

WAKEFIELD GIRLS' HIGH SCHOOL

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V1.04	Sept 2024	Amended SC, WGHS Nurse (to remove reference to Cliff Building and to put in the new location of the Nurses' room)

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WGHS First Aid and Medicine and Medical Conditions Procedures

1. Introduction

This document details local procedures at WGHS (Junior Section and Senior Section). It should be read in conjunction with the:

- WGSF First Aid Policy
- WGSF Health and Safety Policy
- WGSF Safeguarding and Child Protection Policy

2. Personnel

WGHS School Nurse: Ext 282. 01024 372490. Mobile 07825 806910 School Medical Officer: Dr D R Fyfe

At WGHS, appropriately trained staff (Emergency First Aid at Work qualification) act under the overall supervision of the WGHS School Nurse. The School Nurse is based on the ground floor in the Science Technology Centre building Senior School. Anyone requiring first aid can see the School Nurse, first aid trained office staff or a first aid trained member of staff in each department (Senior Section and Junior Section).

3. Equipment

First Aid boxes are placed strategically around WGHS and on school minibuses. These should not be removed. The contents are checked annually (or more frequently if staff report that supplies are depleted and need replenishing) by the School Nurse. If first aid supplies are seen to be running low or expiry dates reached, staff should inform the School Nurse so that they can be replenished. First Aid bags and pouches are also available for school trips; a number of these are stored within each academic department and in the school office, and there are spares, if required, which are kept in the School Nurse's office. Please see **Appendix 1** for their locations.

4. First Aiders

Lists of teaching and support staff with Emergency First Aid at Work qualification are displayed on staff notice boards in the Staff Room, WGHS, and the Main Office, WGHS along with details kept by the School Nurse in her office. Anyone who is interested in undertaking training should contact the School Nurse.

Emergency First Aid equipment such as spare Adrenaline Auto Injectors, Salbutamol Inhalers, Defibrillators and Catastrophic Bleed Kits are located around school. See **Appendix 2**

5. Calling for an ambulance

Where an injury or illness is an emergency, an ambulance must be called on 999 from a mobile or 9999 from a school landline phone.

The decision to call for an ambulance is the responsibility of the first aider attending the casualty. The call may be delegated by them to another member of staff assisting. Time must not be wasted seeking the authority of the School Nurse, the Head, or other members of the senior team, though they should be informed as soon as is feasible. The person making the call

must give details of the casualty, the injury and the situation in school. Members of staff should be stationed in strategic points in order to direct the ambulance to the correct location.

Parents or those with parental responsibility should be informed as soon as possible and requested to meet the child, and accompanying staff member, at the allocated hospital. Staff should endeavour to protect the privacy and dignity of the casualty by redirecting pupils away from the scene.

6. Administering medicine to children and young adults

Any pupils requiring long-term prescribed medication will be referred to the School Nurse to discuss how this will be administered, with the involvement of a parent and specialist nurse if necessary. Any long-term treatment will be supported by a Care Plan.

The School Nurse, a qualified first aider or those staff trained in administering medicines may give short term prescribed medication, for instance, antibiotics, ear/eye drops etc., if a covering letter is provided by parents, and the medication is in date, in its original container, and clearly marked with name, dosage and frequency.

Any prescribed, controlled medication (e.g. Ritalin, Midazolam or Diazepam) must be stored in a locked cupboard in the School Nurse's office if it needs to be administered at school, which will be documented appropriately.

Pupils should take any medication under adult supervision.

Parents are encouraged to inform school of a pupil's long term medication regime regardless of whether that medicine is administered at school or not.

Non-prescribed medicine will only be given to children in Years 7-11 if parents have completed an annual parental consent form indicating that they give permission for their child to receive simple analgesia (such as Paracetamol) which is recorded on SIMS. The School Nurse will keep a log including date, time, reason for attendance, and any first aid or medication administered.

Young adults in Years 12 and 13 are deemed old enough to give consent for simple analgesia.

Spare labelled Adrenaline Auto Injectors (AAIs) such as Epipen or Jext for individual named pupils are stored in an easily accessible area in both main Junior and Senior School Office as are Asthma Reliever inhalers, simple analgesia and antihistamines.

Staff that are willing, are trained to administer AAIs. in case anaphylaxis occurs to a pupil who has known allergies with their prescribed adrenaline. Teaching staff are to familiarise themselves with rescue relieving Inhalers and medication for Diabetes and Epilepsy, should the need arise for instance, on day trips, residentials and overseas expeditions. Staff should highlight any need for further support or training to increase their competence.

Pupils who become ill or may be infectious during the school day are kept in isolation in the medical room or a safe place until they are collected by a family member, in line with the <u>Health</u> <u>Protection Agency in Schools Infection Control Guidance</u>.

Parents will be contacted by the School Nurse or a member of staff if a child is unwell and needs to go home. The School Office must be notified of any pupil leaving school. If a Sixth Former is ill but able to get home safely, they must phone the school office on their arrival. If they are too unwell to travel alone, a family member must collect them or arrange a taxi.

See Appendix 3 for the 'Head Bump Procedure'.

7. Medicines

All medication is stored safely in the School Nurse's office or cupboards in the main Junior Section or Senior Section office. Any medication stored in the fridge is clearly labelled.

The School Nurse is responsible for ensuring medicine is handed back at the end of each session or term to the pupil, if appropriate.

The School Nurse checks that any medication held to administer on an 'as required' basis, or on a regular basis, is in date, and will return any out of date medication back to the parent.

If the administration of medication requires medical knowledge for responsible staff, for instance, on trips and residentials, individual training will be provided by the School Nurse.

No children should self-administer, except in some circumstances, for example when Insulin is essential or Antihistamines are required quickly to prevent an allergic reaction. Where children are capable of understanding when they need medication, for example with Asthma, they should be encouraged to use their inhaler as instructed by their GP but to inform an adult that they have used it. The School Nurse is available to offer guidance and support as required. Inhalers are held by the pupil in Senior School and are taken with them if they leave the school premises, for example to the sports field and on trips out of school. As per the document 'Guidance on the use of emergency Salbutamol inhalers in schools: 2015', WGSF keeps spare Salbutamol inhalers for use in situations where pupils' inhalers are not available.

Junior Section children will keep their inhaler on their teachers desk or in a location that they all know of.

Adrenaline Auto Injectors, e.g. Epipens or Jext (at least one), and/or antihistamines prescribed for pupils with allergies are carried by pupils in the Senior Section at all times, and in known visible areas for Junior Section pupils.

See the <u>WGSF First Aid Policy</u> for more detailed information.

8. Children who have long term medical conditions and who may require ongoing medication

A Care Plan for the child is drawn up with the parent, and/or specialist nurse; outlining the key person's role and what information must be shared with other staff whilst at school or on trips. The Care Plan should include measures to be taken in an emergency and is reviewed by the School Nurse annually or more frequently if necessary. A letter is sent from the School Office each year to ask if there are any medical changes, however there is also an expectation that parents will inform the School Nurse of any changes

The offices send out annual notes on Firefly or by email to parents with children who have any health conditions. They are requested to state if there have been changes or not. If no change, the School Nurse adds this to the medical note on SIMS. If there are changes then the School Nurse sends out a new Care Plan for the parents to write and return.

9. Record keeping

The School Nurse and staff in the School Office will keep records of all First Aid administered for

the preceding five years on a Treatment Sheet and EVOLVE Accident Book online following the <u>WGSF Data Retention and Storage Policy</u>. Significant incidents such as safeguarding, wellbeing or pastoral concerns, will be recorded on CPOMS.

10. Guidelines for referring a pupil to the School Nurse or onto the Designated Safeguarding Lead (DSL)

The School Nurse should be called to the location of an unwell pupil if it is considered unsafe for them to walk to the school office or School Nurse's room, e.g. pupils with allergies or a pupil who has fainted etc.

The School Nurse is available from 08:00-16:00. After 16:00, if there are medical or First Aid issues with pupils still on site, please refer cases to a First Aid trained member of staff or office staff if available.

Pupils may see the nurse or office staff at break or lunch-time, or during a lesson if the teacher contacts the School Nurse to arrange. Routine errands such as dropping off tablets, instilling eye drops, minor cuts, etc. can be dealt with at break and lunchtimes. If a pupil is visiting the School Nurse or the office frequently, or without obvious reason, their Form Teacher, Head of Year and the Deputy Head Pastoral will be consulted on an appropriate course of action and a parent notified. If staff have severe concerns about a pupil's welfare, immediate action will be taken, following the Safeguarding and Child Protection Policy, such as an assessment, recording and feedback to the DSL. Monitoring may continue, possibly including pastoral support, or a referral will be made to the appropriate agency if concerns escalate.

The School Nurse is bound by a Code of Professional Conduct and is not at liberty to disclose confidential matters to teaching staff regarding a pupil unless the pupil and parents have given permission to do so or where there is deemed to be a risk to the pupil's safety and/or wellbeing. They will liaise confidentially with the Designated Safeguarding Lead. Wherever possible, they will work closely with teaching staff in the best interests of the pupil, but there may be issues which are not disclosed.

The School Nurse is here for advice, staff First Aid, support or illness which may present during the course of the school day, but not in place of the family GP or hospital doctor.

11. Foundation Approach to promoting Positive Mental Health & Wellbeing

We take a whole school approach to promoting positive mental health that aims to help pupils become more resilient, be happy and successful and prevent problems before they arise. This encompasses seven aspects:

- 1. Creating an ethos, policies and behaviours that everyone understands which support mental health and resilience.
- 2. Helping pupils to develop social relationships, support each other and seek help when they need to.
- 3. Helping pupils to be resilient learners.
- 4. Teaching pupils social and emotional skills and an awareness of mental health.
- 5. Early identification of pupils who may have mental health needs and planning support to meet their needs, including working with specialist services as required.
- 6. Effectively working with parents and carers.
- 7. Supporting and training staff to develop their skills and resilience.

We also recognise the role that stigma can play in preventing understanding and awareness of mental health issues, and we aim to create an open and positive culture that encourages discussion and understanding of mental health issues. We aim to be a 'talking school' with an 'Open Door Policy'.

We believe that all staff have a responsibility to promote positive mental health, and to understand protective and risk factors for mental health. Some children will require additional help and all staff should have the skills to look out for any early warning signs of mental health problems and ensure that pupils who have needs get early intervention and support. A discussion or referral to School counsellor can be made if wanted and pupils can directly refer themselves as well.

All staff understand possible risk factors that might make some children more likely to experience problems, such a physical long-term illness, having a parent who has a mental health problem, death and loss, including loss of friendships, family breakdown and bullying. They also understand the factors that protect children from adversity, such as self-esteem, communication and problem-solving skills, a sense of worth and belonging, and emotional literacy.

We recognise that many behaviours and emotional problems can be supported within the school environment, with the School Counsellor, or with advice from external professionals. Some children will need more intensive support at times, and there are a range of mental health professionals and organisations that provide support to pupils with mental health needs and their families.

Any member of staff concerned about a pupil will take this seriously and discuss with the Head of Year, Head of Section or the Designated Safeguarding Team. These signs might include:

- non-verbal behaviour
- isolation from friends and family and becoming socially withdrawn
- changes in activity or mood or eating/sleeping habits
- lowering academic achievement
- talking or joking about self-harm or suicide
- expressing feelings of failure
- uselessness or loss of hope
- an increase in lateness or absenteeism
- not wanting to do PE or get changed for PE
- drug or alcohol misuse
- physical signs of harm that are repeated or appear non-accidental
- wearing long sleeves in hot weather
- repeated physical pain or nausea with no evident cause.

Staff are aware that mental health needs such as anxiety might appear as noncompliant, disruptive or aggressive behaviour which could include problems with attention or hyperactivity. This may be related to home problems, difficulties with learning, peer relationships or development. If there is a concern that a pupil is in danger of immediate harm then the school's Safeguarding and Child Protection procedures must be followed and staff should speak to the Designated Safeguarding Lead (or Deputies if the Lead is not available).

More information around support can be found in **Appendix 4**.

Appendix 1 - First Aid Kits Locations

Wentworth:

School office

Geography

Maths

Staff Room

History/Classics/RE

Library

Modern Languages room Caretaker's office Peppers Kitchen

PE office

Multi Gym

Exams office

Forrest building:

Drama

DT office

DT workshops 1 & 2 & 3 Art (top floor)

Willows:

Music office

Food tech Kitchens

Sotterley /6th Form:

Office

Kitchen

Science & Technology Centre:

School Nurses office

Science 1

Chemistry prep room

Chemistry labs 1, 2 & 3 Physics prep room Physics labs 1, 2 & 3 Biology prep room Biology labs 1, 2 & 3 Staff room/kitchen & Staff office Computer Science

Junior School

First Aid room

Games Field:

First Aid Rooms; Kitchens; Function Areas; Ground Staff

Mini Buses

WGHS EMERGENCY TREATMENT EQUIPMENT

Defibrillators	Emergency EpiPens - anaphylaxis (severe allergy)
 Pre Prep School Entrance Foyer WGHS - Hartley Pavilion Entrance WGHS - Seniors- Main Building- outside Head's office WGHS - Forrest Building- Ground Floor DT corridor WGHS Games Field - Sports Pavilion entrance (Blenheim Rd) 	 Pre Prep School Office WGHS Junior Section Office WGHS Senior Section Office WGHS STC - Science staff office WGHS Nurse's Office (STC) - in labelled cupboard WGHS Games Field - Sports Pavilion - office
Salbutamol Emergency Inhalers -	Catastrophic Bleed Kits
Asthma With the second	 Pre Prep School Office WGHS - Junior Section office WGHS - Senior Section office

Appendix 3 - Head Bump Procedure

- 1. Ensure all pupils who have had a head bump have been checked by a First Aider
- 2. First Aider to record all head bumps
- 3. The Office to notify the child's family member of the head bump via telephone
- 4. The Office / First Aider to complete the 'head bump' slip and put in the child's bag ready to go home
- 5. First Aider to monitor the child for head injury and concussion symptoms, following NHS advice: <u>Head injury and concussion NHS</u>
- 6. If deemed necessary, the Office should contact the parent to ask them to collect their child from school early and take them to A&E.

Appendix 4 - Support for Mental Health Needs

Where to get information and support For support on specific mental health needs

- Anxiety UK <u>www.anxietyuk.org.uk</u>
- OCD UK <u>www.ocduk.org</u>
- Depression Alliance <u>www.depressoinalliance.org</u>
- Eating Disorders <u>www.b-eat.co.uk</u> and <u>www.inourhands.com</u>
- National Self-Harm Network <u>www.nshn.co.uk</u>
- Self-Harm <u>www.selfharm.co.uk</u>
- Suicidal thoughts Prevention of young suicide UK PAPYRUS: <u>www.papyrus-uk.org</u>

For general information and support

- <u>www.youngminds.org.uk</u> champions young people's mental health and wellbeing
- <u>www.mind.org.uk</u> advice and support on mental health problems
- <u>www.minded.org.uk</u> (e-learning)
- <u>www.time-to-change.org.uk</u> tackles the stigma of mental health
- <u>www.rethink.org</u> challenges attitudes towards mental health
- Mental health and behaviour in schools GOV.UK