

Wakefield Grammar Pre-Preparatory School

Document Reference	First Aid, Medicine and Medical Information (including EYFS) Policy
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Author/Lead Job Title	Sally Christie School Nurse
Consultation	Claire Gratrick, QEGS School Nurse
Checker Person Name Quality Assurance	Penny Plumpton, Chair of WGPPS GEC
Name of Approver / Committee	WGPPS GEC
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VALIDITY – Policies should be accessed via FireFly to ensure the current version is used.

CHANGE RECORD - REVIEW PERIOD ANNUALLY

Version	Date	Change details
V1.00	Sept 2023 March 2024	Created, Sally Christie, School Nurse. Minor procedural updates, Sally Christie, Emma Gill
V1.01	April 2024	Reviewed and updated, Sally Christie School Nurse

To be published on the following:

Staff shared	Х	School website	Х

WGPPS First Aid, Medicine and Medical Information Procedure

1. Introduction

At WGPPS appropriately trained staff; Emergency First Aid at Work qualification and/or Paediatric First Aid certificate act under the overall supervision of the WGHS School Nurse who is based on the ground floor in the Cliff building, WGHS. Anyone requiring first aid can see the School Nurse, first aid trained office staff or a first aid trained member of staff in each classroom.

Linked Polices

This policy should be read in conjunction with the WGSF First Aid Policy, the WGSF Health and Safety Policy and WGSF Safeguarding and Child Protection Policy.

2. Personnel

School Nurse: Ext 282. Mobile 07825 806910 / 07541668835

School Medical Officer: Dr D R Fyfe

Head Teacher; Mrs Emma Gill: 01924231618 ext 266

School Office: 01924 231618

3. Appointment of First Aiders

Lists of teaching and support staff with First Aid certification are displayed in the medical room, the staff room and the Head's office. Please see appendix 1 of this document for details.

Anyone who is interested in undertaking training should contact School Nurse or Mrs Gill, Head of WGSPP.

4. Equipment

First Aid boxes are placed strategically around WGPPS, in the foyer, FS1, First Aid room and on Foundation minibuses. These should <u>not</u> be removed but replaced if used. The contents are checked by the School Nurse but if first aid supplies are seen to be running low or expiry dates reached, the School Nurse must be informed so that they can be replenished.

First Aid bags and pouches are also available for school trips; a number of these are stored in drawers in the First Aid room. Spares, if required, are kept in the School Nurse's office. A Defibrillator is located in the Pre Prep foyer.

5. Calling for an ambulance

Where an injury or illness is an emergency, an ambulance must be called: 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 assisting staff:

- 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 next of kin 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 other pupils away from the scene.
- As soon as is feasible an Accident Form should be completed and shared with the WGSF Estates Compliance, Health & Safety Manager.
- Communication with the parent or family member should be continued and CPOMS documented as appropriate.
- On occasions a child may need medical intervention without the need for an ambulance. In this case, every attempt will be made to reach a next of kin to collect and obtain help, however if a staff member takes the child to hospital (non urgently), a second staff member should accompany them.

6. Administering medicine to children in Early Years Education

Pupils should take any medication under adult supervision and only with prior consent of a parent. All details will be recorded and a family member notified.

Long Term Prescribed Medication

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

Long term prescribed medication and / or regular doses, will be administered by the school nurse.

Parents/carers are encouraged to inform school of a child's long term medical regime regardless of whether that medicine is administered in school or not.

Short Term Prescribed Medication

The School Nurse or a qualified first aider may give short term prescribed medication (for instance, antibiotics, ear/eye drops etc) if:

- communication via letter or email has been received by the parent;
- a medical form has been completed and signed by the parent;
- the medication is in date:
- the medication is in its original container clearly marked with name, dosage and frequency.

The First Aider should ensure that a record is kept of the medication administered, including the date and time and their signature. This should then be countersigned / initialled by another member of staff in school.

Storage of Medication

Any long term prescribed medication must be stored in a locked cupboard in the School Nurse's office and this will be documented appropriately.

Any short term prescribed medication is either stored in the Pre-Prep medical room (in a locked fridge) or in the school Office high up so children cannot access it.

The following are kept in colour coded bags relating to the year group on pegs outside of the office and medical room so that teachers etc can access them:

- Clearly labelled Adrenaline Auto Injectors such as Epipen or Jext for individual children who are known to be at risk of Anaphylaxis
- Asthma reliever inhalers, simple analgesia and antihistamines

A spare inhaler and paediatric Adrenaline Auto Injectors are kept in a visible bag or box in the main Pre-Prep Office.

7. Children with Allergies

Children with known allergies will be requested to wear a Red wrist band for ease of recognition.

Staff are trained to administer Auto Adrenaline Injectors with the pupil's prescribed adrenaline in case anaphylaxis occurs to those children who have known allergies.

Teaching staff are to familiarise themselves with rescue relieving Inhalers and medication for Diabetes and Epilepsy, should the need arise.

Staff should highlight any need for further support to increase their competence.

Teachers, support staff and catering staff are made aware of which pupils, if any, are at risk of severe allergy.

8. Accidents and Illness

Children who become ill or may be infectious during the school day will be kept in the medical room or a safe place, under adult supervision, until they are collected by a family member following the Health Protection Agency in Schools Infection Control Guidance.

If a child is unwell and vomits, staff should wear gloves, reassure and tidy them in a gentle manner then once collected by a parent, the cleaning staff will be called to clean the room.

Parents or next of kin will be notified of the requested number of days to be taken off school depending upon current guidelines. Currently 48 hours if no further sickness or diarrhoea.

Minor cuts and grazes will be managed by on site staff however support or second opinion may be required.

Parents will be contacted if a child is generally unwell and needs to go home by a member of the office staff or teacher in attendance. The School Nurse can be called upon to check a child for instance if a rash occurs and any necessary action is taken.

Head Bumps

Any bump to the head will be recorded, family members informed and a head bump slip will go home with the child.

All children who sustain a bump to the head will be monitored for head Injury. If deemed necessary their family member will be asked to collect their child from school early and take appropriate action as advised by WGPPS staff, such as symptoms to watch for and if A&E should be attended Head injury and concussion - NHS

A Head Bump Care letter is also available on FireFly for parents which gives further information and specific advice. This is referenced on the head bump slip which goes home with the child.

See Appendix 2.

9. Medicines

- All medication is stored safely in the First Aid room fridge or Pre Prep Office.
- The School Nurse, with the support of office staff, 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 / carer.
- If the administration of medication requires medical knowledge for responsible staff, for instance, on trips, individual training will be provided by the School Nurse if requested.
- No children should self-administer, in Pre-Prep. However, where children are capable of understanding when they need medication, for example with Asthma, they should be encouraged to speak to an adult, and use their inhaler as instructed by their GP with the assistance of the classroom TA or teacher.
- Salbutamol reliever inhalers are stored in the child's class medical 'grab bag'. The School Nurse is available to offer guidance and support as required.
- Inhalers are held in the child's class medical 'grab bag' which are taken out on trips out of school.
- As per the document 'Guidance on the use of emergency Salbutamol inhalers in schools: 2015', WGHS keep spare Salbutamol inhalers for use in situations where pupils' inhalers are not available.
- Epipens (at least one) and/or antihistamines prescribed for pupils with allergies, are stored
 in the class medical 'grab bag' classroom or office and must travel with the pupil if they
 leave the premises.

See the WGSF First Aid Policy for more detailed information.

10. Long Term Medical Conditions

Children who have long term medical conditions and who may require ongoing medication will have a Health Care Plan drawn up with the parent outlining the key person's role and what

information must be shared with other staff whilst at school or on trips. The Health Care Plan should include measures to be taken in an emergency and is reviewed by the School Nurse and Pre-Prep office staff annually or more frequently if necessary. There is 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 addes 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.

11. Record keeping

The School Nurse and staff in the office will keep records of all first aid administered for the preceding five years on Excel Treatment Sheet and EVOLVE Accident Book online. Significant events such as safeguarding, wellbeing or pastoral concerns will be recorded on CPOMS: Child Protection Online Management System.

12. Guidelines for referring a pupil to School Nurse/School Nurse or onto the DSL

Each member of staff is responsible for raising any Safeguarding concerns directly to the Designated Safeguarding Lead, Mrs Emma Gill, or Deputy Designated Safeguarding Leads, Mrs Jenny Taylor and Mrs Lynne Butler.

The School Nurse/Maton is available from 08:00-16:00. After 16:00, if there are medical or first aid issues with pupils still on site after this time please refer cases to a first aid trained member of staff.

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 (or staff member) unless the parents have given permission for her to do so, or where there is deemed to be a risk to the pupil's safety and/or well-being.

The School Nurse will liaise confidentially with the Designated Safeguarding Lead and Deputy Head. Wherever possible, she 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 pupil's family GP or hospital doctor.

Appendix 1 - List of WGSPP First Aiders

Full Paediatric First Aid Training 31st August 2023

Name of staff	1st day training completed	PFA Course completed 31st Aug 2023	Exp.Date
Alison Dickinson	yes	yes	31st Aug 2026
Kelly Butterworth	yes	yes	31st Aug 2026
Jo Birkitt	yes	yes	31st Aug 2026
Lynne Butler	yes	yes	31st Aug 2026
Jane Smith	yes	yes	31st Aug 2026
Lynsey Miller	yes	yes	31st Aug 2026
Christine Martin	yes	yes	31st Aug 2026
Lindsey Browning	yes	yes	31st Aug 2026
Charlotte Rigby	yes	yes	31st Aug 2026
Elizabeth Ramsden	yes	yes	31st Aug 2026
Emma Gill	yes	yes	31st Aug 2026
Rachel Mayes	yes	yes	31st Aug 2026
Karen Wood	yes	yes	31st Aug 2026
Karen Barker	yes	yes	31st Aug 2026
Lisa Condilac	yes	yes	31st Aug 2026
Liz O'Malley	yes	yes	31st Aug 2026
Angie Crowther	yes	yes	31st Aug 2026
Michelle Robinson	yes	yes	31st Aug 2026
Jo Horsfield	yes	yes	31st Aug 2026
Hollie Smith	yes	yes	31st Aug 2026
Jenny Taylor	yes	yes	31st Aug 2026
Sarah Brooke	yes	yes	31st Aug 2026
Isabelle Butler	yes	yes	31st Aug 2026
Vicki Milne	yes	14th October 2022	14th Oct 2025
Angela Harrup	yes	14th October 2022	14th Oct 2025
James Ward	yes	June 2023	June 2026

Emergency First Aid at Work in Schools Training 31st August 2023

Name of staff	EFAaWiS Course completed 31st Aug 2023	Exp date
Louise Wale	yes	31st Aug 2026
Kirsty Thomas	yes	31st Aug 2026
Nicola Waudby	yes	31st Aug 2026
Jenny Walton	yes	31st Aug 2026
Rebecca Norwell	yes	31st Aug 2026
Laura Spencer	yes	31st Aug 2026
Angela Harrup	yes	31st Aug 2026
Lisa Evans	yes	31st Aug 2026
Vicky Milne	yes	31st Aug 2026
Danni Anderton	yes	31st Aug 2026
Sam White	yes	31st Aug 2026

Appendix 2 - Head Bump Procedure

- 1. Ensure all children 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.