, while seeking support from the duty first aider/one of the first aid trained members of staff on site.

All staff should know:

**How to call the emergency services – dial 999/112 and ask for an ambulance.
If there is any doubt that an ambulance is required, call an ambulance straight away.**

8.1 The Duty First Aider

- The duty first aider: If they are not at the medical desk, they can be contacted on extension 1032 or mobile number 07938571435 or via reception.
- In the event of a pupil feeling unwell during a lesson, they should be sent to the duty first aider. Prep pupils should be accompanied by another pupil or adult and a medical note should be sent with them explaining the issue. Senior pupils are only escorted if they are feeling dizzy or at the teacher's discretion.
- If a child or adult needs medical assistance resulting in being unable to walk to the central surgery, a staff member may send someone to take to the school reception to alert them that there is a medical emergency and a duty first aider is required.
- In the event of a change, e.g. duty first aider is away, the School secretary should be informed.
- A list of qualified first aiders is displayed on the medical notice board in the medical room and a copy is held by The Head of Pastoral and by the Human Resources Dept. Any Qualified First Aid trained Staff Member should first treat the pupil/staff and then inform medical of any treatment to avoid unnecessary movement of casualties.
- All qualified first aiders per building are listed on a notice next to the first aid box.

After Hours Emergencies

Central surgery is open as follows:

Monday – Friday: 0900 – 1650 Outside of these hours the houseparent should be contacted.

1. In the case of the houseparent having to take a child to hospital during the night, the houseparent needs to inform the head of boarding on their mobile so they can arrange cover for the member of staff absent if required.
2. In the event of a major incident the Headmistress and Co-Heads of Boarding are to be telephoned and asked to attend if at all possible.

APPLEFORD SCHOOL

FIRST AID - LOCATION OF BOXES



OAK HOUSE:

- Reception - Kat's Office - Large kit and eye wash
- Reception - Kat's Office - Small travel bag
- Kitchen - Small kit catering blue
- Burns cool box
- 3 x eyewash stations x 500ml

MEDIA ROOM:

- Medium kit and 1 eye wash

PREP SCHOOL:

- Medium kit (classroom E5)

ELM HOUSE:

- Elm Boarding House - Medium kit (surgery)
- Elm Occupational Therapy - Medium Kit

THE ROOKERY:

- Medium kit (corridor)
- Science lab - Medium kit (R1)

SPORTS HALL:

- Medium kit (staff toilet)
- Travel sports bag (staff toilet)

WILLOW HOUSE:

- Medium kit (corridor)
- Willow Boarding House - Medium kit (surgery)

BEECHES:

- Medium kit (corridor)
- Food Tech - Small kit catering blue

- Beeches Boarding House - Medium kit (surgery)

PE CONTAINER:

- Medium kit

STAFF WORK ROOM:

- Medium Kit

CEDAR HOUSE:

- Medium kit (surgery)
- Small kit catering blue (kitchen)

VEHICLES:

- Minibus 1 - Small kit and PSV kit bag
- Minibus 2 - Small kit and PSV kit bag
- Minibus 3 - Small kit and PSV kit bag
- Car 7-Seater - Small kit and medium motor kit (boot)

Dealing with first aid emergencies.

There is a rota to ensure that a qualified first aider is on call during the school day, this person is known as the person on **Medical Duty**.

All users of the school will be able to contact the medical duty person first aider via reception or direct to the medical duty desk, extension number 1032 or mobile number 07938571435.

Any qualified first aider that is first on the scene may treat the casualty. The initial first aider will be in charge of the incident and can direct any bystanders or other first aider to support them.

Once informed of an incident the medical duty/first aider(s) will go to the casualty/casualties without delay and provide emergency care.

Blankets for shock treatment (in first aid kits and 2 emergency foil blankets on minibus') must be readily available as well as rubber gloves and pocket masks for resuscitation.

Secondary aid will be sought if necessary. The parent/guardian (or another appropriate adult) will be informed as soon as possible.

If an appropriate adult cannot accompany a casualty to hospital a member of staff will accompany him/her if this is deemed appropriate.

Medical Duty First Aiders are responsible for:

- Taking charge when someone is injured or becomes ill.
- Ensuring that an ambulance or other professional medical help is summoned if appropriate.
- Giving immediate help to casualties with common injuries or illnesses and those arising from specific hazards at school.
- Ensuring where appropriate that the schools accident book is completed by the person who witnessed the accident or found the pupil.
- Supporting Virgin Care in their vaccination programs.

School trips or outings:

- A member of staff trained in the administration of medication should accompany the trip, taking responsibility for the safe storage of pupil's medication, if the pupils cannot carry it themselves.
- Staff supervising the trip must be aware of the pupil's condition and of any relevant emergency procedures.
- Staff must bring the relevant medical paperwork on the trip.

Responsibility:

The provision of first aid at Appleford School is delegated by the Director to the Headmistress, who in turn delegates responsibility to The Head of Medical / Pastoral. The Head of Medical / Pastoral in consultation with the Senior Leadership Team determines the number of first aiders and the level of training they should receive.

An appointed person within the medical team is responsible for looking after and restocking all the first aid boxes throughout the school.

The number of first aiders is reviewed annually by the Head of Medical / Pastoral in consultation with the Senior Leadership Team, or more frequently when required, for example following an accident or emergency.

When determining the appropriate number of first aiders, the following is considered:

- The number of staff (and pupils) present at any one time
- The distribution of staff
- The number and locations of first-aid boxes
- Whether there are inexperienced members of staff
- The number of staff and pupils with disabilities or specific health problems
- School trips and activities
- The size and location of the school premises to which members of staff have access in the course of their employment
- Whether there are travelling, remote or lone staff
- Arrangements for off-site activities
- Arrangements for out of school hour activities such as parent evenings
- Parts of the school premises with different levels of risks
- The types of activity undertaken
- The proximity of professional medical and emergency services
- Any unusual or specific hazards (for example, working with hazardous substances, dangerous tools or machinery)
- Accident statistics. These indicate the most common types of injuries, times and locations. It is a useful tool as it highlights areas to concentrate on and tailor first aid provision to.

When selecting staff to be an appointed person or first aider, the Head of Medical / Pastoral will consider their reliability, communication skills, aptitude to learn, ability to cope with stressful situations and the ability to leave the work that they are doing at the time.

Guidance on the minimum legal requirement for first aiders; the recruitment, selection and training of First Aiders; the responsibility and accountability of First Aiders; the need for a first aid room/surgeries and the contents of first aid boxes can be found in the Health and Safety (First Aid) Regulations 1981.

Cleaning up body fluids from floor surfaces

All appropriate precautions will be taken by the support staff when cleaning up after an incident involving blood, vomit, etc. Disposal of body fluids must be placed in the sharps yellow bins located in all the surgeries.

Avoid direct contact with body fluids, as they all have the potential to spread germs. Germs in vomit and faeces may become airborne, so it is very important to clean up body fluids quickly. Red bags (for soils) are available in all surgeries.

Follow the yellow box instructions

- Put on gloves and a disposable apron. Disposable latex or vinyl gloves is the best choice. However, reusable rubber gloves are acceptable as long as they are cleaned and sanitized after each use.
- Remove all visible material from the most soiled areas, using paper towel/red scraper and dustpan.
- Put all used paper towels and cloths into a clinical waste yellow bin for incineration.
- The remaining visible material should then be vacuumed. The vacuum cleaner bag MUST be changed after use, and the hose and pipe disinfected with Eco Force.
- Non- carpeted areas: Sanitize the area using Eco Force, leaving on the affected area for a minimum of 10 minutes. A red mop and bucket are designated for this use. (One in all surgeries and one in the sports hall)
- Carpeted areas: The area should be cleaned with Eco Force solution and should be in contact with the affected area for at least 10 minutes. The area should then be shampooed or steam cleaned with 24 hours.
- Wash the non-disposable cleaning equipment (mops, buckets) thoroughly with soap and water and then rinse with Eco Force.

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- Discard gloves, disposable apron into a yellow bag for incineration. Finally wash your hands thoroughly using soap and water.

11: Reporting Accidents

To record all accidents reported to the medical team.

Policy:

All accidents (other than minor i.e. paper cuts, minor bumps and grazes) are to be recorded in full in the 'accident report book'. The pupil's name, date and location of the accident are to be recorded together with a full description of the injuries sustained and the action taken by the first aid giver. The pupil's account of the accident and the teacher's/coach's report of the accident (if available) is to be fully documented.

Procedure:

- If the injury is questionable, i.e. no one witnessed what happened or the extent of the injury is unknown a first aider is to be called to the scene of the accident in order to make an evaluation of the injury.
- If it is an obvious serious injury call **999** immediately and summon an ambulance.
- After making an evaluation, ensuring the safety of the pupil and carrying out appropriate first aid measures the medical staff will either: -
 - Transport pupil to the central surgery
 - Transport pupil to Salisbury District Hospital's Accident and Emergency Department (or nearest hospital)
 - Call an emergency ambulance

In the event of all accident's parents/guardians will be informed by telephone, if parents are not easily available, the school will delegate a member of staff to contact the pupil's registered emergency numbers.

The parents/guardians will be telephoned to: -

- Inform of a minor injury (can also be emailed)
- Inform of an injury requiring medical attention (can also be emailed if minor)
- Inform of injury requiring hospital attention
- Arrangements are then made for the parent/guardian to: -
 - Pick up the pupil from the central surgery
 - Meet the medical staff and pupil at Salisbury District Hospital's Accident and Emergency Department.

In **EXTREME EMERGENCIES** the pupil medical consent contains the parents/guardian's consent for the school medical team or Headmistress to consent to emergency treatment. The Headmistress will consent only after **ALL** efforts have been made to contact the pupil's parents/guardians or designated emergency contact.

It should be noted that the designated emergency contact does not automatically have the power to consent to the pupil's treatment. This permission should be specifically identified in writing by the parents/guardians and registered in the pupil's file in the admin office and central surgery.

All accidents, other than minor paper cuts, splinters, bumps etc., should be recorded in the accident report book. Certain injuries and diseases (including pandemics) are reportable to **RIDDOR** (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations) which should be done by the school's health and safety representative directly on line at <https://www.hse.gov.uk>. The health and safety representative are responsible for the storage and collation of information sent to RIDDOR. Staff members can access the above website for advice about reportable accidents.

RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations, 1995)

All Schools are required to report to the Health and Safety Executive (Tel: 0845 300 99 23). Employers must report:

- Deaths
- Major injuries
- Over three-day injuries
- Accidents causing injury to pupils
- Accidents causing injury to members of the public or people not at work
- Specified dangerous occurrences, where something happened which did not result in an injury but could have done.

Refer to Health & Safety Handbook for full details

Pupils reporting Bullying and the treatment of injuries caused by Physical Abuse

Purpose:

- All cases of bullying must be documented.
- The recording of injuries reported to the central surgery being caused by bullying and/or physical harassment.
- To record treatment received and follow-up care required

Policy:

All incidents of bullying and physical harassment will be thoroughly investigated and the results of those investigations acted upon. Please see the anti-bullying policy.

Pupils reporting Sexual Harassment, Sexual Abuse or Physical Abuse caused by their peers or adults.

Purpose:

To record all cases of pupil sexual harassment, sexual abuse or physical abuse caused by pupil peers or adults and to promptly secure the help that is required for their protection, safety and treatment.

Policy:

All incidents of pupil sexual harassment, sexual abuse or physical abuse caused by pupil peers or adults are to be **immediately reported to the Designated Safeguarding Lead**. If they are unavailable, then their deputy should be informed.

All incidents of the above will be handled using the guidelines and protocols provided by the Wiltshire Safeguarding Children Board (WSCB), adhering to the government guidance: *Working Together to Safeguard Children and Keeping Children Safe in Education* most recent guidance.

An entry will be placed on the CPOMS database (the pastoral, wellbeing and safeguarding database.)

More information is available in the Appleford School Child Safeguarding Policy.

Intimate Care Policy

Intimate Care can be defined as care tasks of an intimate nature, associated with bodily functions, bodily products and personal hygiene, which demand direct or indirect contact with, or exposure of, the sexual parts of the body.

The nature, circumstances and context of such contact should comply with professional Codes of Practice and is part of this medical policy which is regularly reviewed.

Pupils should be encouraged to act as independently as possible.

Intimate care tasks specifically identified as relevant include:

- Dressing and undressing (underwear), helping someone use the toilet, changing continence pads (faeces)
- Changing continence pads (urine)
- Bathing/ showering
- Washing intimate parts of the body
- Changing sanitary wear

Personal Care generally carries more positive perceptions than intimate care. Although it may often involve touching another person, the nature of this touching is more socially acceptable, as it is less intimate and usually has the function of helping with personal presentation and hence is regarded as social functioning. Those personal care tasks specifically identified as relevant here include:

- Skin care/applying external medication
- Feeding
- Administering oral medication
- Hair care
- Dressing and undressing (clothing)
- Washing non-intimate body parts
- Prompting to go to the toilet

Personal care encompasses those areas of physical and medical care that most people carry out for themselves but which some are unable to do because of disability or medical need. Some pupils may require help with eating, drinking, washing, dressing and toileting.

Staff should bear in mind the following principles:

- Pupils have a right to feel safe and secure.
- Pupils have a right to an education and schools have a duty to identify and remove barriers to learning and participation for pupils of all abilities and needs
- Pupils should be respected and valued as individuals.
- Pupils have a right to privacy, dignity and a professional approach from staff when meeting their needs.
- Pupils have the right to information and support to enable them to make appropriate choices.
- Pupils have the right to be accepted for who they are, without regard to age, gender, ability, race, culture or beliefs.
- Pupils have the right to express their views and have them heard. Schools must have a complaints procedure that children and young people can access
- A pupil's intimate/personal care plan if necessary, should be designed to lead to independence.

Practical considerations to ensure health and safety of staff and pupils:

- All members of staff assisting with intimate/personal care should be employees of Appleford School. Staff should receive training in good working practices, which comply with Health and Safety regulations such as

dealing with bodily fluids, wearing protective clothing, manual handling, child safeguarding, infection control, whistle blowing and risk assessment.

- Where a routine procedure needs to be established, there should be an agreed medical action plan involving discussion with parents or carers, school medical team and the pupil. The plan must be reviewed on a regular basis. The school's complaints procedures should be known to all, and followed where necessary.

At Appleford School it is recommended that:

- Personal care staff notifies the teacher, line manager or other member of staff, discreetly, that they are taking the pupil to carry out a care procedure
- A signed record is made of the date, time and details of any intervention required that is not part of an agreed routine
- If a situation occurs which causes the staff member who is giving the personal care, embarrassment or concern, a second member of staff should be called if necessary, and the incident reported and recorded
- When members of staff are concerned about a pupil's actions or comments whilst carrying out the personal care procedure, this should be recorded and discussed with a line manager immediately.

The most likely place where intimate care may need to be given is in the central surgery. It is recommended that another houseparent/duty medical person be informed prior to intimate care commencing. If another houseparent is not available, another member of staff is to be informed. The act of intimate care is to be documented in the pupil's medical file. The pupil's wishes and consent should be agreed before the intimate care commences.

Infectious Outbreaks

In the event of an infectious outbreak such as the Norovirus the following procedure should be followed:

- Isolate the pupil or staff member until they can go home
- Inform the head of boarding, all medical staff, teachers, tutor and admin staff.
- If the pupil is a boarding pupil they need to go home if possible, or to their UK Guardian, until 48 hours clear of last vomiting or diarrhoea.
- If a staff member they should go home and stay there until 48 hours after last symptoms.
- No pupil or staff member must come back to school until they are 48 hours clear of symptoms.
- In the event of many cases of infection, house as many pupils in the central surgery as possible, grouping same sexes together
- If there is a large number of boarding pupils affected consider making a makeshift dormitory to contain all the affected pupils
- Minimise those that are looking after the pupils and do not mix staff looking after non-infected pupils and infected pupils where possible (to prevent spread)
- It may be necessary to call in additional staff to assist with looking after the infected pupils
- Adopt good hygiene prior to winter commencing to try and minimize infectious outbreaks following the hand washing guidance.
- Make sure areas are well cleaned and disinfected, utilizing the same cleaning staff where possible. If a houseparent becomes unwell they must inform their manager immediately and go home.
- Inform Public Health England (PHE) phone number 0300 303 8162 if an outbreak occurs for advice and guidance in managing the outbreak. In extreme cases school closure can be determined although it may often be best to keep the school open.

Mental Health

Appleford takes its responsibilities towards pupils that may be experiencing mental health difficulties seriously. The school provides support wherever possible in house with an experienced team of therapists, and have excellent links with outside agencies such as doctors, therapists, psychiatrists and the NHS.

The school has a dedicated school Counsellor that can meet with and support pupils throughout their Appleford journey.

There is an experienced team of staff that are responsible for the safety and wellbeing of pupils at Appleford and they all work together to provide the best support and outcome for pupils that may be experiencing difficulties, both short and long term. The school operates an 'open door' policy to encourage children to seek help themselves and for staff to refer any concerns so they are dealt with quickly and appropriately. Sometimes, pupils may require more in-depth help and support and Appleford School is in a position to refer to such people that are experienced and skilled in dealing with Appleford pupils. The school will work closely with these professionals to maintain the pupil's safety within school and adhere to any advice and guidance that is given, as this is in the pupil's best interests.

Appleford wants to make sure that all pupils are happy, healthy and thrive and understand we all need a little help from time to time with the busy and stressful lives we have today.



APPLEFORD SCHOOL MEDICAL QUESTIONNAIRE

This form should be completed and returned before your child arrives at Appleford
Please attach an additional sheet if necessary, marking the relevant question number.

* Please delete as appropriate

1. Child's full name	As it appears on birth certificate/passport Please underline usual or nickname		
2. Full address			
3. Date of Birth			
4. Town & country of birth			
5. If coming from abroad, date of return/entry to UK			
6. NHS Number			
7. Name and address of present Doctor			
8. Doctor's telephone number			
9. Name and address of present Dentist			
10. Dentist's telephone number			
11. Has he/she any ailments which will stop him/her participating in school games?			
12. Is there any special peculiarity in his/her health or constitution?			
13. Does he/she suffer from Nocturnal Enuresis?			
14. Has he/she been immunised against: Please ensure you add the date administered	Polio, Diphtheria And Tetanus	Yes/No*	Date
	Whooping Cough	Yes/No*	Date
	Measles	Yes/No*	Date
	BCG vaccination	Yes/No*	Date
	M.M.R.	Yes/No*	Date

15. Does he/she have any allergies to include food and medication? If Yes, please complete attached Medication Action Plan	Yes/No		
16. Does he/she have any allergies? Please describe.			
17. Does he/she have any special dietary needs e.g. cultural/religious/intolerance etc.? If so, please describe fully.			
18. Is his/her sight normal? If not, please give details.			
19. Is his/her hearing normal? If not, please give details.			
20. Is there any information (family, emotional or otherwise) which would be helpful for us to know?			
21. Is your child taking prescribed medication? If Yes, please complete attached Medication Consent Form	Yes/No		
22. Enclosed with this document are (see notes below):	GP's/Consultant's letter	Yes/No*	Note 1
	Letter re. other medication from you	Yes/No*	Note 2
	Child's medical card (EC4)	Yes/No*	Note 3
23. Parent/Carer contact details	Name: Tel: Name: Tel:		
24. Emergency contact details (other than those above)	Name: Tel: Name: Tel: Name: Tel:		

NOTES: PLEASE READ THE FOLLOWING NOTES CAREFULLY:

GP/CONSULTANT

1. It will be necessary for us to have written confirmation from your GP or Consultant confirming your child's medication, the dosage, the frequency and times. If you have such confirmation in your possession, please forward a copy to the school or ask your GP/Consultant to forward it directly to us.
2. All medication must come into school in its original packaging with prescription label on.
3. Any over-the-counter medication, vitamins and/or homeopathic remedies must be handed to either one of the Houseparents or to Reception together with a covering letter signed by you detailing the dosage, the frequency and times. With the exception of homeopathic remedies and vitamins, all other over-the-counter medication will be administered for a maximum of 48 hours and then you, as the parents, will be consulted as your child would either have to stop the medication or be examined by a doctor.
4. Parents of boarders are invited to register with our local GP. Please speak with your child's Houseparent who will provide you with the necessary form.
5. It is imperative that you notify the school in writing if your child either starts medication or if the details concerning any existing medication change.

FIRST AID

6. We also need your permission to administer first aid to your child. By signing below, your permission will be given **unless you specifically write a note to the contrary**.

DENTIST

7. **Parents are asked to arrange for their children to visit the dentist in the holidays (except in special circumstances) to avoid the necessity for treatment during the term. Emergency treatment will, of course, be arranged.**

DECLARATION

I/We confirm and declare that the information provided in this Medical Questionnaire (and any additional sheet(s) enclosed) is correct and that I/we have disclosed full details relating to any medical condition, health problem, allergy or disability which affects my/our child.

Signed: Relationship to Child:

Signed: Relationship to Child:

Date:



Medical Action Plan (MAP)

Appendix 2

Pupil's Name: _____ Date of Birth: _____

GP's Name: _____ Tel No: _____

Medical Condition (Please specify: Asthma/Epilepsy/Diabetes/Severe Allergy, etc):

Please delete condition(s) not applicable below: -

Asthma: Preventer Medicine: _____
Reliever Medicine: _____
Known Triggers: _____

Epilepsy: Medications given: _____
Known Seizure Triggers: _____

Diabetes: Medications given: _____
Usual Blood Sugar Levels: _____

Allergies: Type: _____
Medications given (if applicable): _____

Other Conditions:
Type: _____
Medications given (if applicable): _____

Does your child have an Epi-pen: Yes/No How Many: Dosage:

Signs & Symptoms of Medical Condition:

1. _____
2. _____
3. _____
4. _____
5. _____

Signature of Parent/Guardian: _____ Date: _____

**** Please continue overleaf if you require additional space for any section**

Appleford is committed to safeguarding and promoting the welfare of students and expects all staff and volunteers to share this commitment. It is our aim that all students fulfil their potential.

SELF-ADMINISTRATION OF MEDICATIONS AND CONSENT

SELF-ADMINISTRATION OF MEDICATION PARENT CONSENT FORM

Form to be completed by parents if they consent to their child, self-administering medication *or* for their child to carry his/her own medication.

ALL medication, including non-prescription medication (e.g. travel sickness pills, paracetamol, hay fever tablets etc.), to be self-medicated must be stated on this form.

DETAILS OF PUPIL:

Surname	
Forename(s)	
Date of Birth	
Male/Female	

MEDICATION

(Please ensure medication is clearly labelled with students name and in its original packaging)

	Medication 1	Medication 2	Medication 3
Condition or illness (or requirement for medication):			
Name of medication, as described on container/box:			
How long will your child take this medication?			
Date dispensed:			
Dosage:			
Method of administration (oral, injection etc.):			
Special precautions:			
Side effects:			
Procedures to take in an emergency			
Please note: Students using inhalers should carry and self-administer the relief medication			

- I accept that there is no legal duty requiring school staff to administer medication; it should be noted that this is the service that Appleford School is not obliged to take.
- I understand that I must complete this form and send it to Appleford School before the student will be allowed to self-medicate.
- I understand that the named student is responsible for carrying all medication recorded on this form.
- I understand that the medication will be: clearly labelled with their name, date of birth, and dosage and it will be in its original packaging.

Appleford is committed to safeguarding and promoting the welfare of students and expects all staff and volunteers to share this commitment. It is our aim that all students fulfil their potential.

- I understand that the medication supplied must be suitable for use and be within its expiration date. The Size of box of medication must conform to British Pharmacology guidelines – i.e. max size for paracetamol 500mg is 16 tables / capsules
- I understand that if my child vomits and/or spits out the medication given, the dose will not be repeated.
- I confirm that I will notify Appleford School of all changes in circumstances and/or any relevant information.

I give my consent for _____ (*insert child's name*) to self-administer the above medication.

Signature: _____ Date: _____

Print Name: _____

Relationship to pupil: _____

ONLY TO BE COMPLETED WHEN STUDENTS ARE TO PERMANENTLY CARRY THEIR MEDICATION (only applicable to Asthma relief medication (inhalers)).

I would like my son/daughter to keep his/her medication on him/her for use as necessary.

Signature: _____ Date: _____

Relationship to pupil: _____

**PLEASE RETURN THIS FORM TO APPLEFORD
SCHOOL AS SOON AS POSSIBLE.**

Form to be completed by STUDENT if they consent to self-administering medication **or** to carry his/her own medication.

ALL medication, including non-prescription medication (e.g. travel sickness pills, paracetamol, hay fever tablets etc.), to be self-medicated must be stated on this form.

DETAILS OF PUPIL:

Surname	
Forename(s)	
Date of Birth	
Male/Female	

MEDICATION

(Please ensure medication is clearly labelled with students name and in its original packaging)

	Medication 1	Medication 2	Medication 3
Condition or illness (or requirement for medication):			
Name of medication, as described on container/box:			
How long will you take this medication?			
Date dispensed:			
Dosage:			
Method of administration (oral, injection etc.):			
Special precautions:			
Side effects:			
Procedures to take in an emergency			
Please note: Students using inhalers should carry and self-administer the relief medication			

- I accept that there is no legal duty for school staff to give medication; it should be noted that this is the service that Appleford School is not expected to take.
- I understand that I must complete this form and send it to Appleford School before I will be allowed to self-medicate.
- I understand that I am responsible for carrying all medication recorded on this form.
- I understand that the medication will be: clearly labelled with my name, date of birth, and dosage and it will be in its **original packaging**.
- I understand that the medication supplied must be suitable for use and be within its expiration date.
- I understand that if I vomit and/or spit out the medication given, the dose will not be repeated.

- I confirm that I will notify Appleford School of all changes in circumstances and/or any relevant information.

I _____ (insert my name)

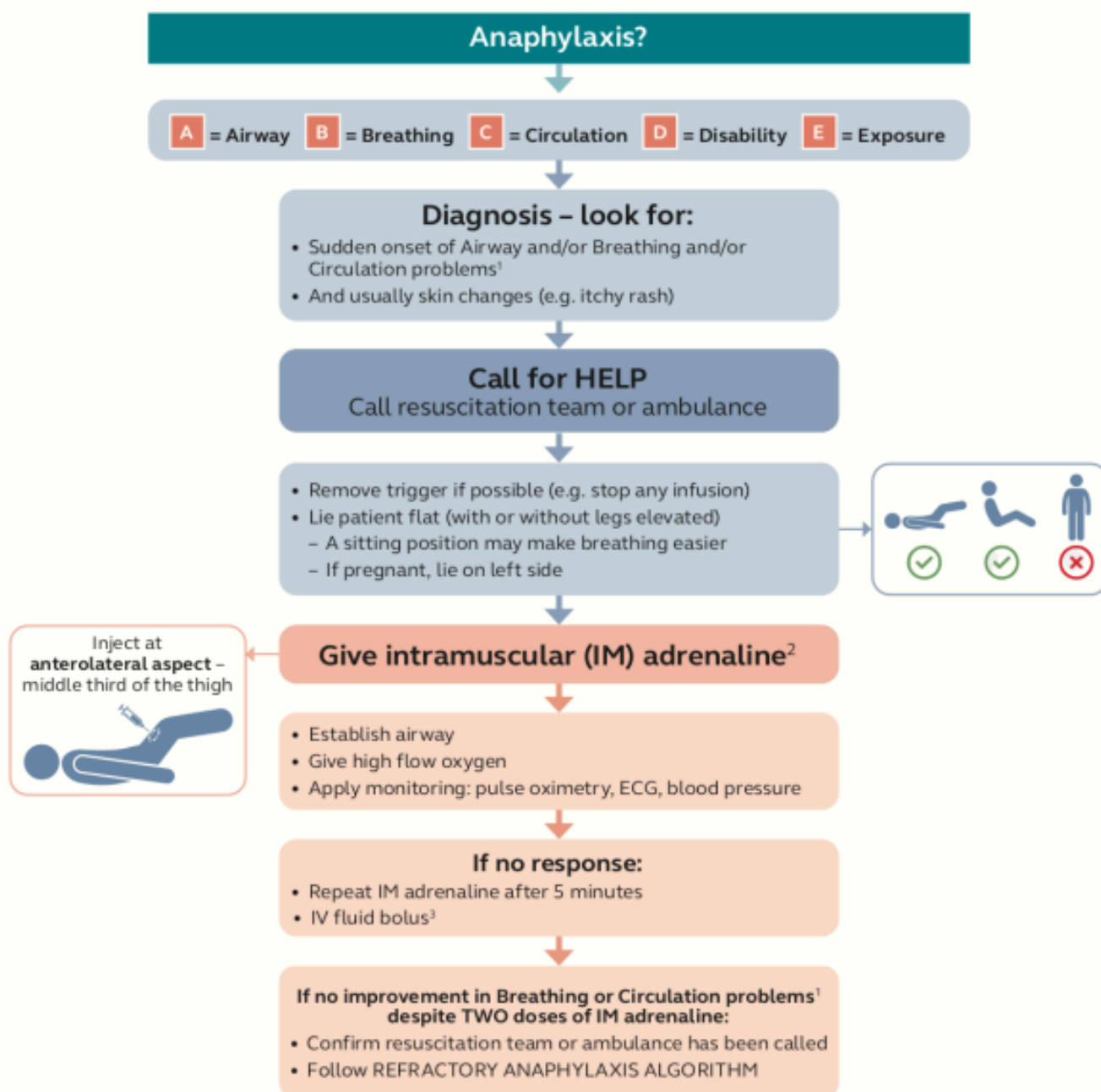
agree to self-administer the above medication.

Signature: _____ Date: _____

Print Name: _____

**PLEASE RETURN THIS FORM TO APPLEFORD
SCHOOL AS SOON AS POSSIBLE.**

Anaphylaxis





Appleford School

A unique path to success

Date:

The Houseparents
Appleford School
Elston Lane
Shrewton
SALISBURY
SP3 4HL

Dear Houseparents

Pupil Name:

This letter is to confirm that I/we have handed in the following vitamins/medication for use by my/our child until further notice and give my/our permission for you or the medical officer to administer the vitamins/medication as indicated below:

Name of vitamins/medication	Dosage	Frequency

Should I/we deliver further medication to you during this academic year, written instructions will be given at that time.

Should any over the counter medication be required for my/our child for longer than 48hours, I/we will provide written instructions regarding the administration of the medication and indicate the length of time it will be required.

A Doctor's prescription should be administered as instructed by the doctor.

Yours sincerely

BODY MAPS

Body Map Guidance for Schools

Body Maps (please see on next page) should be used to document and illustrate visible signs of harm and physical injuries.

Always use a black pen (never a pencil) and do not use correction fluid or any other eraser. Do not remove clothing for the purpose of the examination unless the injury site is freely available because of treatment. ***At no time should an individual teacher/member of staff or school take photographic evidence of any injuries or marks to a child's person, the body map below should be used.**

Any concerns should be reported and recorded without delay to the appropriate safeguarding services, when you notice an injury to a child, try to record the following information in respect of each mark identified: e.g. red areas, swelling, bruising, cuts, lacerations and wounds, scalds and burns:

- Exact site of injury on the body, e.g. upper outer arm/left cheek.
- Size of injury-in appropriate centimetres or inches.
- Approximate shape of injury-e.g. round/square or straight line.
- Colour of injury-if more than one colour, say so.
- Is the skin broken?
- Is there any swelling at the site of the injury, or elsewhere?
- Is there a scab/any blistering/any bleeding?
- Is the injury clean or is there grit/fluff etc?
- Is mobility restricted as a result of the injury?
- Does the site of the injury feel hot?
- Does the child feel hot?
- Does the child feel pain?
- Has the child's body shape changed/are they holding themselves differently?

Importantly the date and time of the recording must be stated as well as the name and designation of the person making the record. Add any further comments as required. Ensure First Aid is provided where required and recorded.

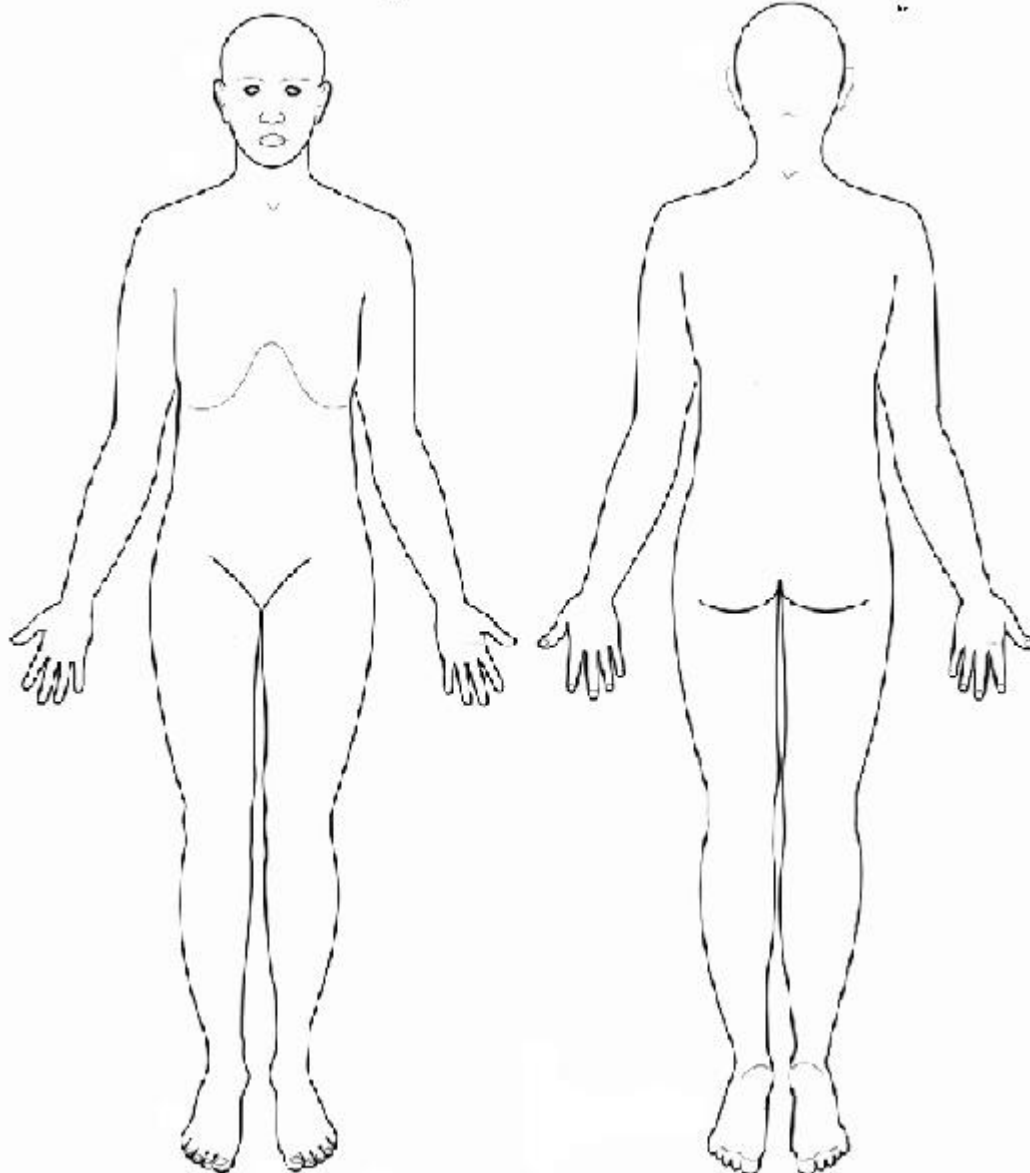
A copy of the body map should be kept on the child's concern/confidential file. This must be completed at time of observation:

Name of Pupil:

Date of Birth:

Date and time of observation:

Name, Signature and Job title of staff:



CONSENT FORM FOR COMMONLY USED HOMEY REMEDIES TO BE ADMINISTERED AT APPLEFORD SCHOOL

Please Tick	Medication	Indication	Child Dose	Maximum Daily Dose
	Paracetamol tablets 500 mg	Mild to moderate pain including period pain	Over 12 years - 1 to 2 tablets every 4 to 6 hours	4 doses in 24 hours
	Paracetamol Liquid	Mild to moderate pain	Child over 6 years - 1 to 4.5ml spoonful's dependant on age every 4 hours	4 doses in 24 hours
	Cold & Flu Hot Drink	Cold & Flu Symptoms	Over 12 years- One Sachet every 4 to 6 hours	4 doses in 24 hours
	Ibuprofen tablets 200mg	Mild to moderate pain	Over 12s only – 1 to 2 tablet every 4 hours	3 doses in 24 hours
	Ibuprofen 100mg/5ml OR 200mg/5ml oral suspension	Mild to moderate pain	Per manufacturer's instructions based on age.	Per manufacturer's instructions based on age.
	Ibuprofen 5% w/w gel	Mild to Moderate Pain	Children over 14- 1-4 cm 3 times per day	4 doses in 24 hours
	Travel Sickness tablets	Motion sickness	Per manufacturer's instructions based on age.	3 doses in 24 hours
	Teething Gel	Mild oral lesions	From 2 months - 16 years Massage a small amount of teething gel on to the sore area every 3 hours	No more than 6 applications in 24 hours
	Simple linctus (paediatric)	Dry or painful cough	6 - 12 years 5 - 10 ml	3 doses in 24 hours
	Antihistamine Syrup	Allergic reaction and hayfever	Per manufacturer's instructions based on age.	Per manufacturer's instructions
	Antihistamine Cream (Bite cream)	Allergic reaction and hayfever	Per manufacturer's instructions based on age.	Per manufacturer's instructions
	Olbas Oil	Relieve congestion	Per manufacturer's instructions based on age	Per manufacturer's instructions
	Vapour rub	Relieve congestion	Per manufacturer's instructions based on age	Per manufacturer's instructions
	Rescue Remedy	Anxiety	4 drops on tongue as needed	No Limit
	Arnica Cream	Relief of bruises	4 times per day	2 weeks maximum
	Throat Lozenges	Minor sore throats and dry coughs	Dissolve 1 lozenge slowly in the mouth every 2 to 3 hours	Per manufacturer's instructions
	Head Lice Treatment	Head Lice	Per manufacturer's instructions	As required
	Petroleum Jelly/Lip Balm	Sore and chapped lips	As necessary	No limit
	Aqueous cream	Dry skin and minor irritations	As necessary	No limit
	Antiseptic Cream	Minor cuts, grazes, burns, blisters and bites	As necessary	No limit

Authorisation

I authorise the House parenting team, or other delegated members of staff to administer the above medication to _____ if required.
(Child's full name)

Signed: _____

Name: _____

Relationship to child: _____

Date: _____

MEDICAL CONSENT FORM – APPLEFORD SCHOOL**EMERGENCY TREATMENT, MEDICAL EXAMINATION, MEDICAL TESTS, ADMINISTRATION OF MEDICINES,
INFORMATION FOR SCHOOL ACTIVITIES**

I/We consent/agree to the following:

1. In the event of parent(s) and/or guardian(s) being unavailable and the pupil being unable to give his/her own consent, the houseparents or designated staff member may sign consent for emergency hospital treatment that may be considered necessary.
2. Medical examinations and tests that may be required during term time, as advised by a person whose name is currently held on an appropriate professional register (eg Registered Medical Practitioner, Registered Nurse, Registered Dental Practitioner). Parents will be advised as soon as possible.
3. Administration of medicines by houseparents in accordance with either:
 - Advice from a person whose name is currently held on an appropriate professional register (eg Registered Medical Practitioner, Registered Nurse, Registered Dental Practitioner) and/or
 - Parental instructions (written) in the case of medicines that do not require a prescription (form attached)
4. All medication must come into school in its original packaging with prescription label on.
5. Any prescription medication, over-the-counter medication, vitamins and/or homeopathic remedies must be handed to either one of the houseparents or to Reception together with a covering letter signed by you detailing the dosage, the frequency and times.
6. It is imperative that you notify the school in writing if your child either starts medication or if the details concerning any existing medication change.
7. We also need your permission to administer First Aid to your child. By signing below your permission will be given unless you specifically write a note to the contrary below.
8. Parents are asked to arrange for their children to visit the dentist in the holidays (except in special circumstances) to avoid the necessity for treatment during the term. Emergency treatment will, of course, be arranged.
9. All relevant medical information / contacts have been made available to the houseparents.
10. Relevant health information will be shared with other school staff on a need to know basis only.

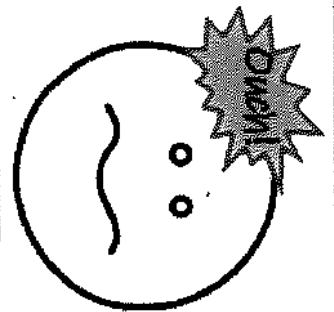
I/We have read and understood the above statements:

Pupil's Full Name House.....

Signature Date.....

Parent's Full Name.....

I bumped my head today...



Name:

Date of Birth:

Details of Incident

Date:

Time:

Location:

What happened:


First Aid Administered:

Full details provided in Accident / Incident Report

Childminder Signature: _____

Please keep an eye on me.
If you notice any of the symptoms below in your child, seek immediate medical assistance:

- Unconsciousness / difficulty staying awake or still
- being sleepy several hours after the injury
- Seizures or fits (body moving uncontrollably)
- Difficulty speaking or slurred speech
- Confusion or difficulty understanding what people say
- Amnesia or memory loss – not remembering what happened before or after the injury.
- Vision problems or double vision
- Balance problems / difficulty walking
- Difficulty reading or writing to usual ability
- Weakness or loss of power in part of the body such as an arm or leg.
- Clear fluid leaking from the nose or ears
- Bleeding from one or both ears
- Loss of hearing in one or both ears
- Bruising behind one or both ears
- A black eye (with no other damage around the eye)
- A lasting headache since the injury
- Vomiting
- Irritability or unusual behaviour
- Visible trauma (damage) to the head, such as an open, bleeding wound

 **NHS 24 on 111**

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Qualified First Aiders	Course	Expiry Date
Allen, Megan	Emergency First Aid in Schools	29 th September 2024
Allen, Tom	Emergency First Aid in Schools	05 January 2024
Allison, Mel	Paediatric First Aid Level 3	1 st September 2023
Bues, Sarah	Salisbury Diabetic Team Training (attended on 23 rd September 2019) First Aid Essentials September 2022 Administration of Meds September 2022	22 nd September 2023 September 2023 September 2023
Byford, Jill	Paediatric First Aid Level 3	3 rd January 2023
Clenaghan, Una	Paediatric First Aid Level 3	1 st September 2023
Douglas, Alex	Emergency First Aid in Schools	06 January 2024
English, Maia	Emergency First Aid in Schools	29 th September 2024
Filkins, Dean	Paediatric First Aid Essentials October 2022	October 2023
Filkins, Fiona	Salisbury Diabetic Team Training (attended on 23 rd September 2019)	
Ford, Nichola	Emergency First Aid in Schools	29 th September 2024
Goodings, Gwen	Paediatric First Aid (12 hr) July 2022	07 July 2025
Hall, Sarah	Paediatric First Aid Essentials October 2022	October 2023
Harris, Jan	Salisbury Diabetic Team Training (attended on 23 rd September 2019)	
Hill, Kate	Emergency First Aid in Schools	29 th September 2024
Langan, James	Paediatric First Aid Level 3	1 st September 2023
Medcraft, Sarah	Emergency First Aid in Schools	06 January 2024
Mills, Bethany	Paediatric First Aid	22 nd September 2023
Mills, Karen	Emergency First Aid in Schools Diabetes Team Training 15 July 2022 Administration of Medication October 2022	29 th September 2024 July 2023 October 2023
Moffitt, Julie	Emergency First Aid in Schools	05 January 2024
Morris, Suzanne	Paediatric First Aid September 2021	September 2024
Peirson, Gareth	Emergency First Aid in Schools	06 January 2024
Scott, Tamsin	Emergency First Aid in Schools	05 January 2024
Sherwood, Finn	Paediatric First Aid Level 3	1 st September 2023

Shipstone, Lloyd	Paediatric First Aid Level 3	3 rd January 2023
Sinclair, Sarah	First Aid Essentials September 2022 Mother of Diabetic Type 1	September 2023
Staniforth, Fiona	Level 3 award in First Aid at Work 23 July 2021	29 th September 2024
Stewart, Vanessa	Paediatric First Aid Level 3	3 rd January 2023
Taylor, Jemma	Level 3 Award in First Aid at Work (RQF)	6 th January 2024
Wedd, Coral	Emergency First Aid in Schools Paediatric Diabetes Training 22.06.2022	05 January 2024 June 2023
Williams, Barbara	Emergency First Aid in Schools	05 January 2024