



Saint Martin's

First Aid and Administration of Medicine Policy

Authors	Gemma-Louise Deery and Helen Kirby
Version	4
Description of changes	Minor Changes
Date of Approval	September 2019
Review Date	September 2020

Aim: Saint Martin's School (the School) endeavours to meet its statutory duties to staff, pupils and visitors and ensures First Aid provision is available which can be administered in a timely and competent manner while people are on school premises and during School visits off site.

The School will follow guidance in Solihull Metropolitan Borough Council's "The Administration of Medicine in Schools" 2015 and the DfE guidance "Supporting pupils at school with medical conditions" 2015 and "First Aid in Schools" 2014.

Qualified First Aiders

- Appropriate First Aid training is offered to staff involved in higher risk areas, such as PE staff, staff responsible for the Duke of Edinburgh Award Scheme, the Science Technicians and those running residential trips. This training is updated every three years. A list of those with relevant training is held on the Safety Cloud
- The requirement for first aiders is assessed in a First Aid Risk Assessment carried out by the Deputy Head (Pastoral)
- A list of contact numbers for the School First Aiders is posted in all teaching areas and other key areas. This includes mobile numbers for Junior School and Senior School First Aiders (Appendix 1)
- Staff working with Early Years Foundation Stage (EYFS) pupils are trained in Emergency Life Support for Child and Infants (paediatric). At least one person who has a current paediatric First Aid Certificate must be on the premises and available at all time EYFS pupils are present and must accompany EYFS pupils on outings.

Dealing with Accidents and their Reporting

- If a First Aider is required to attend an accident, they can be contacted using the telephone numbers listed on the First Aid Notice, found in all sections of School. It may be appropriate to send another pupil to summons help. In the Senior School, pupils who ask to leave lessons to seek basic first aid should be given a yellow card indicating permission. In Junior School, pupils are sent in pairs to see the Teaching Assistant
- Only in exceptional circumstances should staff take a pupil to hospital in their own car; it is always safer to call an ambulance. If a parent/carer is unable to accompany their child, where at all possible a member of staff will accompany a child taken to hospital by ambulance and will stay until a parent/carer arrives. Health professionals are responsible for any decisions on medical treatment when a parent/carer is not available. Basic medical information about the pupil, identifying data and contact details should be taken to the hospital by School staff or given to the Health Professionals
- Minor accidents are to be dealt with by First Aid trained staff and the accident, injury and treatment must be recorded in an Accident Book located in Alice House, Junior School, Senior School, the Sixth Form and in the PE Department. EYFS parents are informed of any accident on the day (or as soon as reasonably practicable) and are required to sign an entry in the Accident book when informed of the accident. Accidents and near misses are also to be recorded on the School's Safety Cloud system. Accidents are to be reported termly to the Health and Safety Committee. Only trained staff can administer first aid to a pupil. Whilst in most circumstances the decision to call an ambulance is made by a trained First Aider, in an emergency any member of staff is expected to do this. Guidance on when to call an ambulance is below
- All pupils who suffer a head injury should report to a trained First Aider, or a First Aider will be summoned, who will assess whether a hospital visit is required. If this is not the case, in the Senior School the pupil will be asked to report back to the First Aider at regular intervals through the School day. In EYFS, Alice House and Junior School regular monitoring is put in place.
- The School complies with Health and Safety Executive Regulations regarding the reporting of injuries, diseases and dangerous occurrences. These are to be reported to the designated First Aider in each section of the school who will file a report to the

School's Health and Safety Consultants and the Health and Safety Executive (0845 300 9923) within ten days. Such injuries include all fractures, chemical or hot metal burns to the eye and electrical shocks and burns

- In EYFS, the School will notify Ofsted of any serious accident, illness or injury to, or death of, any child whilst in their care, and of the action taken. Notification will be made as soon as is reasonably practicable, but in any event within 14 days of the incident occurring. This is the responsibility of the Head of that School. The School will also notify local child protection agencies of any serious injury or death of, any child within their care and act on advice from agencies.

Calling an Ambulance

When it is deemed necessary, a responsible person should be told to summon an ambulance. If there is any doubt about the severity of the patient's condition an ambulance should be called, remembering to explain to which entrance the ambulance should come. Someone (not the only First Aider) should wait at the entrance to guide the paramedics on site.

Guidance on when to call an ambulance (in School and on trips)

This list is not exhaustive and is for guidance only and it is expected that those present will decide if an ambulance is needed for any injury

- **If a person loses consciousness**
- **Severe Allergic reaction** – especially with difficulty breathing or loss of consciousness (see further guidance below)
- **Severe Abdominal pain**
- **Severe Breathing difficulty**
- **Bleeding** – that does not stop after at least 10 minutes of continuous pressure or major uncontrolled bleeding
- **Choking** – especially if the person is unable to talk, cry or breathe
- **Convulsions or fitting** – if the person is still fitting after 5 minutes or if they have no history of convulsions (for example epilepsy or brain injury)
- **Severe Headache**
- **Pain (severe) after a fall or injury**
- **Diabetes** – if the person is not fully awake or not behaving normally
- **Open or serious fracture**
- **Dislocations**
- **Heart attack (suspected)**
- **Back pain (severe)**
- **Burns** – which are bigger than the size of a hand and/or cause severe pain that is not relieved with simple painkillers, or if the person has difficulty breathing
- **Stroke (possible)**
- **Motor vehicle accidents** – if you think someone has been injured
- **Drug overdose or poisoning** – whether you know for sure or just suspect an overdose
- **Electrical shock**
- **Trauma (injury)** – which is severe, especially to the head, neck, chest or abdomen – for example if the person is trapped in machinery
- **Meningococcal disease** – if symptoms indicate possible infection
- **Hypothermia or heat stress** – if severe

Informing parents

In Senior School parents are always to be informed, usually by telephone, when a child has suffered anything other than a minor injury, for example in the case of a severe burn, any head injury or a suspected fracture. In EYFS, Alice House and Junior School parents are telephoned in the first instance when a head or other injury has occurred and then a written slip is sent home to confirm the incident. In addition, the injured pupil will wear a first aid sticker indicating that she has received treatment and further discussion will take place with parents at the end of the day. In EYFS, parents will be asked to sign the Accident Book.

Medical Room

There are medical rooms in Senior School, Junior School and Alice House for

- (a) the medical examination and treatment of pupils; and
- (b) the short-term care of sick and injured pupils, which includes a washing facility and is near to a toilet facility

First Aid Kits

- **Anyone using First Aid supplies should notify the person responsible for that area. Please see below.**
- The School Receptionist is a qualified First Aider and is responsible for ordering replacement first aid supplies
- The contents of the first aid boxes are to be checked against the First Aid Kit Checklist and re-stocked as necessary and at least termly. A designated Teaching Assistant is responsible for the First Aid Kits in Alice House, Junior School, PE, Swimming Pool, SMARt and Music. The Assistant Receptionist is responsible for Sixth Form and Senior School. The Head of Maintenance checks Maintenance and minibuses and the Head of Catering is responsible for the kitchens. A complete list of the location of first aid boxes is posted in all rooms (Appendix 1). The person checking will complete the form at Appendix 3
- A designated First Aider in each section of the School is responsible for providing First Aid Kits for all out of school visits. This information is found on Trip Forms (VF3). In Alice House and Junior School, staff liaise with their designated First Aider regarding First Aid Kits for educational visits
- First Aid Kits in most areas are standard issue (Appendix 2). No creams, lotions or drugs, however seemingly mild, may be kept in First Aid boxes. Normal saline or water sachets may be included to irrigate wounds.
- Additional supplies are provided as required in specialised areas such as PE, Science, Food Technology and the School kitchen.

Awareness of hazards in subject teaching and educational visits

- Risk assessments should be completed by Heads of Departments for their teaching areas and form part of the School's Health and Safety documentation. It is the responsibility of Heads of Departments, through their staff, to ensure that pupils are informed of particular risks in their area. This applies especially to more high-risk areas such as Food, Technology, Science, Art and PE. The Science Department is required to complete risk assessments on all practical lessons and follow CLEAPPS guidance set out in the Science Health and Safety Policy.
- Where an allergic child is involved in a fixture at another school, the accompanying PE teacher will be fully aware of the child's condition. A member of staff trained in adrenaline administration must accompany the team and staff at the other school will be appropriately briefed.
- Risk Assessments are carried out for all Education Visits. These are kept by the Education Visits Co-ordinator. Where an allergic child is on a trip, at least one member

of staff will be trained in administering adrenaline and the location of an adrenaline pen will be checked and confirmed prior to departure.

Identification and treatment of pupils with particular medical conditions

- Parents are asked to provide the School with an updated Pupil Personal Information Sheet at the start of each School year and the School database is updated on receipt of this information. A copy of all forms, from all sections of the School, is kept in the School Office. Junior School and Alice House also hold copies of their forms. The designated First Aider in each section of the School will, on receipt of a Trip Form, provide the member of staff responsible for the visit with information about the medical conditions of all pupils going off site. Medical information is provided to the PE Department and posted in Staff Rooms. Parents are told that they must inform the School of any changes
- The Catering Manager is always informed about pupils suffering from severe allergic reactions and diabetes.

Dealing with spillages of bodily fluids

- Staff should call on the Maintenance Team to deal with any spillages of bodily fluids. A product called Sanitaine (or any equivalent product approved by the DFO) is to be used in such circumstances. Gloves should always be worn when dealing with bodily fluids, including blood.

Administering medication

- Prescribed Medication will be administered by one of the First Aiders in Alice House, Junior School or Senior School, providing clear written instructions from parents have been received. All parents are asked to give written consent, when completing the Pupil Personal Information Sheet, for the Head's representative to act in loco parentis in the case of a medical emergency. All parents of Senior School pupils are asked to give permission, when signing the Pupil's Personal Information Sheet, for two Paracetamol to be given per School day, if required. The First Aiders keep records of all medication they administer, including the date, time, dose and signature of the person administering the medicine. Consent can be given by only one parent. Records will also be kept where medicines are not administered.
- Prescribed medication should be provided in its original container with the pharmacist's label containing the child's name, date of birth, name/strength of medicine, dose, expiry and dispensing date and any additional requirements eg take with food. The medicine will be checked termly and a record kept (Appendix 4)
- In EYFS, Alice House and Junior School parents will receive a slip to confirm the time at which the medication was given
- Non-emergency medication should be clearly labelled and stored in a locked cupboard in a cool place. The extent to which pupils are in charge of their own medication depends on their age, maturity, parent and School consent. Any medication required to be stored in a refrigerator, will be kept in
 - The fridge in the staff kitchen by the Head's Office in the Senior School in a storage box named "Medicine Storage Box"
 - In designated fridges in the Medical Rooms of Alice House and Junior SchoolThe temperature of all fridges being used for the storage of medicines will be monitored and the temperature recorded by the relevant first aider on the Medication Request note.
- Medication will be returned to parents when appropriate, for example when the expiry date has been reached
- Although it is common practice for a pupil's medication to be kept by staff in a safe place, there may be exceptional circumstances whereby a pupil is authorised to carry their own medication on their person. This must be pre agreed and authorised by the pastoral lead of

that school and the pupil's parent or guardian, and must also be well documented on the pupil's care plan.

- Medication required on a School trip should be carried by the pupil, if this is normal practice. If not, then a trained member of staff or the parent/carer should be present, either of whom can administer the medication as necessary. In EYFS, Alice House and Junior School, all medication will be held by a member of staff. For non-prescription medicine on trips, see the School Visits Policy.

Care Plan for pupil with medical needs (Appendix 5)

This is only completed for pupils with serious medical conditions, for example diabetes, epilepsy, severe allergies and severe asthma, and who may need emergency medication in School such as the administration of an EpiPen®. Care Plans will be developed in partnership between the School, parents, pupils and relevant Health Professionals. A member of the School Office Team will contact parents whose children require a Care Plan each September either to update the current form or to initiate a meeting with the relevant pastoral lead of the Pupil's School to draw up a new form. The Care Plan should be disseminated to the relevant First Aider and in the appropriate staff room. The Care Plan should be reviewed on a regular basis by the relevant pastoral lead to reflect the pupils' needs. Parents must inform the School of any significant changes as soon as reasonably practicable.

Particular Medical Conditions

Allergic Reactions: There are different management pathways for mild - moderate allergic reactions and anaphylaxis.

Mild-moderate allergic reaction:

Symptoms are:

- Swollen lips, face or eyes
- Itchy or tingling mouth
- Hives or itchy skin rash
- Abdominal pain or vomiting
- Sudden change in behaviour
- Action:
- Stay with the child, call for help as necessary
- Give antihistamine (if vomited, can repeat dose)
- Contact parent / carer

Anaphylaxis: Anaphylaxis is an acute, severe allergic reaction requiring immediate medical attention. It usually occurs within seconds or minutes of exposure to certain foods or other substances, but may happen after a few hours.

Symptoms:

- **AIRWAY:** Persistent cough, hoarse voice, difficulty swallowing, swollen tongue
- **BREATHING:** Difficult or noisy breathing or wheeze or stridor
- **CONSCIOUSNESS:** Persistent dizziness / pale or floppy suddenly sleepy, collapse, unconscious

Gastrointestinal – nausea, vomiting, diarrhoea, stomach pain or a sense of impending doom or mounting fearfulness

Action:

If ANY ONE of these signs are present:

- 1. Lie child flat.** If breathing is difficult, allow to sit
- 2. Give EpiPen® or EpiPen® Junior**
- 3. Dial 999 for an ambulance*** and say ANAPHYLAXIS (“ANA-FIL-AX-IS”)

If in doubt, give EpiPen®. After giving EpiPen:

1. Stay with child
2. Contact parent/carer
3. Commence CPR if there are no signs of life
- 4. If no improvement after 5 minutes, give a further EpiPen®**
5. Keep the EpiPen to give to ambulance staff

PLEASE NOTE, WHERE THIS POLICY REFERS TO AN EpiPen® IT INCLUDES ANY alternative adrenaline autoinjector device provided by the parent.

Additional Instructions: If wheezy, give 10 puffs salbutamol (blue inhaler) and dial 999

Other advice:

- In the event of an incident a First Aider should be called
- Pupils who have prescribed adrenaline injectors carry their own EpiPen® in Senior School. Each pupil (if relevant) is asked to provide a Spare EpiPen® which is labelled and left in the medicine store in Reprographics by reception. In Alice House and Junior School EpiPen®s are kept in unlocked, labelled first aid stores in the first aid rooms, see Appendix 6 for location of Saint Martin’s owned EpiPens across the site (*this does not include the EpiPens we hold for Pupils as part of their Care Plans*). In an emergency, PE Dance and Drama staff stay with the pupil and call the designated first aider on the Junior School mobile on the First Aid Notice
- Training in EpiPen® use is provided for staff annually. Adrenaline should be administered into the upper outer thigh and once adrenaline has been administered an ambulance must be called and the girl taken to hospital. The EpiPen® should be replaced before the child returns to school.

It is the parents’ responsibility to provide an **EpiPen®** that is in date. Expiry dates and discolouration of contents should be checked termly by the Receptionist and recorded on the Medication Form.

Asthma: People with asthma have airways which narrow as a reaction to various triggers. The narrowing or obstruction of the airways causes difficulty in breathing and can usually be alleviated with medication taken via an inhaler.

- It is appreciated that pupils suffer from varying degrees of asthma
- The School recognises that some pupils must have immediate access to reliever inhalers and therefore advises that pupils in this situation and of sufficient maturity carry their own inhaler at all times. A spare inhaler should always be left with the designated First Aider and should be clearly labelled
- It is the parents’ responsibility to renew out of date or empty inhalers
- Physical activity will benefit pupils with asthma, but they may need to use their inhaler 10 minutes before exertion. The inhaler must be available during PE and games. If a pupil is unwell she should not be forced to participate.

Epilepsy

Pupils with Epilepsy are supported following appropriate discussions with parents and relevant professionals. Medication is unlikely to be given in School but the possibility of side effects is recognised.

Diabetes

Diabetes is a condition where the person's normal hormonal mechanisms do not control their blood sugar levels. In the majority of children the condition is controlled by insulin injections and diet. It is possible that injections will need to be given during School hours.

- Pupils with diabetes are supported in the management of this condition following discussion with parents and relevant professionals. In the event that a pupil requires insulin injections during the School day individual guidance and training will be provided to appropriate staff by specialist hospital liaison nurses, as treatment is tailored to each person
- The need for regular blood monitoring, insulin injections and snacks are recognised.

In the event of a hypoglycaemic attack (symptoms can include sweating, dizziness, going pale, difficulty concentrating, fast pulse, irritability and confusion) , the immediate treatment for is to have some sugary food or drink (about 15 to 20g of rapidly acting carbohydrate) to end the attack. For example, this could be:

- a glass of fruit juice or non-diet soft drink
- between three and five dextrose tablets
- a handful of sweets

After having something sugary, have a longer-acting carbohydrate food, such as a few biscuits, a cereal bar, a piece of fruit or a sandwich. When treating someone else with hypoglycaemia, if the above treatment isn't effective, you may be able to help them by applying glucose gel (or honey, treacle or jam if glucose gel isn't available) to the inside of their cheeks, and gently massaging the outside of their cheeks. It may take 10 to 15 minutes before they feel better. This shouldn't be done if the person is drowsy or unconscious because of the risk of choking.

If a person loses consciousness because of severe hypoglycaemia, they need to be put into the recovery position and given an injection of the hormone glucagon (if they have an injection kit). The injection will raise their blood glucose level. The injection should be carried out by a friend or family member who knows what they're doing, or by a trained healthcare professional. Never try to put food or drink into the mouth of someone who's unconscious as they could choke.

You should dial 999 to request an ambulance if:

- a glucagon injection kit isn't available
- there's nobody available who's trained to give the injection
- the injection is ineffective after 10 minutes

If you're able to give a glucagon injection and the person regains consciousness, they should eat some longer-acting carbohydrate food, such as a few biscuits, a cereal bar or a sandwich. You should continue to monitor the person for signs of recurring symptoms in case they need to be treated again.

Medical information about staff

If staff wish to provide the designated First Aider with medical information, this is kept confidentially in the office of the Head's PA. An opportunity is given at a mid-point of each year to update this information.

Sharps bin

Diabetics provide Sharps bins as required. The safe disposal of full sharps bins is the responsibility of the pupil's parents following their usual protocols

Defibrillators

There are three defibrillators on site all of which are registered with 'The Circuit' so may also be used for public use. Their locations being:

1. Music Room
2. Senior School – Entrance to Terrace by Room 28
3. Main Gym Entrance

All qualified first aiders on site are trained to use defibrillators should the need arise, with the training records available to view on Safety Cloud.

See Appendix 7 for location of Defibrillators across the site.

Head Teacher; Nicola Smillie

Signature: _____ **Date:** _____

Chair of the Governing Body; Carol McNidder

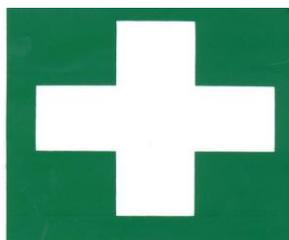
Signature: _____ **Date:** _____

Changes to Policy

June 2017	First Aid kits contents updated
June 2017	Allergy information updated – use of EpiPen®, symptoms, requirement for teacher trained in use of EpiPen® to accompany sports fixtures and trips
June 2017	New Appendix 3 added
June 2017	New Appendix 4 added
June 2017	Care Plan moved from Appendix 2 to Appendix 5

September 2019	Updated version of the “Supporting Pupils at School with Medical Conditions” policy.
September 2019	Once completed; Accidents, Near Misses and Risk Assessments should all be uploaded to Safety Cloud
September 2019	Administrating Medicines – some pupils will be authorised to carry their own medication.
September 2019	Care Plan – accountability changes to Pastoral School Leads
September 2019	Defibrillators Section added
September 2019	Appendix 3 Change of Person Addition of Senior School Office First Aid Bag
September 2019	New Appendix 6 added
September 2019	New Appendix 7 added
September 2019	Appendix 3 change of responsibility

Appendix 1



8.00 – 5.00 Monday – Friday FIRST AID BOXES

ARE SITUATED AS FOLLOWS:

Alice House – Medical Room
Alice House – Discovery Hub
Art & Craft 1 – Pottery Room
Art & Craft 2 – Cookery Room
SMArt
Gym 1 – by changing rooms/gy
Gym 2 – by changing rooms/gy
Junior School – Medical Room
Kitchen
Maintenance Department - Hut
Music Room
Every Science Lab
Senior School – Medical Room
Sixth Form Centre
Swimming Pool – Poolside
Swimming Pool Office
Technology Lab Room 36

Area	Name	Extension
Alice House	All staff are trained	120 07921 056228
Junior School	All staff are trained	117 07725 704057
Senior School	Mrs C Nuttall	101
	Mrs M Reynolds	100
	Mrs M Wade	136
	Medical Mobile	07720 072483
Sixth Form	Miss C Bednall	123
PE	All staff are trained	112

Appendix 2

Standard First Aid Boxes contain:

- HSE basic advice on first aid leaflet
- First aid dressing sterile unmedicated 12x12cm (4)
- First aid dressing sterile unmedicated 18x18cm (1)
- Triangular bandage (2)
- Safety pins (12)
- Eye dressings sterile (2)
- Plasters sterile hypoallergenic various sizes (40)
- Alcohol free cleansing wipes (20)
- Micro-pore adhesive tape 2.5cm x 10cm (1)
- Conforming bandage 7.7cm (1)
- Gloves latex free non-powdered (6pairs)
- Finger dressing (1)
- Face shield (1)
- Foil blanket (1)
- Scissors round ends (1)
- Eye wash sterile 20mls (3)
- Gauze swabs pack of 5cm x 5cm (2 packs -10)
- Low adherent dressing 5cm x 5cm (3)
- Low adherent dressing 10cm x 10cm (3)
- Adhesive dressing 6cm x 7cm (10)
- Adhesive dressing 15cm x 8cm (5)
- Small pack of tissues

First aid boxes will display the following information:-

- the name of the person responsible for their upkeep
- the contents of the first aid box and replenishing arrangements
- the location of the accident book

A list at Appendix 3 will be completed by person checking

Appendix 3

FIRST AID BOXES 2019-2020

Please insert date and name next to each box that is checked

Location		Autumn date	Name	Spring date	Name	Summer date	Name
Alice House – AH Medical Room	M. Ajimal						
Alice House – Discovery Hub	M. Ajimal						
Art & Craft 1 – Pottery Room	M. Ajimal						
Art & Craft 2 – Cookery Room	M. Ajimal						
SMArt	M. Ajimal						
Gym 1 – by changing rooms/gym	M. Ajimal						
Gym 2 – by changing rooms/gym	M. Ajimal						
Junior School – TA's office	M. Ajimal						
Kitchen	S Frain						
Maintenance Department - Hut	R Neale						
Music Room	M. Ajimal						
Science Room 35	L Bevan						
Science Room 46	L Bevan						
Science Room 47	L Bevan						
Science Room 48	L Bevan						
Science Room 50	L Bevan						
Senior School Office	L Bevan						
Sixth Form Centre	L Bevan						
Swimming Pool – Poolside	M. Ajimal						
Swimming Pool Office	M. Ajimal						
Technology Lab Room 36	L Bevan						

When completed, this form should be returned to the School office



Saint Martin's

Appendix 5

CARE PLAN FOR PUPIL WITH MEDICAL NEEDS – Part 1 of 2

Name of pupil:	Photo
Address:	
Date of Birth:	
Condition:	

Name of school		Year Group:		Date:	
Year Group and Review Dates:					

CONTACT INFORMATION	
Family Contact 1:	Tel Work:

		Tel Home:
		Tel Mobile:
Relationship:		
Family Contact 2:		Tel Work:
		Tel Home:
		Tel Mobile:
Relationship		

Clinic/Hospital Contact:	
Name:	
Clinic/Hospital:	
Tel No:	
Name of GP:	
Tel No:	
Describe condition and give details of pupil's individual symptoms:	



Daily care requirements where relevant (eg before sport/at lunchtime)

Describe what constitutes an emergency for the pupil and the action and follow up required of this occurs:

Completed by:		Date:	
----------------------	--	--------------	--

CARE PLAN FOR PUPIL WITH MEDICAL NEEDS – Part 2 of 2

This form completes the Care Plan and it is a record that parents and school staff agree with the Care Plan. The original will be kept at school, and a copy made for parents.

Due to the complexity and unstable nature of some pupil's medical conditions, the Care Plan can be altered in an emergency to ensure the pupil's safety. This should be done through consultation between school and staff and health professionals who are present during the incident. Parents should be contacted and the incident documented on the pupil's records.

It is always the responsibility of parents/carers to keep school staff and health professionals fully informed of changes in their child's condition. They must agree the Care Plan and supply necessary medication, ensuring it is in date on a termly basis.

Name of pupil:	
----------------	--

Name of parent/carer:			
Signature of parent/carer:		Date:	

On behalf of school:			
Name of Head Teacher:			
Signature of Head Teacher:		Date:	

Appendix 6 – Locations of Saint Martin’s owned EpiPens across Site

