



QUEEN ELIZABETH GRAMMAR SCHOOL CENTENARY HOUSE, including EYFS

First Aid and Medical Procedures

This document details local procedures at QEGS Centenary House. It should be read in conjunction with the WGSF First Aid Policy, The Health and Safety Policy and Child Protection Policies.

Arrangements for First Aid at Centenary House

Personnel

Centenary House Admin staff: School Office staff – ext 601/2

QEGS School Nurse: - ext 313.

School Medical Officer: School Dr

At Centenary House appropriately trained staff (Paediatric First Aid certificate and/or Emergency First Aid certificate) act under the overall supervision of the QEGS School Nurse. The School Nurse is based at the Health Centre at QEGS Senior School and so acts in an advisory capacity.

Appointment of First Aiders

All teaching and support staff at Centenary House have first aid training. For EYFS, there will always be at least one member of staff who has a paediatric first aid (PFA) qualification on the premises and available at all times and when children are present. Any newly appointed staff will attend first aid training at the earliest opportunity. Newly qualified staff working in the EYFS classes, will have PFA certificate in order to be included in the required staff ratios at level 2 or level 3.

Anyone requiring first aid should be assessed by their class teacher or teaching assistant and if necessary taken to the office. If additional assistance is required, the School Nurse can be contacted to attend. Parents/guardians will be alerted to any first aid administered, depending on the nature of the injury, on the same day or as soon as reasonably practicable after. This will be either by a copy of the playground accident log form sent home at the end of the day; or verbally; and if a head injury, parents will sign the 'head bump' form on collecting their son.

First Aid Equipment

First Aid boxes are positioned strategically around the School, including playground first aid bags. They are available at all times with appropriate content for use with EYFS children. A teaching assistant is allocated to regularly check the contents of the boxes and bags.

If first aid supplies are seen to be running low or expiry dates reached, staff inform the office staff so that they can be replenished. First aid bags are also available for school trips; these can be taken from the office as required.

Emergency spare ventolin inhaler and emergency spare epipen is kept in the medical room. Staff are given updated training annually, by the School Nurse.

A defibrillator (AED) is positioned in CH Office. The School Nurse is responsible for checking and maintaining the device and its consumables. Training is updated annually by the School Nurse.

Calling for an ambulance

Where an injury or illness is an emergency, an ambulance must be called. 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. In an emergency situation time is of the essence and emergency services must be summoned without delay. 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 feasibly possible. The person making the call must give details of the

casualty, the injury and the situation in school. Members of staff should be directed to strategic points in order to direct the ambulance to the right place. Staff should endeavour to protect the privacy and dignity of the casualty by redirecting pupils away from the scene.

Record keeping

Health Questionnaires are sent to the parents of all boys on their entry to the school. Health update questionnaires are sent to all parents annually by office staff. Information generated from these forms are added to SIMS. The forms are kept securely in their school files. The School Nurse also keeps secure copies at the Health Centre at QEGS Senior School.

A daily log of children referred to the medical room to receive first aid or agreed medication, will be kept electronically by admin staff on an Excel spreadsheet. These records will be kept for the preceding five years.

Staff will complete the accident book if any minor first aid is administered at playtime. A copy is given to parents.

Data Storage

We ensure that pupils' personal data, including any information relating to their individual needs, assessments and interventions is maintained securely at all times. (General Data Protection Regulation: May 2018). For more information on the way personal data is stored and processed refer to the Privacy Notices and Data Protection Policies.

Policy for supporting students with medical needs and Administering Medicines at Centenary House including EYFS

Supporting students who have Long term medical conditions

If a boy has a specific medical condition and requires additional support at school, a health care plan will be drawn up with the parent and the School Nurse, in conjunction with health care specialists, if required. This will outline the key person's role; any treatments and medication required while at school or on a school trip; any measures to be taken in an emergency; and what information must be shared with other staff who may care for the child. Risk assessments will be carried out as deemed necessary, involving Deputy Head, Estates Manager and the School Nurse.

A copy of the care plan will be stored on SIMS. Staff are reminded that any information shared is confidential. Health care plans are reviewed by the School Nurse at least annually; more frequently if changing needs require it.

Administering medications

Whilst it is not appropriate for staff at Centenary House to care for sick children, who should be at home until they are well enough to return to the school, we will agree to administer short term medication as part of maintaining their health and wellbeing or when they are recovering from an illness. In many cases, it is possible for the boy's GP to prescribe medicine that can be taken at home in the morning and evening. As far as possible, administering medicines will only be done when it would be detrimental to the child's health if not given in the setting. If a boy has not had the medication before, it is advised that the parent keeps the child at home for 48 hours to ensure that

there is no adverse effect, as well as to giving time for the medication to take effect. Long term medication requirements will be supported by a care plan, as highlighted above.

These procedures below are written in line with current guidance 'Managing Medicines in Schools and Early Years Setting'; the SLT are responsible for ensuring all staff understand and follow these procedures. The school secretary is responsible for the correct administration of medication to children in the school. This includes ensuring that the parent medication consent forms have been completed, for medicine brought into school by the parent. The secretary will ensure that medicines are stored correctly and that records are kept according to the procedures. In the absence of the secretary the Deputy Head or key person is responsible for the overseeing of administering medication, this is also the case if the Secretary is not yet qualified.

Procedure for administering medication

- Children taking medication must be well enough to attend the setting.
- Medication administered must be in date.
- Children's medicines are stored in their original containers, are clearly labelled and are inaccessible to the children.
- Parents give prior written permission for the administration of medicines. The staff receiving the medication must ask the parent to sign a consent form stating the following information.
 - Full name of child;
 - Name of medication;
 - Dosage to be given in the setting;
 - How the medication should be stored and expiry date should be checked;
 - Any possible side effects that may be expected should be noted; and
 - Signature of parent and date.

The administration is recorded accurately each time it is given and it is signed by staff. The medication record sheet should include:-

- Name of the child;
- Name of medication;
- The date and time of dose;
- Signed by person who administered the medication.

- We keep a record of these forms in a file, which is not accessible to the children and is stored in a locked cabinet. Staff are informed of this procedure at their induction and shown all the forms that are required.

Storage of Medicines

- All medication is stored safely in a locked cupboard in the medical room or refrigerated in the office. The medication stored in the fridge is clearly labelled and stored in a plastic box.
- The school secretary is responsible for ensuring medicine is handed back at the end of each session to the parent / carer.

- For long term conditions, medication may be kept in the setting. The school secretary checks that any medication held to administer on an as-and-when required basis, or on regular basis, is in date and returns any out of date medication back to the parent / carer.
- Staff are informed of medication storage at their induction; any changes that are made are informed to all staff at our minuted staff meetings.
- If the administration of medication requires medical knowledge, individual training will be provided by the School Nurse.
- No children may self-administer. Where children are capable of understanding when they need medication, for example with asthma, they should be encouraged to tell their key person or teacher what they need. However, this does not replace staff vigilance in knowing and responding when a child requires medication.
- Any child needing medication for asthma will be taken to the school office unless their care plan states different. Inhalers are stored in a clearly labelled bag which is kept in the medical room. Such medical supplies are in an area known to all staff and not accessible to the children. This bag is taken by staff, for the children if they leave the school premises for planned activities/trips.
- Epipens and/or antihistamines prescribed for pupils with allergies are kept safely in the medical room. These medications would be taken by staff if the child leaves the premises for planned activities/trips.

Medication provision for children taken ill or injured during the school day

Only medication provided by parents as outlined above, will be administered, except:

If a child was taken ill at school, e.g. developed a high temperature, parents will be called to make arrangements to collect them. If agreed beneficial while awaiting collection, and consent is given by parents to administer calpol, to help control their high temperature, then the member of staff in attendance can administer an agreed dose. A school supply of calpol will be stored for this reason.

Likewise, if a child was injured at school and in pain, parents would be contacted to inform them, and again consent would be required to administer a dose of calpol.

If parents could not be contacted in such instances of concern, staff will discuss this with the School Nurse, who will then make a professional decision through assessment, to administer calpol if it is the best interests of the child's wellbeing. The child will be questioned as to whether they have already received any medication at home that day, and records will be checked beforehand for allergies. Every effort would be made to continue attempting to contact parents. Where a child required temperature control or pain relief with calpol, parents are expected to collect them. This service would not be seen as an alternative to parental responsibility to collect their ill or injured child when requested by school staff.

Managing medicines on trips and outings

- When trips are planned, parents are asked to complete trip consent forms, which includes health updates and instructions for any additional support/medications required while away.
- Any medication that may be required while on a trip for a boy, is taken in a plastic wallet clearly labelled with the child's name and name of the medication. Inside the wallet is a copy of the consent form and a card to record when it has been given, with the details as given above. On returning to the setting the card is stapled to the medicine record sheet.

- If a boy on medication has to be taken to the hospital, the child's medication is taken in a sealed plastic wallet clearly labelled with the child's name and name of the medication. In the wallet is a copy of the consent form signed by the parent.

Equal Opportunities

We believe all pupils in the school should have equal opportunities and equal access to health support, giving them the opportunity to learn and make progress, enabling them to fulfil their potential. All pupils are respected for their individuality and have their talents recognised, valued and nurtured. The aim of the School Health Service is to offer pupils opportunities to develop in an environment free from prejudice and discrimination against age, disability, gender reassignment, race, religion and belief, sex, sexual orientation (as outlined as 'protected characteristics' in the 2010 Equalities Act).