

Bradford Grammar School

First Aid, Medication and Chronic Illness Guidance

This guidance applies to the whole school including EYFS and is published to parents, pupils and employees.

This guidance has regard to the Department for Education Guidance: First Aid in Schools, 2014; The Education (School Premises) Regulations, 1996; Health & Safety at Work Act, 1974.

1. Introduction

The Headmaster is responsible for putting the School's First Aid, Medication and Chronic Illness policy and guidance into practice and for developing detailed procedures. The Headmaster also has a responsibility to make sure that parents are aware of the School's 'Health and Safety' policy, including arrangements for first aid.

Pupil records and information regarding specific pupil's medical needs are required by the School. All personal information is kept in accordance with the School's 'Data Protection' policy.

2. Aims

- To ensure that suitable first aid provision is available at all times whilst pupils and employees are on the School premises, and whilst off the premises on School visits.
- To ensure that the School has robust procedures for the storage, handling, and disposing of medication.
- To ensure chronic illnesses and medical conditions experienced by pupils are managed appropriately.

3. Objectives

- To provide appropriate first aid training for employees and supply sufficient first aid kit and equipment.
- To inform employees and parents of the School's first aid arrangements, and procedures for managing medications, medical conditions, and chronic illness.
- To maintain accident records and to report to the Health and Safety Executive (HSE) as required under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 and 2013 (RIDDOR).
- To provide detailed guidelines for employees on how to care for pupils with chronic health conditions.

4. Personnel

The Headmaster is responsible for the health and safety of everyone on the premises. This includes employees, pupils, and visitors, including contractors.

There is a designated Health & Safety Officer (H&S Officer). The H&S Officer reports to the Estates Manager, who has overall operational responsibility for Health and Safety.

5. Named First Aiders

The recommended number of certified First Aiders is one per 100 people on site.

There is always a School Nurse or First Aider on site and a list of first aiders and locations can be found on SharePoint, in the Health and Safety shared area. This list is also accessible via the First Aid icon found on the computer desktops:



- First Aiders must have undertaken up to date training by an accredited trainer.
- There will be a regular review of their qualification status and course attendance will be organised as appropriate. At School, the main duties of a First Aider are to give immediate help to injured or ill pupils, employees and visitors to the School with the aim of preserving life, and when necessary, to ensure that an ambulance or other professional medical help is called.
- The School will ensure the level of first aid provision is appropriate for each area/department.
- When considering how many first aid personnel are required, the Headmaster will also consider adequate provision for lunchtimes and breaks.
- The pastoral team ensure that pupils are informed of how to seek first aid assistance in an emergency.
- All trip leaders submitting educational visit approval forms must consider the level of first aid provision required in relation to the identified risks. The employee list included in the form should identify who is first aid trained and to what level. This enables the H&S Officer to assess the suitability of the first aid provision.
- An employee with paediatric first aid (PFA) training is always on site whilst EYFS pupils are present (07.30 – 18.00) and at least one paediatric first aider accompanies EYFS pupils when they are off site. All colleagues working in EYFS who obtained a Level 3 qualification on or after 30 June 2016, must hold either a full PFA or emergency PFA certificate within 3 months of starting work to be included in colleague to child ratios.

6. Qualifications and Training – First Aid

- First Aiders will undertake first aid training that is appropriate for their role.
The School will keep a record of First Aiders and certification dates. These records are normally kept by the HR department and the H&S Officer.

7. First Aid Kit Provision

There are first aid kits around the School in main areas and departments. Employees have a responsibility to know where their department's first aid kit is kept. Employees must report low stock to the H&S Officer to allow for restocking throughout the year. Termly checks will be initiated by the H&S Officer and carried out by nominated employees. There will also be periodic spot checks made by the H&S Officer

- All high-risk areas, such as science rooms, games areas, theatres, minibuses and play areas have close or immediate access to first aid kits.

- All members of the Sports Department have been allocated first aid kits and must have ready access to them while doing any form of sporting activity. A School Nurse or additional First Aider can be called in an emergency. Restocking of sports first aid kits is facilitated by the School Nurse upon request, and the H&S Officer sends an annual reminder to check stock at the start of each school year.

Sports fixtures held outside the school day must have first aid provision in place pitch side (e.g. a First Aider in attendance at weekend rugby matches) as per RFU guidelines. This is organised by the Director of Sport.

- All first aid containers must be clearly marked as such.
- The School acknowledges that transport regulations require that all minibuses and public service vehicles used either as an express carriage or contract carriage have a first aid container on board.

8. Spillages and Infection Prevention

Spillages of body fluids may present an infection risk to others and must be dealt with immediately.

- It is the responsibility of employees to alert the cleaning or Estates team to assist with spillages of bodily substances.
- Protective equipment is provided for the cleaning and Estates team and is also available in the School Nurses' room. Disposable gloves and a disposable apron should be used.
- The Estates team have a risk assessment in place for the clearing of bodily substances which will be followed in such instances.
- The pupil or other person involved in the incident should be offered the appropriate assistance, assessment, and referral.
- Various measures are employed by the nurses to minimise risk of infection. Regular cleaning, handwashing and disposable gloves are all utilised. A quarantine bathroom and waiting area is also available.

9. Recording Accidents

- Major and minor injuries sustained by pupils, and occasions where first aid is given, are recorded on CPOMS; this will be done by the relevant employee(s), for example, the employee who witnessed the injury or gave first aid, or by the School Nurse.
- Details recorded should include:
 - the date, time, and place of incident;
 - the name and form group of the pupil;
 - details of their injury/illness including what first aid was given, and what happened to the person immediately afterwards;
- If a separate accident form is warranted due to the circumstances of the injury, but has not been received, the H&S Officer will request one.
- Accident report forms are available on SharePoint in the Health and Safety shared area and are automatically sent to the H&S Officer, Nurses, and Estates Manager upon completion.
- For employees, all injuries sustained during the course of their duties must be recorded on an accident form.
- For pupils, accident report forms should normally be completed if an injury is sustained. Exceptions to this are sporting injuries occurring during standard play; these do not normally

require a separate accident form to be completed, providing the details are recorded on CPOMS. However, the Health & Safety Officer will request a form if deemed appropriate.

- Any pupil involved in a significant incident or accident will be seen by the School Nurse for assessment.
- All visits to the School Nurse will be documented on the pupil's record.
- The School must ensure that readily accessible accident records, written or electronic, are kept for a minimum of seven years.
- Accident statistics will be recorded by the H&S Officer and made available to the Senior Leadership Team (SLT) at least every term and upon request. The standard method for providing this information is via the H&S Officer's, Information and Consultation Forum (ICF) and Board reports.
- Accident records can be used to help the Senior Leadership Team (SLT), H&S Officer and School Nurse to identify trends and areas for improvement, training or other needs and the records may be useful for insurance or investigative purposes.
- Parents will be informed by a School Nurse or the employee who dealt with the pupil by a phone call, email, letter, or by the pupil concerned depending on the age of the pupil, type of injury and resulting treatment.

With regard to head injuries, a concussion register is maintained by the School Nurses, and accessible by all employees. Any pupils assigned to the GRAS protocol are recorded on this register, along with their progress through the protocol. Further information on management of head injuries can be found in the school's Head Injuries Guidance.

10. Pupil Medical Records

- All pupils must be registered with a UK based general practitioner (GP).
- This information will be ascertained upon the pupil's joining of the School, and the School will document the information on the pupil's record.
- Records will be updated by the School Office upon notification from parents.

11. Calling an Ambulance

- Prior to requesting an ambulance, the pupil/person in need will ideally be seen and assessed by the School Nurse or a First Aider wherever possible.
- However, it is the responsibility of each employee to decide on their own coping abilities, and if they are concerned about the welfare of the pupil/person, i.e., it is believed that the injury is severe and needs urgent medical attention then it is appropriate to request an ambulance.
- If an ambulance is requested, reception will be informed, and an employee will be alerted to guide the ambulance to the correct area of the School.
- The pupil's parents/guardians will be informed immediately.
- Ambulance callouts must be recorded on CPOMS and the accident form (if one is required).

12. RIDDOR Reporting

RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations, 1995 and

2013) requires the School to report all reportable incidents to the HSE www.hse.gov.uk/riddor. All injuries can be reported online but fatal injuries can be reported by telephone 0345 300 99 23 Monday to Friday 08.30am – 5pm.

The School will keep the completed RIDDOR record of any reportable injury, disease or dangerous occurrence, which will include: the date and method of reporting; the date, time and place of the event; personal details of those involved and a brief description of the nature of the event or disease. This record can be combined with other accident records (as above).

13. RIDDOR Reportable Incidents

- Accidents involving pupils, employees and visitors resulting in fatality must be reported immediately. This initial report must be followed up within 10 days with a written report, for example, if the initial report was made by phone.
- Other reportable accidents do not need immediate notification, but they must be reported to the HSE within 15 days.
- For pupils, the circumstances in which accidents must be reported are very particular, and are detailed here: <https://www.hse.gov.uk/pubns//edis1.pdf>
- For employees and visitors, accidents are reportable when they relate to the School's management of its equipment, machinery, substances and the design or condition of the premises, **and** the person suffers a specified injury. Specified injuries include fractures for example. Specific details are available here: <https://www.hse.gov.uk/riddor/reportable-incident.htm>. A work-related injury or disease that leads to an excess of 7 days of absence from work (weekends included) is also notifiable to the HSE under RIDDOR.

The Headmaster is responsible for ensuring that reporting under RIDDOR happens but may delegate the duty to the H&S Officer.

14. Support for Pupils with Chronic Medical Conditions

The School aims to offer a full and supportive curriculum to all of its pupils.

To assist employees and parents to meet the needs of pupils with chronic conditions, the School has guidelines for the following conditions:

- Anaphylaxis (see Appendix 1)
- Asthma (see Appendix 1)
- Diabetes (see Appendix 1)
- Epilepsy (see Appendix 1)
- Self-harm (referenced in the Pupil Wellbeing Policy)
- Eating disorders (referenced in the Pupil Wellbeing Policy)

The School Nurses work within a code of practice set out by the Nursing and Midwifery Council (NMC).

The School adheres to 'homely medication' guidelines, which can be found in Appendix 2.

15. Risk Assessment

Any employee who is taking medication that has the potential to affect their ability to carry out their role within School must inform the H&S Officer and their line manager.

Where a pupil or employee cannot weight bear on their legs due to a medical condition, as general guidance in the short term, they will not be allowed into school until such a time when they can weight bear, or a medical practitioner says that they can. A PEEP may be implemented upon their readmittance to site. A separate guidance document exists for PEEPs, and they can be implemented for a range of purposes related to mobility.

The School Nurses carry out risk assessments for pupils where appropriate to ensure their safety whilst on site, for example, if injured or suffering from a chronic medication condition. The H&S Officer carries out risk assessments for employees under the same circumstances.

16. Administering Medicine to Children in Early Years Education

Pupils must only take medication under adult supervision and only with prior consent of a parent/guardian. All details will be recorded, and a family member notified on the same day or as soon as is reasonably practicable.

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/guardian, the Early Years Lead 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. EYFS pupils attending the nurse will be escorted by an employee or the pupil will be visited in the Reception/Year 1 building.

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;
- the medication is in date;
- the medication is in its original container clearly marked with name, dosage and frequency.

First Aiders should ensure that a CPOMs record is kept of the medication administered, including the date and time.

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 Reception/Year 1 Office out of reach so children cannot access it.

The following are kept in classrooms for rapid access in an emergency situation. They are stored out of reach of children.

- Clearly labelled Adrenaline Auto Injectors such as Epipen, Jext or Emerade 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 the Junior School Office.

APPENDIX 1

ADRENALIN AUTO INJECTOR (AAI) EPIPEN/ANAPHYLAXIS GUIDELINES

Introduction

Purpose

- To promote a consistent approach in the management of life-threatening allergies for employees and pupils.
- To develop strategies that will help to enhance the level of protection in place for children with life-threatening allergic reactions.
- To create a safer place for children to eat, learn, and play;
- To heighten employee awareness of the recognition of signs and symptoms of **anaphylaxis**, that will aid the timely activation of the emergency medical aid for those individuals known or not previously known to experience anaphylactic reaction.
- To provide direction for School employees in the management of severe respiratory distress/anaphylaxis.

Training of Employees

While it is recognised that some employees will be concerned about the responsibility of administering an AAI it is essential that all employees attend regular updates and training, to enable them to make an informed decision about appropriate treatment.

The School Nurses will identify relevant topics to be covered during employee training and deliver this training annually during employees briefing. The PowerPoint presentations used by the School Nurses to train employees are available in SharePoint. Employees who join the School during the academic year are also given this specific training as part of their induction.

Training will include possible causes of reaction, warning signs, action appropriate to symptoms and the use of the two different AAI which include EpiPen and Jext.

The School Nurse will inform all employees who have a child in their class with an AAI as soon as possible, at the start of each academic year, via the medical folder in SharePoint.

In School, pupils should carry two AAIs. Classroom teacher responsibilities are as follows:

- Review (form tutors) any child's Individual Health Care Plan (IHCP) with the School Nurse.
- Never question or hesitate to act if a pupil reports signs of an allergic reaction.
- Ensure familiarity with the use of an AAI, and where the medication is stored so it can be quickly accessed.
- break and lunchtime.
- avoid cross contamination of foods.
- reinforce hand-washing before and after eating, whenever possible; and
- encourage the child to take responsibility in the dining hall.
- If a bee/wasp gets in a classroom, any pupil with this allergy must immediately remove themselves from the room.

It is parents' responsibility to make sure their children have two up-to-date AAIs with them.

Employees' responsibilities

Encourage pupils with allergies to:

- take as much responsibility for avoiding allergens as possible (age appropriate).
- not trade or share food.
- wash hands before and after eating.
- learn to recognise symptoms of an allergic reaction (work with School Nurse).
- promptly inform an adult as soon as accidental exposure occurs or symptoms appear.
- Have two AAIs with them.
- carry their own two AAIs (age appropriate).
- read food labels; and
- speak to the School Nurse and/or the Form Tutor to assist in identifying issues related to the management of the allergy in School.

Executive Chef responsibilities:

- List of those pupils with allergies is in SharePoint and a copy is kept in the allergens and dietary needs folder in the kitchen.
- To ensure all catering employees are aware of how to contact the School Nurses on site.
- To make sure all catering employees never question or hesitate to act if a pupil reports signs of an allergic reaction.
- Ensure each member of the catering team are familiar with the use of an AAI, including regular training, updates and familiarisation on the administration of AAIs by the nursing team.
- Read all food labels and recheck routinely for potential food allergens, maintaining contact information for manufactures of food products.
- The allergy to nuts is the most common high-risk allergy however, it is important to ensure that all allergies and intolerances are treated equally as the effect to the individual can be both life-threatening and uncomfortable, if suffered.
- Provide information that is accessible regarding ingredients and menu and constantly review.
- To provide periodic training for all catering employees, that includes food safety and allergen training.

Parental responsibility

- It is anticipated that parents will be responsible for their child until arrival on the School site. Should they use the School bus the parent(s) must contact the company regarding the relevant company's policies.
- Inform the School Nurse of a child's allergies prior to joining the School (or as soon as possible after a diagnosis).
- Discuss the individual health care plan with the School Nurse.
- Consider providing the child with a medical alert bracelet/card.
- Provide the School Nurse with a medical practitioner's statement if a child no longer has allergies and update annually or as any change occurs to enable the School to add or remove information from the child's records.
- To provide, and keep up to date, two AAIs for the child to carry on their person.

Individual health care plan

- As part of the enrolment process, the parent/guardian of children with allergies or pre-existing anaphylactic reactions as well as other medical problems will meet the School Nurse to develop an individual health care plan, initiate medication orders, medication administration plans and parent/guardian authorisations for each medication received.
- A recent photo of any pupil with an AAI order will be placed on the health care plan. There is also a Whole School Nurse's AAI list of pupils in SharePoint.

School trips – School responsibility

- School Nurses will provide all contact numbers/information enclosed, for the trip leader to carry. It is the responsibility of the trip leader to approach the nurses for advice and medical support about pupils on a trip.
- The trip leader will ensure that the parent/guardian's location and phone numbers are where they can be reached in the event of an emergency. This teacher will also have considered how to respond in the event of an emergency.
- A mobile phone and/or another communication device must be available on the trip for emergencies.
- Children will be requested to avoid allergens on the School bus.

Tips and advice for parents when planning educational visits and fixtures

The Anaphylaxis Campaign is aware that, for many severely allergic children, going on School trips can pose many challenges and obstacles. Below are some tips which the School hopes will make planning for School trips easier for everyone involved: employees, parents and, of course, the allergic children. If parents have any comments or would like to add their tip to the list they should email nurse@bradfordgrammar.com. They may also like to contact the EpiPen website via email info@allergyinschools.org.uk.

Before the trip

- Prepare well in advance.
- If appropriate, contact the employees at the destination before the trip to make sure that they are aware of the child's allergy. Send them an information sheet about allergies.
- Make sure the teacher organising the trip is fully aware of the child's allergy. If the trip is abroad, the School can help with translation cards.

Food/catering tips

The trip leader or another employee on the trip should make sure the child introduces themselves to the chef/catering employees so that the allergic child has a point of contact.

Medication/treatment protocol tips

The trip leader should ensure that accompanying employees are informed and feel comfortable with dealing with the allergy. If they have not received training, offer to contact the School Nurse to arrange training before the trip departs.

The trip leader must produce a list of the type of medicine required by each child, and the list should also include details of the dosage and frequency of its administration.

The School Nurse must go through the 'tips for the pupils' (see below) with those pupils who need the information.

Tips for the pupils

- Make sure people around the pupil know about their allergy.
- If the pupil is in any doubt about what they are eating, they should politely but firmly refuse.
- The pupil should take snacks with them in case there is something they cannot eat. The pupil should pack a few biscuit/bars etc. as it is often the puddings that are tricky. Small packets of cereals are good standbys for breakfasts.
- Do not let it stop the pupil having fun!

ASTHMA GUIDELINES

The School:

- recognises that asthma is a widespread, serious but controllable condition and the School welcomes all pupils with asthma;
- ensures that pupils with asthma can and do participate fully in all aspects of School life, including art lessons, PE, science, educational visits and other out-of-hours School activities;
- recognises that pupils with asthma need immediate access to reliever inhalers;
- keeps a record on SharePoint of all pupils with asthma and the medicines they take;
- ensures that the whole School environment, including the physical, social, sporting and educational environment, is favourable to pupils with asthma;
- ensures that all employees (including supply teachers and support employees) who come into contact with pupils with asthma know what to do in an asthma attack;
- will work in partnership with all interested parties including the School's Governing Body, all employees, School nurse, parents/carers, doctors, nurses and pupils to ensure the guidance is planned, implemented and maintained successfully.

Additional emergency inhalers are available at designated points within the asthma kits; a list of these can be found via the First Aid icon on the School's desktop.

Employees are not required to administer asthma medicines to pupils (except in an emergency). Employees who administer asthma medicines are insured by the School. All employees will let pupils take their own asthma medicines as necessary.

Exercise and activity – PE and Games

- Taking part in sports, games and activities is an essential part of School life for all pupils. All teachers know which children in their class have asthma and all PE teachers at the School are aware of which pupils have asthma from the School's medical lists on SharePoint.
- Pupils with asthma are encouraged to participate fully in all PE and games lessons. PE teachers will remind pupils whose asthma is triggered by exercise to take their reliever inhaler before the lesson, and to thoroughly warm up and down before and after the lesson. It is agreed with PE teachers that each pupil's inhaler will be labelled and kept close the site of the lesson. If a pupil needs to use their inhaler during a lesson they will be encouraged and allowed to do so.
- Classroom teachers follow the same principles as described above for games and activities involving physical activity.

Out-of-hours sport

- There has been a large emphasis in recent years on increasing the number of children and young people involved in exercise and sport in and outside of school. The health benefits of exercise are well documented, and this is also true for children and young people with asthma.
- PE teachers, classroom teachers and out-of-hours School sport coaches are aware of the potential triggers for pupils with asthma when exercising, tips to minimise these triggers and what to do in the event of an asthma attack. All employees including sports coaches are

provided with training from the School Nurse, who has been trained in the emergency treatment of asthma.

School environment

- The School does all that it can to ensure that the School environment is favourable to pupils with asthma. The School does not keep furry or feathery animals and has a definitive no-smoking policy whilst on the School site. As far as reasonably practicable, the School does not use chemicals in science and art lessons that are potential triggers for pupils with asthma. Pupils with asthma are encouraged to leave the room and go and sit with the School Nurse if particular fumes trigger their asthma.

Asthma attacks

- All employees who come into contact with pupils with asthma know what to do in the event of an asthma attack. Guidance is provided via the medical emergencies PowerPoint presentation stored in SharePoint.
- The PowerPoint presentation used by the nurses to train employees is available on SharePoint. Employees joining during the academic year are also given training as part of their induction.

Headmaster, H&S Officer/School Nurse

The Headmaster, H&S Officer and School Nurses have a responsibility to:

- ensure the School's asthma guidance is in line with national guidance,
- liaise between interested parties – School employees, School nurses, parents/carers, governors, the School health service and pupils;
- ensure that the plan is put into action, with good communication of the guidance to everyone
- ensure that the guidance is updated as necessary;
- work with the HR team and Assistant Head (Development), to assess the training needs of employees and arrange for them to be met;
- ensure that the School Nurses check and maintain the medical lists in the medical folders, on SharePoint;
- regularly monitor the guidance and assess how well it is working.

School employees

All School employees have a responsibility to:

- understand the School asthma guidance;
- know which of the pupils they come into contact with have asthma;
- know what to do in the case of an asthma attack;
- allow pupils with asthma immediate access to their reliever/inhaler;
- ensure that parents or guardians are informed if their child has had an asthma attack;
- ensure that parents or guardians are informed if their child appears to be using more reliever/inhaler than normal;
- ensure that pupils have their asthma medicines with them when they go on an educational visit which includes sports fixtures;
- ensure that pupils who have been unwell are able to catch up on missed academic work;
- be aware that a pupil may be tired because of night-time symptoms;

- liaise with parents or guardians, and Learning Strategies department if a child is falling behind with their academic work because of their asthma.

Sports Employees

Sports employees have a responsibility to:

- understand asthma and the impact it can have on pupils. Pupils with asthma should not be forced to take part in physical activity if they feel unwell. They should also not be excluded from activities that they wish to take part in if their asthma is well-controlled;
- ensure that pupils have their reliever inhaler close by before taking in part in any physical exercise and are allowed to use it if needed;
- if a pupil has asthma symptoms while exercising, allow them to stop, take their reliever/inhaler and as soon as they feel better allow them to return to the activity. (Most pupils with asthma should wait at least five minutes before doing so);
- ensure that pupils with asthma always warm up and down thoroughly.

School Nurses

School Nurses have a responsibility to:

- update the School asthma guidance and register, and to check the expiry date on spare relievers/inhalers;
- keep a set of emergency asthma inhalers stored around the School site;
- There is a medical emergencies PowerPoint presentation saved on SharePoint which includes what to do in the case of an asthma attack.
- provide information about where the School can get training if it is not able to provide specialist training itself.

DIABETES GUIDELINES

The School:

- recognises that diabetes is a lifelong condition and offers pupils support to fulfil their potential;
- ensures that pupils with asthma can and do participate fully in all aspects of School life, including art lessons, PE, science, educational visits and other out-of-hours School activities;
- recognises that pupils with diabetes may need a private area to inject/blood test;
- keeps a record of all pupils with diabetes;
- ensures that the whole School environment, including the physical, social, sporting and educational environment offers full support as necessary;
- ensures that School Nurse informs all employees who come into contact with pupils with diabetes of what to do in a hypo or hyper attack; and
- will work in partnership with all interested parties including the School's Governing Body, all employees, School nurse, parents/carers, employers of school employees, doctors, nurses and pupils to ensure the guidance is planned, implemented and maintained successfully.

Parents or guardians are asked to ensure that the School is provided with any necessary equipment to support the pupil in an emergency. The School nurse will keep spare blood sugar monitoring equipment and glucose. A box with spare equipment and insulin is kept locked in the medical fridge in the School Nurses' room.

Exercise and activity – PE and games

- Taking part in sports, games and activities is an essential part of School life for all pupils. All teachers know which children in their class have diabetes and all PE teachers at the School are aware of which pupils have diabetes from the School's medical lists.
- Pupils with diabetes are encouraged to participate fully in all PE and games lessons.
- Emergency 'hypo boxes' the School Nurses' room.

Hypoglycaemic attacks

- All employees who come into contact with pupils with diabetes know what to do in the event of an attack.
- In the event of an attack the School follows the procedure outlined by the pupil's individual health care plan.

School employees

All School employees have a responsibility to:

- understand the guidance on diabetes;
- know which pupils they come into contact with who have diabetes via the medical lists in the medical folder on SharePoint;
- know what to do and how to recognise a 'hypo' and 'hyper' attack;
- call the Nurse if there are any concerns;
- inform parents or guardians if their child has had an attack;
- ensure that pupils have their glucose/insulin with them when they go on an educational visit;
- ensure that pupils who have been unwell catch up on missed academic work; and

- liaise with parents or guardians, the School Nurse and Learning Support department if a child is falling behind with their academic work because of their diabetes.

Sports Employees

Sports employees have a responsibility to:

- understand diabetes and the impact it can have on pupils.
- pupils with diabetes should not be forced to take part in physical activity if they feel unwell and should be assessed for potential symptoms of low blood sugar.

School Nurses

School Nurses have a responsibility to:

- update the School's diabetes guidelines;
- support the needs of each pupil;
- provide any appropriate employee training.

A pupil's NHS diabetic team have responsibility for the management and monitoring of the pupil's diabetes and for the training of school employees. They offer training to all school employees involved with the pupil whilst in school.

The Bradford Grammar School Nurses are responsible for supporting the care needed by the pupil whilst in School. The BGS nurse will also monitor the expiry of spare backup medication and equipment.

EPILEPSY GUIDELINES

The School:

- recognises that epilepsy is a lifelong condition and offers pupils support to fulfil their potential;
- ensures that pupils with asthma can and do participate fully in all aspects of School life, including art lessons, PE, science, educational visits and other out-of-hours School activities;
- recognises that pupils with epilepsy may need support with various aspects when dealing with their condition;
- keeps a record of all pupils with epilepsy;
- ensures that the whole School environment, including the physical, social, sporting and educational environment offers full support as required, and privacy in the event of an episode;
- ensures that School Nurses communicate to all employees who come into contact with pupils who have epilepsy, have an understanding about their needs;
- will work in partnership with all interested parties including the School's Governing Body, all employees, School Nurses, parents/carers, employers of employees, doctors, nurses and pupils to ensure the guidance is planned, implemented and maintained successfully.

Parents/carers are asked to ensure that the School is provided with any necessary equipment to support the pupil in an emergency.

Exercise and activity – PE and Games

- Taking part in sports, games and activities is an essential part of School life for all pupils. All teachers know which children in their class have epilepsy and all PE teachers at the School are aware of which pupils have epilepsy from the School's medical lists.
- Pupils with epilepsy are encouraged to participate fully in all PE and games lessons.

Teachers are aware of high-risk sports and take extra care to assess each individual pupil as appropriate.

Epileptic episodes

- All employees who come into contact with pupils with epilepsy are informed by the School Nurses what to do in the event of a seizure as explained in the PowerPoint presentation on SharePoint.

School employees

All employees have a responsibility to:

- understand the School guidance;
- know which pupils they come into contact with who have epilepsy;
- know what to do and how to recognise a seizure;
- inform parents or guardians if their child has had an episode;
- ensure pupils who have been unwell catch up on missed academic work;
- liaise with parents/carers, the School Nurse and special educational needs coordinators or Learning Support & Special Educational Needs Department if a child is falling behind with their academic work because of their epilepsy.

School Nurses

School Nurses have a responsibility to:

- update the School's epilepsy guidelines.
- support colleagues and the needs of pupils.

School nurses in the School hold responsibilities for the management and monitoring of pupils' epilepsy and for providing employee training.

APPENDIX 2

THE SCHOOL'S HOMELY MEDICATION GUIDELINES

Principles of safe and appropriate handling of medicines:

‘Homely medications’ refers to over the counter (OTC) medications, and medications brought in by pupils from home, whether OTC or prescribed.

The School has strict guidelines for the administration of homely medication and often contacts parents if symptoms are new or unexpected (e.g. hay fever with no previous record of the condition). The School always tries the basic and minimum treatments first and is very aware that sometimes physical symptoms are a sign of anxiety, especially for new pupils, and that appropriate contact should be made with the parents and teachers if relevant. If in doubt parents will be contacted and asked for verbal consent.

Administering medicines –

Employees should only administer medicines to pupils that they have been trained to give. According to the law (The Medicines Act 1968) medicines can be given by a third party (e.g. a School Nurse), to the person that they were intended for when this is strictly in accordance with the directions that the prescriber has given. The School will ensure such training is provided before allowing an employee to administer any medication.

The School Nurses keep a stock of OTC medications such as allergy medication and painkillers. A record is kept of what is given to whom and when, so that administration can be tracked by the Nurses. This information may indicate a persistent problem that should be referred to a GP.

Pupils should not carry medication when in school; if a pupil needs to take medication during the school day, then they must bring it to the Nurses. Suitable arrangements for this will be made with the Nurses. Pupils will be informed of this procedure by their form tutors.

All medication brought in must be in its original packaging, with the prescription label visible if the medication is prescribed. An email or accompanying letter should be sent by the parent explaining the reasons for medication and detailing the relevant information.

It is the School’s position that the Nurses will not administer overseas or homeopathic medication. Pupils must not bring these medications into school and if parents request them to be issued, they will not be.

If necessary, prior to an educational visit, additional information is sought by the Trip Leader about medication required for pupils on the trip. For controlled substances, parents should provide appropriate, lockable storage that can be taken on the trip.

Sexual Health

School Nurses give out contraception, advice, and can refer to external support where appropriate. Sexual Health guidance and education is delivered through the Personal Development curriculum in an age-appropriate manner throughout the School.

Storage

All medications are kept in a locked cupboard in the Medical Room. Keys for the cupboard are kept by the School Nurse. A spare set is kept by the Assistant Head (Pastoral) and in the Key Safe in the School Nurses' Office. Access to the Nurses suite of rooms is via sub master or master key only; these keys are high security and as such are only held by authorised employees.

Controlled medication is stored in a separate securely locked cupboard within the Nurses Office. A secure medications fridge is also present in the Nurses office, and the Nurses check and record the temperature daily.

Pupils should collect any remaining medication at the end of the school day to return it home.

All medication brought into School by employees, whether prescribed or over the counter, must be stored securely and inaccessible to pupils. This is outlined in the employees code of conduct. Any colleagues who work in EYFS and are taking medication must store it outside of the classroom setting.

Disposal

Disposal of medication, such as that which has expired, is excess, or is no longer needed, is carried out by the Nurse, by taking the medication to a local pharmacy for appropriate disposal. The pharmacy will record this disposal, and those records are kept in the Nurses office.

Records

Records will be kept of pupil attendance for medication in the School Nurses' medicine book and on CPOMS. Parents will be informed via phone call or email if medication is administered to Junior School pupils.

The medicine book is used to record and track pupils' own medications and to track general stock of school medication. Nurses record stock levels, pupil medications, and expiry dates in the book. The order forms are stored separately but available upon request. The medicine book and order forms are audited by H&S Officer termly.

Training

School Nurses receive clinical supervision at least annually via an external organisation. Safeguarding supervision takes place individually and as part of the pastoral team.

The School Nurses are appropriately trained in the handling and use of medication, and have their competence assessed. The School Nurses are regulated by the Nurses and Midwifery Council and re-register every three years. Training is undertaken at the School Nurses' Forum and via e-learning.

As a minimum, this training should cover:

- the supply, storage and disposal of medicines;
- safe administration of medicines;
- quality assurance and record-keeping;
- accountability, responsibility and confidentiality.

Chronic illness

- Pupils with chronic illness requiring regular medication, such as asthma or diabetes, should be encouraged, where possible, to self-administer the medication. Emergency treatment of conditions such as anaphylactic shock resulting from an allergic reaction may require the administration of adrenaline. As well as the nurse, employees are trained in the administration of the adrenaline auto-injector and training is updated on an annual basis. No employee is expected to be involved in a procedure that they do not feel competent to carry out, however.
- All children who may require an AAI shall keep them on their person. Emergency AAIs are kept in key areas around the School site as detailed via the First Aid desktop icon.
- The School Asthma Guidelines encourages pupils to administer their own medications. Emergency spare inhalers are located at designated points around the school site. Pupils should always carry their own inhaler with them.
- Those pupils with prolonged medical needs will have a health care plan which will be reviewed by the School Nurse at regular intervals and updated accordingly.

MEDICAL CONFIDENTIALITY

School Nurses, Doctors and the School Counsellor maintain client confidentiality in accordance with their professional codes of conduct, and fulfil an important role in allowing pupils, employees or parents to express a wide variety of problems, questions or emotions in complete confidence, regardless of age. However, they remain constantly aware of the family and School community. Pupils are strongly encouraged to talk about what is happening to them to family members and/or relevant employees in School.

If health professionals decide that they can legally justify breaking confidentiality, this is fully explained and discussed with the person concerned before any action is taken, and they are offered continued support.

Parents have a responsibility to update the School of any changes to their child's health in order for their care needs to be supported.

Communication

It is essential that contact information is up to date at all times. Parents are welcome to call the School Nurses by telephone and email at any time.

Although the School maintains confidentiality if requested, it encourages sharing information about treatment and follow-up care, between the pupil concerned, their parents, School Nurses and other relevant employees, and request that all parents keep the School informed about events that occur during holiday periods, especially if the pupil needs additional support upon their return to School.

Consent

Prior consent for administration of over-the-counter medication to pupils, (where necessary), is obtained from parents or guardians for all pupils admitted to the School. The School Nurse is

qualified to give medications within the School. Teachers may administer under their guidelines (for example on an Educational Visit). The School Nurse is able to accept the pupil's consent to give medication if they deem this appropriate and within the pupil's ability to meet the consent requirements (Fraser guidelines). However, teachers have a general duty to provide an enhanced duty of care, but they have no obligation to supervise or administer medications and may do so on a voluntary basis and only when there is appropriate permission on file, or in the case of emergencies.

Guidance reviewed by: Ashley Moss (H&S Officer) Hafsa Khan (School Nurse)
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