

**APPLEFORD SCHOOL****MEDICAL POLICIES AND PROCEDURES****Inclusive of First Aid and Administration of Medication****This policy applies to the whole school, including boarding***The Policy is publicly available on the school website and upon request a copy (which can be made available in large print or other accessible format 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. This policy also takes into consideration the National Minimum Standard (NMS) for residential special schools (RSS).

We have a whole school approach to safeguarding, which is the golden thread that runs throughout every aspect of the school. All our school policies support our approach to safeguarding (child protection). Our fundamental priority is our children and their wellbeing; this is first and foremost

Monitoring and Review: This policy is subject to continuous monitoring, refinement and audit by David King (Headmaster) and Dudley Manning (Head of Pastoral and Boarding). 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:

Peter Gardner
ProprietorDavid King
Headmaster

September 2023

This policy was last reviewed and agreed by the Headmaster and Proprietor in September 2023 and will next be reviewed no later than September 2024 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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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.

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Appendices (held separately and available upon request)

1. Medical Questionnaire
2. Medical Action Plan
3. Self-Administration of medications and Consent
4. Self-Administration of medications (pupil form)
5. Emergency Procedures: Anaphylaxis
6. Regular Medication Permission Form
7. Body Map
8. Homely remedies consent form
9. Medical treatment consent form
10. Bump Note

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. The overall purpose of our Medical and First Aid procedures is to ensure effective arrangements are in place to care for children who are sick or injured (NMS for RSS s.12.7). Procedures are therefore implemented and reviewed to ensure that this remains the case.

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, 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. All medication to be kept in original packaging. 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 and the controlled drug record book must be completed and signed by the houseparent and counter signed by the member of staff witnessing the administration of the medication. 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 the school electronic data system, alongside their National Health Service 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 and Heads of Prep and Senior School
- Head 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.

3: 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.

4: Admissions to the central surgery: The medical room 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.

5: Medication

5:1: 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 the school's electronic data system, and a medical appointment sheet, which is kept in the respective house medical files. These sheets are then filed in the individual pupil's 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.

5:2: 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

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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.

5:3: Registration of regular medications taken by pupils: All medication brought onto the school premises for pupils must be in original packaging and 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

5:4: 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.

5:5: 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.

5:6: '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 emailed 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.

5:7 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 Medical Administrator. Medical staff audit the medications administered and log visits, and notify parents accordingly.

5:8 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. Your personal medication needs to be stored securely in the medical room in a clearly named box, or locked out of sight in your car. This excludes live-in staff that may have medication in their private accommodation. 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.

6: 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

7: 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.

7.1 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 Office Administrator 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 – Thursday: 08:30 – 16:45 and Friday 08.30 – 15.00

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 Co-Heads of Boarding on the duty mobile, so they can arrange cover for the member of staff absent if required.
2. In the event of a major incident the Headmaster and Co-Heads of Boarding are to be telephoned and asked to attend if at all possible.

7.2 Dealing with first aid emergencies:

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.

Foil Blankets for shock treatment (in first aid kits 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 Headmaster, who in turn delegates responsibility to The Head of Medical / Pastoral. The Head of Medical / Pastoral in consultation with the Operational Management 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 Operational Management 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

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- 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 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 instructions:

- Obtain Clean-Up box from Boarding House.
- 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.
- Cover the vomit area with paper towels.
- Spray the paper towels with an anti-bacterial spray
- Gather up the soiled paper towels and place in a yellow 'clinical waste' bag. Use a scraper and dustpan to remove visible material.
- Place disposable gloves and apron in clinical waste bag and tie up.
- Clinical waste bag to be taken to either trolley in compound or taken to bins at bottom of driveway.
- Finally wash your hands thoroughly using soap and water.

7.3 Policy on First Aid in School: All staff, both teaching and non-teaching are responsible for dealing with minor incidents requiring first aid. During the school day first aid is administered by one of our qualified first aiders (see Appendix 11). After school hours first aid is administered by qualified Boarding staff. If an accident occurs in the school grounds and first aid is required, then one of the staff on duty can assist if they are qualified, or if they are not qualified, they should come to surgery or reception and request the assistance of the designated first aider. The First Aiders are authorised to apply dressings and compresses and take reasonable steps to facilitate symptom relief. Fully stocked First Aid kits are available in the surgery, the Boarding House and elsewhere in the school. Any action taken must be recorded in the Treatment Book **and documented on the school's electronic data system. The treatment book** is kept in the surgery, and parents **and houseparents** should be informed via email or by telephone ~~or in writing~~ of any accidents which occur. Any first aid or medical assistance given in the Boarding house must be reported. All accidents of a serious nature must be recorded on an Accident Report Form, which are available in the surgery. If an injury or illness involves spillage of body fluids gloves should be worn.

The arrangements for first-aid provision will be adequate to cope with all foreseeable incidents. The number of designated first-aiders will not, at any time, be less than the number required by law. This is determined by risk assessment (Local Authority guidance). Designated staff will be given such training in first-aid techniques as is required to give them an appropriate level of competence. The Medical Administrator is responsible for ensuring that a sufficient back-up stock is held on site. Notices will be displayed in prominent locations throughout the establishment identifying how to summon first aid in an emergency, who the first aiders are and their contact and location details. All first aid signs and containers must be identified by a white cross on a green background. A written record will be kept of all first-aid administered either on the school premises or as a part of a school related activity.

Administering first aid

- First aid should only be administered by a trained first aider. Copies of first aid certificates should be systematically filed.
- For minor injuries which are within the first aider's capability, appropriate treatment should be provided. Otherwise the injured person should be made comfortable until the emergency services arrive.
- Ensure that contaminated waste is safely disposed of and any blood or body fluid spillages are safely removed.
- Record any first aid treatment in the Treatment Book/ Boarding Treatment books and on the electronic data system.

The First Aiders' procedure for dealing with sick or injured pupils:

- Ascertain by inspection and discussion with child or staff member the nature of the child's injury or illness.
- Comfort or advise as necessary. This may be sufficient and child can return to class or break. Inform staff member of nature of any concerns if appropriate. Treat injury or illness if required. Clean wound with antiseptic wipe or running water and cover with a plaster if still bleeding and no allergy exists.
- Record action taken in the Treatment Book and the electronic data system. If child is then well enough he/she will return to class.
- If problem persists or there are doubts as to the seriousness of any injury then parent(s) will be telephoned and asked what they would like to do. If he/she wishes to collect their child appropriate arrangements are made.
- If a severe illness or injury is suspected then the most appropriate member of staff will take the pupil to hospital or the emergency services will be called and administrative staff will contact the parents to inform them. No pupil will travel in an ambulance unaccompanied.
- If any issue arises during treatment or discussion with the pupil that the Medical Administrator feels should be taken further, she/he will telephone or speak to the parents and/or the Designated Safeguarding Lead or most appropriate member of staff. N.B. The First Aiders will have up to date Emergency First Aid training and some will have a full and current First Aid at Work Certificate. They are not, however, medically qualified and hence cannot give medical advice.

Hygiene/Infection control/HIV Protection: Staff should take precautions to avoid infection and must follow basic hygiene procedures. Staff should have access to single-use disposable gloves and hand-washing facilities, which should be used when dealing with any blood or other bodily fluids. Staff should take care when dealing with such fluids, and when disposing of dressings or equipment. Make sure any waste (wipes, pads, paper towels etc) are placed in a disposable bag and fastened securely. Any children's clothes should be placed in a plastic bag and fastened securely ready to take home.

Source: 'Guidance on First Aid for Schools: A Good Practice Guide' (adapted).

APPLEFORD SCHOOL

7.4 FIRST AID - LOCATION OF BOXES



OAK HOUSE:

| | | |
|------------------------------|---|---|
| Reception - Office | - | Large kit and eye wash |
| Reception - Office | - | Small travel bag |
| Reception (behind main door) | - | Large kit and small bum bag |
| Kitchen | - | Small kit catering blue Burns cool box 3 x eyewash stations x 500ml |

PREP SCHOOL:

| | |
|---|---------------------------|
| - | Medium kit (classroom E5) |
|---|---------------------------|

ELM HOUSE:

| | | |
|--------------------|---|------------------------|
| Elm Boarding House | - | Medium kit (surgery) |
| Elm Food Tec | - | Medium Kit + Burns kit |
| E6 | - | 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) |
|---|-----------------------|

BEECHES:

| | | |
|------------------------|-----------------------|-------------------------------------|
| - | Medium kit (corridor) | |
| Food Tech | - | Small kit catering blue + burns kit |
| Beeches Boarding House | - | Medium kit (surgery) |

PE CONTAINER:

| | |
|---|------------|
| - | Medium kit |
|---|------------|

Maddington House :

| | |
|---|---|
| - | Medium kit (surgery) Small kit (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) |

8: Reporting Accidents: Purpose: 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:

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- Transport pupil to the central surgery with a second member of staff
- Transport pupil to Salisbury District Hospital's Accident and Emergency Department (or nearest hospital) with a second member of staff
- 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 Headmaster to consent to emergency treatment. The Headmaster 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, 1995) 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.

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.

9. 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:

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- 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.

10: 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.

11: 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.

| Qualified First Aiders - Jan 2024 | Course | Expiry Date |
|--|---|--|
| Ball, Mark * | * 16 hr Outdoor First Aid March 2023 | March 2026 |
| Bues, Sarah * | Salisbury Diabetic Team Training (23 Sept 2019) * First Aid at Work – Sept 2023 Administration of Meds September 2022 online | 22 nd September 2023 Sept 2025 September 2023 |
| Byford, Jill * | * First Aid at Work – Sept 2023 | Sept 2025 |
| Cleaver, Amy * | *Emergency First Aid at Work - Dec 2022 | Dec 2025 |
| Clenaghan, Una * | * First Aid at Work – Sept 2023 | Sept 2025 |
| Doris, Kelly | Administration of Medication Nov 23 online | Nov 2024 |
| Douglas, Alex * | *Emergency First Aid in Schools with JT - Jan 2023 | 06 January 2026 |
| English, Maia * | *Emergency First Aid in Schools with JT – Sept 2021 Administration of Medication Sept 2022 online | 29 th September 2024 Sept 2023 |
| Filkins, Dean * | * First Aid at Work – Sept 2023 | Sept 2025 |
| Ford, Nichola * | * First Aid at Work with JT – Sept 2021 | 29 th September 2024 |
| Goodings, Gwen * | * Paediatric First Aid (12 hr) July 2022 | 07 July 2025 |
| Hall, Sarah * | * Paediatric First Aid (2 day) Feb 2021 First Aid Essentials Oct 2022 online | Feb 2024 Oct 2023 |
| Hill, Kate * | *Emergency First Aid in Schools with JT – Sept 2021 | 29 th September 2024 |
| Wade, Ruth * | *Emergency First Aid at Work for Schools March 2022 | 17 March 2025 |
| McKellar, Helen * | * Emergency First Aid in Schools with JT - Jan 2023 | 06 January 2026 |
| Mills, Bethany * | * First Aid at Work – Sept 2023 | Sept 2025 |
| Mitchell, Edward * | * First Aid at Work – Sept 2023 First Aid Essentials Feb 2023 online Administration of Medication Feb 2023 online Understanding Diabetes Feb 2023 online | Sept 2025 Feb 2024 Feb 2024 Feb 2024 |
| Moffitt, Julie * | * First Aid at Work with JT – Jan 2023 | January 2026 |
| Morris, Suzanne * | * Full Paediatric First Aid September 2021 Administration of Medication Jan 2023 online | September 2024 Jan 2024 |
| Peirson, Gareth * | * Pitch side First Aid Nov 2022 Automated External Defibrillator training Adrenaline Auto Injector training | November 2025 November 2025 November 2025 |
| Scott, Tamsin * | * First Aid at Work with JT – Jan 2023 | January 2026 |
| Sherwood, Finn * | * First Aid at Work – Sept 2023 | Sept 2025 |
| Sinclair, Sarah | * First Aid at Work – Sept 2023 Mother of Diabetic Type 1 | Sept 2025 |
| Stewart, Vanessa * | * First Aid at Work with JT - Jan 2023 | January 2026 |
| Wedd, Coral * | * First Aid at Work with JT - Jan 2023 Paediatric Diabetes Training 22.06.2022 Administering Medication April 2022 online | January 2026 June 2023 April 2023 |
| Williams, Barbara * | * First Aid at Work with JT – Jan 2023 | January 2026 |
| Wright, Selena * | * First Aid at Work – Sept 2023 | Sept 2025 |

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