



# MEDICAL AND FIRST AID POLICY

ISI Code:	13a First Aid Policy
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Date Reviewed by Author:	February 2018
Next Review Date:	August 2018
Date approved by Governing Body:	February 2018
Next Review by Governing Body:	August 2018

## MEDICAL AND FIRST AID POLICY

### Introduction

This policy has been developed in accordance with the principles established by the Getting it Right for Children, Young People and Families (DoH, 2012); Incident Reporting in Schools – Accidents, Diseases and Dangerous Occurrences (HSE, 2013); Human Medicines (Amendment) Regulations (2017), Statutory Framework for the Early Years Foundation Stage (DoE, 2014) and Supporting Pupils at School with Medical Conditions (DoE, 2015) and applies to the whole school including EYFS.

The Medical and First Aid Policy applies to RGS Worcester, RGS Springfield and RGS The Grange, hereafter referred to as “the school”. In addition to sufficient number of qualified first aiders at each site, the school has the following Medical and First Aid provision:

1. **RGS Worcester** has a Registered General Nurse during school hours.
2. **RGS The Grange** has two part-time trained nurses, and can contact the Nurse at RGS Worcester as required.
3. **RGS Springfield** does not have a nurse on site, but all academic staff have Paediatric First Aid, and can contact the Nurse at RGS Worcester as required

The aims and objectives of this policy are:

- to provide a reference for staff on the care of specific medical conditions, common injuries and emergencies that may occur in school;
- to ensure pupils with medical conditions are properly supported so that they have full access to education, including school trips and PE;
- to ensure staff with medical conditions are supported in the workplace;
- to provide support, education and training for all staff;
- to continue to improve the quality of the Medical and First Aid service offered in the school.

### First Aid Training and Medical Provision

All first aiders undertake regular refresher training as required, for those staff designated as having basic First Aid. This is in addition to the ‘First Aid at Work’ course for which training will be updated every three years.

The School will ensure that:

- all staff are aware of their roles, accountability and responsibilities in respect of Health and Safety;
- Adrenaline Auto Injectors (AAI’s) and defibrillator training is offered annually to all members of staff;
- all staff receive relevant changes and updates to medical policies;
- all medical policies are reviewed on an annual basis, or sooner if it is thought that they are no longer valid, or there have been significant changes.

The names of staff members trained in First Aid (listed in Appendix 1, 2 and 3) will be displayed on the door to the Health Centre and Whitstones Main Reception (RGS Worcester), the Health Centre and the Administrators Office (RGS The Grange) and the School Secretary’s Office (RGS Springfield). These lists will be updated annually by the School Nurse or First Aider/school office at each School site.

Seven fully automated cardiac defibrillators are located across the three school sites as follows:

- RGSW - Whiteladies outside the Anthony Wheeler Boardroom
- RGSW - Main Reception (Whitstones)
- RGSW Flagge Meadow Pavillion
- RGSW St. Oswalds Changing Facilities
- RGS Springfield – In main Hall cupboard
- RGS The Grange - Main hall, opposite the PE changing rooms
- RGS The Grange Sports Field Changing Facilities.

All staff are made aware of where to access information identifying those pupils with Anaphylaxis, Diabetes and Epilepsy. Reminders are circulated on a termly bases through the H&S Bulletin. General health information that teachers need to be aware of within the school setting is accessed via “health notes” on the iSAMS system.

The health information is provided by parents when their children are enrolled in the school. The health information forms are then reviewed by the School Nurse/First Aider/Springfield Office who will ensure that iSams is updated according to the information provided. Annual reminders will be sent via email to parents/guardians asking them to inform the school if there have been any changes to their child’s medical information.

Individual care plan and arrangements for pupils with particular medical conditions (e.g. asthma, anaphylaxis, diabetes and epilepsy) will be available to staff (see appendices 4, 5, 6 and 7). Members of staff will receive training on how to manage these identified conditions as recommended in the Supporting of Children at School with Medical Conditions Policy (DoE, 2015).

Each School has a designated Health Centre or Medical Room which is a quiet area for pupils and staff, as well as a minor injuries treatment area. Pupils and staff will be updated on how to seek appropriate help in an emergency as part of the school induction programme and by means of assemblies on an annual basis.

Staff members are expected to share concerns about pupils with the School Nurse and members of the Pastoral team as soon as practical.

### First Aid Boxes

At RGS Worcester, First Aid boxes are located around the School, as well as at least one in every Department. Heads of Department are responsible for monitoring and maintaining their allocated First Aid boxes, which are in specified locations around the school.

At RGS The Grange, First Aid boxed are located in the Medical Centre, and high-risk areas (Pavilion, Food Tech etc.)

At RGS Springfield, First Aid boxes are located in an all classroom areas, as well as the first aid room and Headmistress’ office.

The First Aid boxes should be brought to the Health Centre for restocking by the School Nurse on an annual basis, or as and when required.

### **Medical and First Aid Care During School Hours**

The School Nurse is available to treat illnesses and injuries that occur during the school day at RGS. It is expected that children who are ill or infectious will be kept at home rather than being sent to school.

The School Nurse is able to contribute to the ongoing care of pupils and staff with pre-existing health conditions, and will liaise with outside agencies to facilitate this. This may require consent which will be sought if necessary.

Where possible, First Aid treatment should be delivered from the Health Centre or Medical Room.

At **RGS Worcester** and **RGS The Grange**, the School Nurse or First Aider is based in the Health Centre and is contactable during the school day (please refer to appendix 8 for contact details). In the event of the School Nurse not being available at RGS Worcester / RGS The Grange, Reception should be contacted to identify the nearest available First Aider. A list of all First Aiders is available in each school Reception, and in specified locations around the schools. This list is also available on the staff portal.

At **RGS Springfield**, all staff have Paediatric First Aid qualification and are trained to deal with incidents requiring First Aid. Staff will seek advice from the nurse at RGS as necessary.

At the **RGS Grange** and **RGS Springfield EYFS** settings, there will always be one person with Paediatric first aid qualification on site at all times when children are present. Staff with this qualification will accompany EYFS children on trips.

If a First Aider is present at the site of an incident, basic First Aid should be carried out prior to transferring the casualty to the Health Centre or taking the decision to leave the casualty in situ until professional medical assistance can be provided (for example but not limited to if a back or neck injury has been sustained).

All accidents are triaged by member of staff dealing with pupil, colleague or visitor, and an accident form completed as necessary which includes description, time and date, location, accident, the care delivered, and the outcome.

The member of staff present in the event of an injury must fill in the appropriate Accident Form that should then be taken to the Health Centre. There are separate forms for staff and pupils. These forms are signed by the person completing it.

Depending on who has had the accident / incident and where, the following Accident Reporting Procedure will apply:

#### **For an accident / incident involving a pupil:**

At **RGS Worcester**, the Accident Form should be given to the School Nurse who will then pass it on to the Assistant Head (Pastoral). Once reviewed, the form is returned to the School Nurse who will ensure the following:

- the original is filed in the Health Centre Accident Folder
- a copy is filed in the pupil's medical records.
- a second copy is sent to the Facilities and Compliance Manager if the Assistant Head (Pastoral) has requested a follow-up investigation

For an accident / incident involving a pupil:

At **RGS The Grange**, the Accident Form should be given to the School Nurse who will then pass it on to the Assistant Head (Pastoral). The Assistant Head (Pastoral) will review accident / incident, determine whether a follow up investigation is required and notify the Headmaster of accident / incident if required. Once reviewed, the form is returned to the School Nurse who will ensure the following:

- the original is filed in the Health Centre Accident Folder
- if an Early Years Child (up to and including Reception) a copy is sent home to the pupil's parents for signature, which is signed and returned to the school office
- copy of accident form is filed by the nurse in the pupil's medical records
- a second copy is sent to the Facilities and Compliance Manager if the Assistant Head (Pastoral) has requested a follow-up investigation

At **RGS Springfield**, the form should be given directly to the Headmistress. Once reviewed, the Headmistress will ensure the following:

- the original is filed in the Pupil Accident Folder
- a copy is sent home to the pupil's parents for signature
- once signed and returned by parents, accident form to be filed in the pupil's medical records
- a second copy is sent to the Facilities and Compliance Manager if the Headmistress has requested a follow-up investigation

### **For an accident / incident involving a Member of Staff or Visitor:**

At **RGS Worcester** and **RGS The Grange**, the Accident Form should be given to the School Nurse who will then pass it on to the Assistant Head (Pastoral). Once reviewed, the form is returned to the School Nurse who will ensure the following:

- the original is filed in the Health Centre Accident Folder
- a copy is sent to the Director of Finance and Operations for review
- copy is destroyed by DFO if no further action required, or forwarded to Facilities and Compliance Manager if a follow-up investigation has been requested

At **RGS Springfield**, the Accident Form should be given to the Headmistress. Once reviewed, the Headmistress will ensure the following:

- the original is filed in the Staff Accident Folder
- a copy is sent to the Director of Finance and Operations for review
- copy is destroyed by DFO if no further action required, or forwarded to Facilities and Compliance Manager if a follow-up investigation has been requested

If a follow-up investigation has been requested (pupils, staff and visitor accidents), the Facilities and Compliance Manager will carry out an investigation of the accident / incident to determine the cause and whether measures can be put in place to prevent a reoccurrence.

The Facilities and Compliance Manager will inform the Health and Safety Executive of any RIDDOR reportable accidents, injuries and diseases.

All accidents are recorded on a database by the school nurses or Headmistress (Springfield). Accident records are overviewed at each school as part of our termly health and safety meeting schedule, and any trends and patterns identified are discussed and reviewed.

### Pupils Feeling Unwell

At RGS Worcester, if a pupil becomes ill during a lesson he/she must seek written permission to attend the Health Centre. The Health Centre is open between the hours of 8:15am and 4:45pm

At RGS The Grange pupils can present at any time if they are unwell or have been injured (written permission is not required). The Health Centre is open between 8am and 4pm and

At RGS Springfield teaching staff will deal with unwell children. Teaching staff will call the parents to collect as soon as possible and would provide care until the parent collects.

If a member of staff has concerns regarding the emotional wellbeing of a pupil, their appearance or changes in their behaviour that has caused concern, the School Nurse should be contacted. These concerns will be documented and shared confidentially with the Pastoral Team, as in-line with the existing Safeguarding Policy.

Where appropriate, pupils should be accompanied by another pupil or a member of staff to the Health Centre.

At no time should pupils enter the Health Centre without a member of staff or First Aider being present.

### **Accident and Emergency Procedure During School Hours**

Following an accident or injury, the following steps should be taken to ensure that the correct help is given as quickly as possible: In the event of an obvious medical emergency, an ambulance should be called immediately by a member of staff who should also inform Reception/office they have done so and ask the receptionist to make the caretaker aware so that the ambulance is met when it arrives and access to the part of the school site where the patient is can be organised as quickly as possible. Please note that on a school landline, emergency services can be contacted by dialling 999.

The injured person should not be moved if there is any suspicion that doing so could exacerbate their injuries. In cold, wet weather, it may be necessary to keep them warm and dry with a blanket or item of clothing and please note that foil blankets are available from the Health Centre and in larger first aid kits.

The School Nurse/First Aider should be called to examine the injured person and give such First Aid treatment as is appropriate or possible. In the event of the School Nurse not being available, Reception should be contacted to identify the nearest available First Aider. In an emergency, the mobile telephone number for the Nurse at RGS Worcester (and also for RGS Springfield) is 07880439473 and the Nurse at RGS The Grange has a mobile communication device that is operated by the receptionists.

If hospital treatment is needed for pupils, but an ambulance is not necessary, their parents/guardian should be contacted to collect their child and take them directly to hospital. If it is felt an ambulance is not required and parents are unavailable, a First Aider if possible, but if not another member of staff, should accompany the pupil to hospital in a taxi. For Safeguarding reasons, Staff should not use their own cars to take injured pupils to hospital unless there is an exceptional reason for doing so and if they do, a second adult should accompany them, where possible to pupils should travel in the back of the vehicle and a member of SLT should be informed as soon as is practicable.

If an ambulance is required (or parents are unavailable), The School Nurse (or First Aider in their absence) should accompany the pupil to hospital, and the pupil's parents/guardian should be informed.

In the event that a pupil is not accompanied to hospital by the School Nurse/First Aider, a transfer letter should be sent detailing relevant medical information.

Health information forms detailing a pupil's medical history and emergency contact numbers are kept in the Health Centre. Where possible, these should accompany the pupil to hospital. If paper records cannot be accessed from the Medical Room, some details can be accessed from iSams via Reception.

The member of staff accompanying the pupil would normally wait at the hospital until the pupil's parent/guardian arrives and the Head or Assistant Head (Pastoral) should be informed.

Staff accompanying a pupil to hospital cannot give consent to medical treatment. Consent can only be given by the patient, their parents/guardian or the Courts. In an emergency situation, medical staff will act in the best interests of the pupil if they are unable to contact their parents/guardian.

Accident forms should be completed as previously mentioned.

### **Accident and Emergency Procedure Out of School Hours**

The injured person should not be moved if there is any suspicion that doing so could exacerbate their injuries. Keep the injured person warm. Please note that foil blankets are available from the Health Centre.

The member of staff responsible for the activity or an available First Aider should examine the injured person and give such treatment as is appropriate to their training.

If urgent or emergency hospital treatment is necessary, an ambulance should be called immediately. Following an accident or injury, the following steps should be taken to ensure that the correct help is given as quickly as possible: In the event of an obvious medical emergency, an ambulance should be called immediately by a member of staff who should also inform Reception they have done so and ask the receptionist to make the caretaker aware so that the ambulance is met when it arrives and access to the part of the school site where the patient is can be organised as quickly as possible. Please note that on a school landline, emergency services can be contacted by dialling 999.

If it is felt an ambulance is not necessary and the injuries do not require urgent treatment, the injured person's next of kin should be called to provide transport to hospital.

In the event that the next of kin cannot be contacted, a First Aider if possible, and if not another member of staff, should accompany the person to hospital in a taxi. Staff should not use their own cars to take injured pupils to hospital unless there is an exceptional reason for doing so and if they do, a second adult should accompany them.

In no circumstances should pupils be left unattended as a result of a member of staff transporting an injured person to hospital. The School Nurse or Senior Member of Staff on duty or another member of school staff should be contacted for assistance.

Accident forms should be completed as previously mentioned.

### **First Aid Care Out of School Hours**

Arrangements should be made to ensure that a trained First Aider (appointed person) is available at those times when pupils and visitors are on the School premises out of school hours.

After the end of the school day, Caretakers on duty are First Aid trained. For all events, a First Aider is appointed by the Event Organiser, and noted in the Event Risk Assessment.

The appointed person should take charge of the First Aid arrangements in the event of a problem and give such treatment as is appropriate to their level of training.

All accidents should be recorded in the same manner as they would be on a normal school day.

## **ADMINISTRATION OF MEDICINE**

No pupil will be given medication in School without the consent of a parent or guardian. This consent should be reviewed regularly.

Medication can only be administered by a School Nurse or person with a First Aid certificate.

For prescribed medication, as prescribed by a doctor, dentist, nurse or pharmacist, written instructions from the parent or guardian should be provided stating the name and class of the pupil, together with the dose and time of day it should be taken. Medicines containing aspirin can only be given when prescribed by a doctor. This request should be given or sent to the School Nurse or Class teacher at RGS Springfield. The medication should be stored in the Health Centre/Medical Room or staff room at Springfield (lockable box).

Medicines must be stored in a locked cupboard or fridge in the Health Centre/Medical Room or staff room at RGS Springfield. At RGS Worcester, medicines provided for emergency treatment, such as reliever inhalers for asthmatic pupils, glucose tablets for diabetics and Adrenaline Auto-Injectors for pupils with allergies should be kept with the pupil.

At RGS The Grange, ALL medications should be handed over to the School Nurse or named First Aider for that day, if school nurse not available and all medicines are to be stored in the Health Centre and administered by these personnel only.

At RGS Springfield, medicines should be handed to the child's key worker or class teacher.

In the event of a pupil having a particular medical need (e.g. asthma, diabetes, or anaphylaxis) it is important that appropriate arrangements for emergency care are made. Adrenaline Auto-Injector device training will be given annually, and other training can be arranged as required.

At all schools, prescription medication should be kept in the Health Centre/Medical Room, unless it has been agreed that the pupil can carry the medication with them (eg. Prescribed inhaler).

All medicines administered must be recorded in the Medication Book or at the prep schools listed on the proprietary medicines form or medication form which must be signed by the parents/carer. Time of medication and 2 staff signatures must be recorded for EYFS. Where proprietary medication has been given for children in RGS The Grange and Springfield parents will be informed as soon as reasonably possibly, ideally the same day.

All medicines administered must be recorded in the Medication Book or at the prep schools listed on the proprietary medicines form or medication form which must be signed by the parents/carer. Time of medication and 2 staff signatures must be recorded for EYFS. Where proprietary medication has been given for children in RGS The Grange and Springfield parents will be informed as soon as reasonably possibly, ideally the same day.

Parents/pupils should collect medicines held at school at the end of the school year. In the event that they are not collected at this time and are deemed out of date, the School Nurse may then take the medication to the nearest pharmacy for correct disposal.

Members of staff with their own prescribed medication should ensure that it is stored safely and is not accessible to the pupils and for those responsible for EYFS locked away in a lockable cupboard.

Staff must seek medical advice if they are taking medication which may affect their ability to care for children. Please see Staff Code of Conduct for further information.



## **RGS Holiday Club**

### **Accident Reporting Procedure**

For an accident / incident involving a child attending **RGS Holiday Club**:

- accident form should be completed by the member of staff present at the time of the incident / accident.
- the original form is given to the Head of Holiday Club, who will review accident / incident and determine whether a follow up investigation is required.
- the original is filed in the Health Centre Accident Folder
- a copy is taken and sent home to the child's parents for signature on the day of the accident / incident
- once signed and returned by parents, accident form is filed either:
  - a. in the pupil's medical records if it is an RGS pupil,
  - b. in the Health Centre Accident Folder, if not an RGS pupil
- if a follow up investigation is required, the Business Manager will be notified of the detail and a second copy sent to the Facilities and Compliance Manager to follow up

### **Administration of Medicine**

No child will be given medication during their time at Holiday Club without the consent of a parent or guardian. At the time of booking, parents or guardians are asked to provide consent for the administering of non-prescribed medicines ie paracetamol and ibuprofen. Medication can only be administered by a person with a First Aid Certificate.

If a child requires medication during their time at Holiday Club, written instructions from the parent/guardian should be provided at the start of the session. Instructions are provided by completing the Holiday Club Medicine Form stating the name of the child, medication, dose, time to be administered and reason for medication. There are separate folders for each Holiday Club section; Shrimps Snappers and Sharks.

For prescription medication, staff member must also sign on the Medicine Form to confirm the name on the medication matches the name of the child who is to receive it. The medication should be handed to the staff member in charge of the room. Medication for Snappers and Sharks is locked away in Medical Room. Medication for Shrimps is locked away in the fridge in the Nursery Kitchen.

When medicines are administered, these must be recorded on the same Holiday Club Medicine Form, which is to be signed by the parents/carer when the child is collected at the end of the session. Time of medication and 2 staff signatures must be recorded.

If a child requires non-prescribed medication (ie paracetamol, ibuprofen) during their time at holiday club, and the Medicine Form has not been completed by the parent, staff are to check the child has been given consent at the time of booking, and where possible phone to confirm consent has been given before administering. Administering of non-prescribed medication is to be recorded on the Holiday Club Medicine form and parent to sign form on collection of child at the end of the session.

## **TRIPS**

### **Medication**

Prior to educational visits, parents will be asked to complete a consent form on line via parent portal. This form will indicate whether a pupil is taking medication and give the staff permission to supervise its administration. Medication should be stored in a secure container and a record kept when it was delivered and by whom.

### **First Aid**

Staff planning educational visits should consider the level of First Aid cover that will be required. Only official consent forms may be used and it is the responsibility of the trip leader to ensure that they are collected in a timely manner. Consideration should be given to liaising with the Assistant Head (Pastoral) at RGS Worcester and RGS The Grange, or the Head Mistress at RGS Springfield regarding any specific issues with pupils scheduled to participate in any activity.

A list of pupils going on the trip should be given to the School Nurse/First Aider/ Springfield school office by the trip leader at least a week in advance. The School will identify pupils with specific medical needs. This information will be given to the trip leader and any other members of staff on the trip that need to be aware. Any member of staff accessing this data is responsible for its confidentiality, and its safe return.

Only the School First Aid kits should be used. In the event of a trip where a risk assessment indicates that extra items/equipment might be required, these items should be carried separate to the First Aid kit.

Parents/guardians are expected to provide appropriate sun protection for their children in the form of high factor sunscreen and hats. Parents/guardians are responsible for ensuring all necessary vaccinations are up to date by speaking with their GP or Practice Nurse prior to the trip.

First Aid kits should be requested from the School Nurse/First Aider. If possible one week's notice should be given and they must be signed for and they must be returned to the Medical Room directly after the trip.

Medication and accidents - see relevant sections above.

### **Sporting Matters**

Staff supervising sports matches, whether at home or away, should have ready and easy access to a First Aid kit, appropriate to their level of First Aid training and the activity they are supervising. Kits can be obtained for away matches from the School Nurse/First Aider and should be returned immediately for restocking.

First Aid provision for the RGS sports fixtures that are high-risk (rugby, football and hockey) is provided by an external First Aid provider, Severn Valley. Severn Valley are responsible for administering First Aid to pupils taking part in the fixtures. Accidents and injuries are reported and recorded in the same manner as if for a normal school day or fixture without the external first aiders.

A player who has an open or bleeding wound must leave the playing area until such time as the bleeding is controlled and the wound is covered or dressed.

A player should not wear clothing which has become blood-stained during a match or practice.

Disposable gloves must be worn by all staff when dealing with bleeding or spillage of body fluids, no matter how small. All waste products should be placed in a yellow biohazard bag.

Following an injury, if it is deemed that it would be harmful for the pupil to continue playing, the referee shall require the player to leave the field to be medically examined.

Sponges and water must not be used at the sports field. Only fresh water should be used to irrigate wounds and to cool bruises. In the event of a wound requiring cleaning, water sprays and wipes should be used.

All accidents should be recorded in the same manner as a normal school day.

## **INFECTIOUS CONDITIONS**

### **HIV/Infectious Diseases**

RGSW will not discriminate against pupils or staff who may have HIV or another infectious disease. Parents must undertake to inform the School should a pupil be suffering from such an illness. The Registration Form states that "All medical information will be handled in the strictest confidence within the school".

The School Nurses at RGSW have a professional code of conduct which binds them to patient/client confidentiality which may override School policy. In the event of the Head being told that a pupil has an infectious disease only relevant staff will be informed.

Some illnesses require exclusion from school to inhibit their spread or limit infection. Guidelines from Public Health England will be followed.

### **Notifiable Illness as Required by Public Health England.**

School will follow guidance on notifiable illness and exclusion, and will report to the Public Health England and Ofsted if a child becomes infected.

### **Guidelines for Good Practice for Universal Infection Control**

Precaution against infection should be taken whenever it becomes necessary to deal with any body fluids including blood, urine, vomit and faeces.

It is important for a First Aider to cover cuts and abrasions on their hands with a waterproof dressing. A person administering First Aid should wear disposable, non-sterile gloves. These can be found in each First Aid box. If gloves are not available, then hands should be washed before and after giving First Aid.

A wound that is bleeding should be gently irrigated using warm water. A clean pad or paper towel can be used to protect the wound or act as a pressure pad if needed. Alcohol free cleansing wipes may be used.

If the wound continues to bleed, a suitable dressing should be applied. If necessary, a pressure pad can be applied over the dressing.

Gloves, paper towels and contaminated dressings or other materials should be sealed in a yellow biohazard bag. These are found in the First Aid kits and should be disposed of in an appropriate manner.

A puncture wound from a possible infected object e.g. a needle, should be encouraged to bleed, irrigated and covered. An appointment with their GP should be made.

Any risks from mouth to mouth resuscitation are extremely low. Resuscitation using Laerdal masks may be more effective if one is trained in their use. In the event of masks not being available, a cotton handkerchief or any other breathable piece of fabric could be used. A resuscitation shield is available in every First Aid kit.

### **Dealing with Body Fluid Spillages**

At RGS Springfield and RGS the Grange, the member of staff in charge of dealing with the incident is in charge of overseeing the safe and appropriate removal of body fluid spillages.

As RGS Worcester, the member of staff dealing with any incident involving body fluid spillages will ensure an appropriately trained member of staff will deal with the appropriate removal and disposal of body fluid spillages.

Spillages of blood, vomit, urine or faeces should be cleaned up as quickly as possible. This should not be left until the cleaning staff arrive. Reception should be informed and arrangements will then be put in place.

Rubber gloves should be worn when dealing with spillages of body fluids, no matter how small. Disposable aprons should be worn if there is any risk of spillage being splashed onto clothing. These can be found in the Health Centre.

For spillages involving urine, hot soapy water is adequate. For blood, vomit and faeces, body spillage granules should be poured over the spillage which should then be covered with paper towels. After five minutes, it should be wiped up with paper towels and the surface rinsed with hot, soapy water before being dried. Paper towels should be disposed of in a yellow bio-hazard bag. Body spillage granules are obtainable from the Health Centre/Medical Room. Bleach should never be used.

Where required, clothes contaminated with blood should be thoroughly rinsed in cold water, bagged wearing disposable rubber gloves and given to parents.

Any sharp, broken, blood stained objects should be carefully handled, heavily wrapped in paper and then placed in a yellow biohazard bag for disposing or placed in a sharps bin which are kept in the Health Centre/Medical Room.

If a pupil or member of staff has had diarrhoea or vomiting (D&V), they should remain absent from school for 48 hours after the last episode of D&V, according to Public Health England guidelines.

### **Vaccinations**

The school nurse will liaise with the Coventry & Warwickshire Partnership NHS Trust, Immunisation and Vaccination Team and gain parental consent for vaccinations in accordance with the current National Government Childhood Immunisation Programme.

Sponsor – Assistant Head (Pastoral)

September 2011, Reviewed September 2012 and approved by the Board of Governors

Reviewed and Updated August 2013 and Endorsed on the 7th day of August 2013 by the Chairman of Governors, Governor with Safeguarding Responsibility.

Reviewed and Updated June 2014 and Endorsed on 26<sup>th</sup> day of June 2014 by the Chairman of Governors, Governor with Safeguarding Responsibility

Reviewed and Updated: September 2015 with an updated list of personnel for all three Schools and

Endorsed on 11th day of September 2015 by the Chairman of Governors, Governor with Safeguarding Responsibility

Reviewed and Updated March 2016 to update qualifications of the Nurse employed at RGS The Grange and to cover new Immunisation Programme.

Endorsed on the 7<sup>th</sup> day of March 2016 by the Chairman of Governors, Governor with Safeguarding responsibility.

Reviewed and Updated September 2016 following guidance from our Health and Safety Consultants and endorsed by the Chairman of Governors with Safeguarding Responsibility.

Reviewed and Updated January 2017 to update Appendix 2 'RGS Worcester Current First Aiders'.

Reviewed, Updated and Endorsed: November 2017

Reviewed, Updated and Endorsed: February 2018 following a collective review by Facilities and Compliance Manager, DSL at Senior School, Headmistress at Springfield and School Nurses, to streamline the process across all 3 schools. Addition of RGS Holiday Club Procedures.

## Appendix 1

### RGS THE GRANGE & RGS SPRINGFIELD – EARLY YEARS FOUNDATION STAGE

REFERENCE SHOULD BE MADE TO SECTION 2. ADMINISTRATION OF MEDICINE and SECTION 3. FIRST AID IN THE MAIN POLICY DOCUMENT WITH THE FOLLOWING ADDITIONS:

1. The School Nurse or named member of staff must hold a full and relevant Paediatric (Early Years) First Aid Training Qualification.
2. All care delivered to children within the Early Years Foundation Stage (EYFS) must be documented in separate book from the remainder of the school.
3. All medicine administered to children within the EYFS must be recorded in a separate book from the remainder of the school.
4. On any trip or educational visit organised for children within the EYFS there must always be a member of staff attending who holds a relevant Paediatric (Early Years) First Aid Training qualification.

First Aiders are:

#### Early Years:

School Nurse	Alison Odam	RGS The Grange
Early Years	Annette Parish	RGS The Grange
Early Years	Clare Weston	RGS The Grange
Early Years	Sarah Bill	RGS The Grange
Early Years	Phenice Fletcher	RGS The Grange
Early Years	Angie Lymer	RGS The Grange
Early Years	Jacqueline Allen	RGS The Grange
Early Years	Abby Upfield	RGS The Grange
Early Years	Laura Ironside	RGS The Grange
Early Years	Amy Jane Cartwright	RGS The Grange
Early Years	Kali Jauncey	RGS The Grange
Foundation Stage	Samantha Salisbury	RGS Springfield
Foundation Stage	Karen Magee	RGS Springfield
Foundation Stage	Diane Bennett	RGS Springfield
Foundation Stage	Emily Baldwin	RGS Springfield
Foundation Stage	Natalie Townsend	RGS Springfield
Foundation Stage	Rachel Powell	RGS Springfield
After School Care	Louise Trafford	RGS Springfield

Appendix 2

RGS Worcester Current First Aiders

<b>First Aid at Work</b>	<b>Valid until:</b>
Jo Marsh	01/05/20
Ben Taylor	03/10/20
Emma Pollard	22/05/20
Leanne Bennett	03/10/20
Stuart Davis	08/03/21
Sofia Nicholls	14/12/18
Alison Waites	20/12/19
Angela Freeman	08/12/18
Sharon Teasdale	10/08/19
Nicola Gardner	23/03/18
Gareth Roots	01/01/19
Lily Racic	13/10/19
<b>Emergency First Aid at Work</b>	
Steve Currien	26/05/18
John Pardoe	26/05/18
Pippa Curtis	23/03/19
Rachel Wells	01/11/18
<b>Outdoor First Aid Level 2</b>	
Julie Gidon	30/04/19
<b>Rescue Emergency Care Course</b>	
Rob Berry	09/06/18
Garry Bowyer	09/06/18
Robin Holt	09/06/18
Shane Blincoe-Deval	09/06/18
Deborah Harkness	09/06/18
Gary Leeds	13/11/19
<b>Anaphylaxis Trained</b>	
Alison Waites	Valid until September 2019
Anaphylaxis training: Offered to staff during September 2017, and on as required basis.	

### Appendix 3

#### LIST OF FIRST AIDERS AT RGS THE GRANGE

SECTION	QUALIFICATION	NAME	EXPIRY DATE
ASC/Hol Club	FIRST AID AT WORK	HUMPHREYS David	30/06/2019
ASC/Hol Club	SCHOOLS FIRST AID	HUMPHREYS David	20/04/2018
ASC	COMBINED FIRST AID	PLUSH Vonya	02/11/2019
ASC	COMBINED FIRST AID	SMITH Margherita	06/10/2020
ASC/Hol Club	COMBINED FIRST AID	MORGAN Paige	06/09/2020
ASC/Hol Club	PAEDIATRIC FIRST AID	HUGHES Lauren	23/09/2020
ASC/Hol Club	EPIPEN/ANAPHYLAXIS	MORGAN Paige	06/07/2018
ASC/Hol Club	EPIPEN/ANAPHYLAXIS	HUMPHREYS David	30/06/2018
ASC	EPIPEN/ANAPHYLAXIS	GORDANI Elvira	28/09/2018
ASC	EPIPEN/ANAPHYLAXIS	PEREZ Gema	28/09/2018
ASC	EPIPEN/ANAPHYLAXIS	SMITH Margherita	28/09/2018
ASC	EPIPEN/ANAPHYLAXIS	DARBY Kellie	28/09/2018
EYS	COMBINED FIRST AID	ROSS Emma	06/10/2020
EYS	COMBINED FIRST AID	ALLEN Jacqueline	02/11/2019
EYS	PAEDIATRIC FIRST AID	FRANKLIN Sarah	20/02/2020
EYS	PAEDIATRIC FIRST AID	WOOD Natalie	28/03/2020
EYS	PAEDIATRIC FIRST AID	MILLINGTON Sarah	16/11/2019
EYS	PAEDIATRIC FIRST AID	IRONSIDE Laura	01/12/2018
EYS	PAEDIATRIC FIRST AID	UPFIELD Abby	01/12/2018
EYS	PAEDIATRIC FIRST AID	HULL Claire	20/02/2020
EYS	PAEDIATRIC FIRST AID	HOUGHTON Kerry	28/11/2019
EYS	OUTDOOR FIRST AID	BOWKETT Rhiannon	30/10/2019
EYS	OUTDOOR FIRST AID	FLETCHER Phenice	22/09/2020
EYS	EPIPEN/ANAPHYLAXIS	ROSS Emma	06/07/2018
EYS	EPIPEN/ANAPHYLAXIS	HULL Claire	06/07/2018
EYS	EPIPEN/ANAPHYLAXIS	FLETCHER Phenice	06/07/2018
EYS	EPIPEN/ANAPHYLAXIS	HOUGHTON Kerry	06/07/2018
EYS	EPIPEN/ANAPHYLAXIS	UPFIELD Abbie	06/07/2018
EYS	EPIPEN/ANAPHYLAXIS	BOWKETT Rhiannon	06/07/2018
EYS	EPIPEN/ANAPHYLAXIS	IRONSIDE Laura	06/07/2018
EYS	EPIPEN/ANAPHYLAXIS	HASNET Anne	06/07/2018
EYS	EPIPEN/ANAPHYLAXIS	FLETCHER Phenice	22/09/2018
Reception	PAEDIATRIC FIRST AID	BILL Sarah	01/12/2018
Reception	SCHOOLS FIRST AID	LYMER Angie	20/04/2018
Reception	COMBINED FIRST AID	ROBERTS CLARKE Amy	06/10/2020
Reception	PAEDIATRIC FIRST AID	PARISH Annette	02/11/2019
Reception	EPIPEN/ANAPHYLAXIS	PARISH Annette	30/06/2018
Reception	EPIPEN/ANAPHYLAXIS	LYMER Angie	30/06/2018



YR1	COMBINED FIRST AID	EVANS Nicky	06/10/2020
YR1	COMBINED FIRST AID	ROSE Ivory	06/10/2020
Head KS1	FIRST AID AT WORK	UREN Josh	29/05/2018
YR1	EPIPEN/ANAPHYLAXIS	UREN Josh	05/07/2018
YR1	EPIPEN/ANAPHYLAXIS	EVANS Nicky	03/07/2018
YR1	EPIPEN/ANAPHYLAXIS	ROSE Ivory	03/07/2018
YR2	SCHOOLS FIRST AID	SYKES Carola	20/04/2018
YR2	COMBINED FIRST AID	HOBSON Nina	02/11/2019
YR2	SCHOOLS FIRST AID	WESTON Claire	20/04/2018
YR2	SCHOOLS FIRST AID	GUEST Emma	20/04/2018
YR2	SCHOOLS FIRST AID	LEE Carrie	20/04/2018
YR2	EPIPEN/ANAPHYLAXIS	HOBSON Nina	05/07/2018
YR2	EPIPEN/ANAPHYLAXIS	WESTON Claire	28/06/2018
YR2	EPIPEN/ANAPHYLAXIS	SYKES Carola	03/07/2018
YR2	EPIPEN/ANAPHYLAXIS	GUEST Emma	05/07/2018
YR2	EPIPEN/ANAPHYLAXIS	LEE Carrie	03/07/2018
YR3	COMBINED FIRST AID	SINGLETON Katie	02/11/2019
YR3	SCHOOLS FIRST AID	WALSH Lorna	20/04/2018
YR3	COMBINED FIRST AID	SMITH Theresa	06/10/2020
YR3	EPIPEN/ANAPHYLAXIS	SINGLETON Katie	04/07/2018
YR3	EPIPEN/ANAPHYLAXIS	WALSH Lorna	04/07/2018
YR3	EPIPEN/ANAPHYLAXIS	SMITH THERESA	04/07/2018
YR4	SCHOOLS FIRST AID	LLEWELLYN Karin	20/04/2018
YR4	COMBINED FIRST AID	TURNER Tracey	02/11/2019
YR4	EPIPEN/ANAPHYLAXIS	LLEWELLYN Karin	03/07/2018
YR4	EPIPEN/ANAPHYLAXIS	TURNER Tracey	05/07/2018
YR4	EPIPEN/ANAPHYLAXIS	EGGINTON Maz	05/07/2018
YR5	COMBINED FIRST AID	HADLEY Emma	06/10/2020
YR5	COMBINED FIRST AID	McCALLION Tom	02/11/2019
YR5	COMBINED FIRST AID	COCKER Mick	06/10/2020
YR5	EPIPEN/ANAPHYLAXIS	HADLEY Emma	07/09/2018
YR5	EPIPEN/ANAPHYLAXIS	COCKER Mick	07/09/2018
YR5	EPIPEN/ANAPHYLAXIS	ATKINSON Sarah	07/09/2018
YR5	EPIPEN/ANAPHYLAXIS	McCALLION Tom	07/09/2018
YR5	EPIPEN/ANAPHYLAXIS	LANE Claire	07/09/2018
YR5	EPIPEN/ANAPHYLAXIS	BEARDMORE Lisa	07/09/2018
YR6	COMBINED FIRST AID	WILLIS Laura	02/11/2019
YR6	COMBINED FIRST AID	MILLARD Richard	02/11/2019
YR6	COMBINED FIRST AID	HODGKINS James	02/11/2019
YR6	COMBINED FIRST AID	CONNAH Kathy	06/10/2020
YR6	EPIPEN/ANAPHYLAXIS	CONNAH Kathy	10/05/2018
YR6	EPIPEN/ANAPHYLAXIS	WILLIS Laura	10/05/2018
YR6	EPIPEN/ANAPHYLAXIS	MILLARD Richard	10/05/2018

YR6	EPIPEN/ANAPHYLAXIS	PARKER Rebecca	20/05/2018
Sport	SCHOOLS FIRST AID	GERRISH James	20/04/2018
Sport	FIRST AID AT WORK	BOUSFIELD David	25/01/2019
Cleaner	COMBINED FIRST AID	TAVERNER Rachel	06/10/2020
Caretaker	COMBINED FIRST AID	BREESE Keith	06/10/2020
Pastoral Deputy	SCHOOLS FIRST AID	WREGHITT Wendy	20/04/2018
School Nurse	FIRST AID AT WORK	ODAM Alison	28/09/2018
ICT	COMBINED FIRST AID	WARNE Matt	02/11/2019
French	COMBINED FIRST AID	GABET Julie	02/11/2019

### FIRST AID BAGS/BOXES IN RGS THE GRANGE

DESCRIPTION	LOCATION
3 x bags	First Aid Room
3 x bum bags	First Aid Room
1 x box	Outside First Aid Room
1 x large bum bag 1 x bum bag	Pre-School & Forest School
1 x box	Food Tech Room
1 x box	Small Pavillion
1 x box	Maintenance Workshop
3 x bags	One In each minibus
1 x Box	In kitchen (maintained by Chartwells)

### LIST OF FIRST AIDERS AT RGS SPRINGFIELD

Staff list of compliance training, based at Springfield		
Name	Responsibility	First aid 3 years
		First response training renewal 9/17
Laura Brown	Headmistress	May 2017 (SJA First Aid at work, 3 day)
Ian Griffin	Deputy Head	Combined Paediatric First Aid 3/9/17
Ellie Williams	Year Five (Job share) Maternity 9/16	Combined Paediatric First Aid 3/9/17
Justine Walker	Year Five (Job share) & TA	June 2017 (SJA First Aid at work, 3 day)
Craig Miller	Year Four	June 2016 (SJA First Aid at Work, 3 day)
Angela Webster	Year Three	Combined Paediatric First Aid 3/9/17
Rachel Whittaker	Year Two	Combined Paediatric First Aid 4/9/17
Claire Hodgkins	Year One	Combined Paediatric First Aid 4/9/17
Sam Salisbury	EYFS Co-coordinator & Reception Teacher	Advanced Paediatric First Aid 4/9/17
Rachel Morgan	PT Reception teacher	Advanced Paediatric First Aid 4/9/17
Di Bennett	Frogs & Tadpoles (K & N) ASC manager	Advanced Paediatric First Aid 4/9/17

Cathy Carr	TA PT	Advanced Paediatric First Aid 4/9/17
Laura Phillips	TA	Advanced Paediatric First Aid 4/9/17
Karen Magee	TA – EYP	Advanced Paediatric First Aid 4/9/17
Viki Lane	TA – EYP	Advanced Paediatric First Aid 4/9/17
Claire Cox	TA – EYP	Advanced Paediatric First Aid 4/9/17
Emily Baldwin	TA – EYP	Advanced Paediatric First Aid 3/9/17
Natalie Townsend	TA – EYP	Advanced Paediatric First Aid 3/9/17
Rachel Powell	TA – EYP	Advanced Paediatric First Aid 3/9/17
Louise Trafford	ASC	Advanced Paediatric First Aid 3/9/17
Liz McCabe	Music	Combined Paediatric First Aid 3/9/17
Katie Kelleher	Games.	Combined Paediatric First Aid 3/9/17
Fay Edwards	Games and PE	Combined Paediatric First aid3/9/17
Annette Parry	TA	Combined Paediatric First Aid 3/9/17

## **Appendix 4**

### **1. Anaphylaxis**

Anaphylaxis is an acute allergic reaction requiring urgent medical attention. It can be triggered by a variety of allergens, the most common of which are contained in food (e.g. dairy products, nuts, peanuts, shellfish), certain drugs and the venom of stinging insects (e.g. bees, wasps, hornets). In its most severe form the condition can be life-threatening.

Symptoms of anaphylaxis usually occur after exposure to the causative agent and may include itching, swelling of the throat and tongue, difficulty in swallowing, rashes appearing anywhere on the body, abdominal cramps and nausea, increased heart rate, difficulty in breathing, collapse and unconsciousness. No single person would necessarily experience all of these symptoms at the same time.

### **2. Medication and Control**

Medication to treat anaphylactic reactions includes antihistamines (oral medication), or an adrenaline auto injector. The adrenaline auto injector devices are easy to administer, usually into the fleshy part of the thigh either directly or through light clothing.

Medication for an individual pupil must be kept in a locked cabinet which is readily accessible, in accordance with the school's Health and Safety Policy (except where a health care plan has identified that a pupil is permitted to carry it on their person). If a pupil has an adrenaline auto injector device it is particularly important that key members of staff in the school are aware of the pupil's condition, and of where the pupils' medication is kept as it is likely to be needed urgently.

It is not possible to overdose using an adrenaline auto injector device as it only contains a single dose of adrenaline. In cases of doubt, it is better to administer the adrenaline auto injector device to a pupil experiencing an allergic reaction an injection rather than hold back. All pupils who have anaphylaxis will require an individual health care plan. The health care plan should indicate whether in some circumstances the pupil should be allowed to carry medication on his/her person around the school.

Following discussion with the pupil and his/her parents, individual decisions should be made as to whether to provide basic information on the pupil's condition to his/her peer group so that they are aware of their classmate's needs, and of the requirement for urgent action should an allergic reaction occur. Fellow pupils should also be advised not to share food or drink with a pupil who is likely to experience an anaphylactic reaction.

### **3. Managing Pupils with Anaphylaxis**

Staff should be aware of those pupils under their supervision who have a severe allergy resulting in anaphylaxis.

Staff should ensure that all pupils who have an adrenaline auto injector device prescribed to them, have their medication on them at all times. Staff should attend annual adrenaline auto injector training.

If a pupil feels unwell, the School Nurse should be contacted for advice.

All spare adrenaline auto injector devices are kept in the Health Centre and should be checked monthly by the School Nurse to ensure they are in date. When adrenaline auto injector devices have expired parents should be contacted to provide a new adrenaline auto injector to the Health Centre. All expired adrenaline auto injectors will be disposed of by taking them to Scales Pharmacy, Upper Tything, Worcester.

#### **4. Managing Pupils with Anaphylaxis on Trips**

Staff should ensure that all pupils going on trips carry their medication with them. Staff are to familiarise themselves with the pupil's care plan. Staff are responsible for carrying the pupils spare adrenaline auto injector device.

Staff members trained in the administration of medication must be identified.

Staff must give consideration to the safe storage of the medication.

Staff supervising the trip must be aware of the pupil's condition and of any relevant emergency procedures.

#### **5. What are the main symptoms of an anaphylaxis reaction?**

- Itching or presence of a rash (rash is not always present)
- Swelling of the throat
- Hoarse voice
- Difficulty in swallowing
- Difficulty in breathing
- Increased heart rate
- Pale and floppy
- Dizziness
- Unconsciousness

#### **6. What to do if a pupil has an anaphylactic reaction**

Lie pupil flat with legs raised: If breathing is difficult allow pupil to sit.

Use adrenaline auto injector without delay.

Dial 999 to request an ambulance and say ANAPHYLAXIS

If in doubt give adrenaline

##### **After giving the Adrenaline:**

Stay with the pupil until the ambulance arrives, do NOT stand the pupil up

Commence CPR if there are no signs of life

Phone parent or emergency contact

If no improvement after 5 minutes, give a further dose of adrenaline using another auto injector device, if available.

Anaphylaxis may occur without mild signs: ALWAYS use adrenaline auto injector device FIRST in a pupil with known food allergy who has sudden breathing difficulty (persistent cough, hoarse voice, wheeze) – even if no skin symptoms are present.

## **Appendix 5**

### **1. What is Asthma?**

Pupils with asthma have airways which narrow as a reaction to various triggers. The triggers vary between individuals but common ones include viral infections, cold air, grass pollen, animal fur, house dust mites and passive smoking. Exercise and stress can also precipitate asthma attacks in susceptible cases. The narrowing or obstruction of the airways causes difficulty in breathing and can be alleviated with treatment.

Asthma attacks are characterised by coughing, wheeziness, an inability to speak properly, and difficulty in breathing, especially breathing out. The pupil may become distressed and anxious and in very severe attacks the pupil's skin and lips may turn blue.

### **2. Medication and Control**

Medication to treat the symptoms of asthma usually comes in the form of inhalers which in most cases are colour coded. Instructions will be given on the medication as to which colour coding is relevant to inhaler use in different circumstances.

Most pupils with asthma will take charge of and use their inhaler from an early age and it is good practice to allow pupils to carry their inhalers with them at all times, particularly during PE lessons. If a pupil is too young or immature to take responsibility for the inhaler, staff should ensure that the inhaler is kept in a safe but readily accessible place and is clearly marked with the pupil's name.

Pupils with asthma must have immediate access to their inhalers when they need them.

Parents are encouraged to provide the School with a spare inhaler for use in case the original inhaler is left at home or runs out. Spare inhalers must be clearly labelled with the pupil's name and stored in accordance with the School's health and safety policy.

Where pupils are unable to use an inhaler by themselves or where a pupil requires additional medication, e.g. a nebuliser, a health care plan must be completed. For pupils whose asthma is controlled by an inhaler, a care plan giving the basic details should be completed and kept in the pupil's medical file.

An emergency salbutamol inhaler with spacer is kept in the health centre. Parents of pupils with asthma give consent for this to be used in an emergency.

### **3. Managing pupils with asthma**

Staff should be aware of those pupils under their supervision who have asthma.

Games staff should ensure that all pupils with asthma have their salbutamol inhaler with them prior to commencement of a session.

Staff should ensure that they have some knowledge of what to do if a pupil has an asthma attack.

If a pupil feels unwell, the School Nurse should be contacted for advice.

A pupil should always be accompanied to the Health Centre if sent by a member of staff.

#### **4. Trips**

Staff should ensure that all pupils going on trips carry their medication with them.

Staff must give consideration to the safe storage of the medication.

Staff supervising the trip must be aware of the pupil's condition and of any relevant emergency procedures.

#### **5. What are the main symptoms of asthma?**

- Coughing
- Wheezing
- Inability to speak properly
- Difficulty in breathing out

#### **6. What to do if a pupil has an asthmatic attack**

Stay calm and reassure the pupil. Speak calmly and listen to what the pupil is saying.

Summon assistance from the Health Centre. Try not to leave the pupil alone unless absolutely necessary.

Make sure that the reliever inhaler (salbutamol) or own inhaler is used promptly.

Help the pupil to breathe by encouraging the pupil to breathe slowly and deeply and relax.

Help the pupil to sit fairly upright or to lean forward.

If there is no improvement take a further two puffs of the reliever inhaler every 30 – 60 seconds up to 10 puffs.

If the pupil does not respond to medication or his/her condition deteriorates call a paramedic/ ambulance. If the ambulance / paramedic takes longer than 15 minutes repeat the above steps.

Liaise with the School Nurse about contacting parents/guardians.

## **Appendix 6**

### **1. What is diabetes?**

Diabetes is a condition in which the amount of glucose (sugar) in the blood is too high due to the body being unable to use it properly. This is because of a faulty glucose transport mechanism due to lack of insulin.

Normally, the amount of glucose in the bloodstream is carefully controlled by a hormone called insulin. Insulin plays a vital role in regulating the level of blood glucose and, in particular, in stopping the blood glucose level from rising too high.

Pupils with diabetes have lost the ability to produce insulin and therefore their systems are unable to control their blood glucose levels. If the blood glucose level is too high, a pupil may show symptoms of thirst, frequent trips to the toilet, weight loss and tiredness. Conversely, if the blood glucose level is too low a pupil may display symptoms which include hunger, drowsiness, glazed eyes, shaking, disorientation and lack of concentration.

### **2. Medication and control**

Diabetes cannot be cured but it can be treated effectively by tablets, injections of insulin and by following an appropriate diet. The aim of the treatment is to keep the blood glucose level close to the normal range so that it is neither too high (hyperglycaemia) nor too low (hypoglycaemia). All pupils with diabetes will require an individual health care plan.

In most cases, pupils will have their insulin injections before and after school, but some pupils may require an injection at lunchtime. If a pupil needs to inject whilst at school he/she will know how to undertake the procedure without adult supervision. However, the pupil may require privacy in which to administer the injection. Some pupils may also need to monitor their blood glucose levels on a regular basis, and again, privacy may be required for this procedure.

An essential part of the treatment of diabetes is an appropriate diet whereby regular meals and good food choices help to keep the blood glucose level near normal. A pupil with diabetes will have been given guidance on food choices which should be reduced in sugar and fat but high in starch. Most pupil with diabetes will also need to eat snacks between meals and occasionally during class time. These snacks usually consist of cereal bars, fruit, crisps or biscuits. It is important to allow a pupil with diabetes to eat snacks without hindrance or fuss and to ensure that the lunchtime meal is taken at a regular time.

It is also important that the School should establish with the pupil and his/her parents where supplies of fast acting sugar can be kept in case of a hypoglycaemic episode. The issue of close communication between parents and the School is fundamental to the care of pupils with diabetes, as many aspects of growth and development will have an impact on their diabetes control. It is the parents' responsibility to ensure that any medication retained at the School is within its expiry date.

Following discussion with the pupil and his/her parents, individual decisions should be made as to whether to provide basic information on a pupil's condition to his/her peer group so that they are aware of their classmate's needs.



### **3. Managing pupils with diabetes**

Staff should be aware of those pupils under their supervision who have diabetes.

If a pupil feels unwell, the School Nurse should be contacted for advice.

A pupil should always be accompanied to the Health Centre if sent by a member of staff.

### **4. Trips**

Staff should ensure that all pupils going on trips carry their medication with them.

Staff must give consideration to the safe storage of medication.

Staff supervising the trip must be aware of the pupil's condition and of any relevant emergency procedures.

### **5. Hypoglycaemia (Low blood sugar)**

Common causes:

- A missed or delayed meal or snack
- Extra exercise
- Too much insulin during unstable periods
- The pupil is unwell
- The pupil has experienced an episode of vomiting.

Common symptoms:

- Hunger
- Drowsiness
- Glazed eyes
- Shaking
- Disorientation
- Lack of concentration

Get someone to stay with the pupil - call for the School Nurse (if they are hypo, do not send them out of class on their own, their blood sugar may drop further and they may collapse). Give fast acting sugar immediately (the pupil should have this), e.g.: Lucozade; Dextrose tablets, Glucogel.

Recovery usually takes ten to fifteen minutes. Upon recovery give the pupil some starchy food, e.g. a sandwich. Inform parents of the hypoglycaemic episode. In some instances, it may be appropriate for the pupil to be taken home from school. In the unlikely event of a pupil losing consciousness, call an ambulance.

## **6. Hyperglycaemia (high blood sugar)**

Hyperglycaemic episodes occur when the blood glucose level is too high.

Pupils may display the following symptoms:

- Excessive thirst.
- Passing urine frequently.
- A change of behaviour.
- Vomiting.
- Abdominal pain.

Care of pupil in a hyperglycaemic episode:

- Do not restrict fluid intake or access to the toilet.
- Contact the School Nurse and/or parents if concerned.
- Liaise with the Community Diabetic Nurse regarding management of the condition

## **Appendix 7**

### **1. What is Epilepsy?**

Epilepsy is a common condition that affects the brain and causes frequent seizures. Seizures are bursts of electrical activity in the brain that temporarily affect how it works.

Seizures can affect people in different ways, depending on which part of the brain is involved. Possible symptoms include:

- uncontrollable jerking and shaking – called a "fit"
- losing awareness and staring blankly into space
- becoming stiff
- strange sensations – such as a "rising" feeling in the tummy, unusual smells or tastes, and a tingling feeling in your arms or legs
- collapsing

### **2. Medication**

- medicines called anti-epileptic drugs – these are the main treatment for epilepsy.

### **3. What to do if a pupil has a seizure**

- If a pupil is found to be having a seizure it is important NOT to restrain them in any way, simply ensure they are safe by clearing the surrounding area to avoid further injury.
- Note the time the seizure starts and any triggers
- Contact the medical centre for guidance/assistance
- Once the seizure has finished place the person in the recovery position.
- If the pupil is known to have seizures then an ambulance is only required if the seizure lasts more than 5 minutes).
- Provide advice and support to any pupils/staff that witnessed the seizure.

#### **4. Trips**

Staff should ensure that all pupils going on trips have their anti-epileptic medication with them.

Staff must give consideration to the safe storage of the medication.

Staff supervising the trip must be aware of the pupil's condition and of any relevant emergency procedures.

#### **Appendix 8**

##### **Telephone Numbers**

School Nurse Mobile Number RGSW	07880439473
School Nurse Health Centre RGSW	01905 725364
School Nurse RGSW Switchboard	Ext 222
RGS The Grange	01905 451205
RGS Springfield	01905 24999