



## First Aid and Administration of Medicines and Supporting Pupils with Medical Conditions Policy

### **Aims**

We aim to ensure that all children, including those with medical conditions, can continue to enjoy learning, friendship and play.

### **Responsibility and First-aiders**

Parents/carers have the prime responsibility for their child's health and are required to provide the Pre-Prep/Nursery (via the Pre-Prep Office or Queen's Highgrove Nursery) with information about their child's medical condition before the child is admitted to the school/Nursery, or as soon as the child first develops a medical need. Parents/carers are also responsible for providing medical equipment e.g. Epipens and inhalers and ensuring that the medication provided is in date.

All staff are responsible for implementing the First Aid and Medical Needs policy throughout the College. Staff use their first aid knowledge in an emergency to secure the welfare of pupils.

Queen's College Nurses based in the Medical Centre are also on hand to administer First Aid in emergencies during term-time.

There is an appointed person for maintaining and ordering first aid supplies and equipment in each department: - Mrs Higgins for Pre-Prep, Miss Hayes for Nursery School and Mrs Kershaw for Highgrove Nursery.

Staff training is updated regularly and a training log is kept by the head of Pre-Prep, Head of Nursery Education and Queen's Highgrove Nursery Manager. All qualified first aiders must update their training every 3 years.

### **Paediatric First Aid**

In line with the Early Years Foundation Stage guidelines all newly appointed qualified staff undergo PFA training within three months of joining Queen's College and all EYFS staff are subject to a rolling programme of PFA training.

### **Equipment and supplies**

First Aid stock and emergency equipment is kept in the First Aid drawers in the Pre-Prep Staffroom/ Highgrove Nursery laundry room. All staff are responsible for restocking the First Aid kit from the main supply and when staff observe that stock is running low, they report it to the responsible member of staff who will reorder as necessary.

Appropriate First Aid kits are kept in all rooms within the Pre-prep, Nursery School and Highgrove Nursery departments. The Pre-prep First Aid bag for outdoor or off site use is kept in the Staffroom and a portable First Aid kit is taken outside each lunchtime play and morning and afternoon playtimes for the Pre-Prep children. Any child who requires first aid during these times is taken to the Pre-prep staffroom. The Nursery School and Highgrove Nursery have a first aid kit kept in their garden sheds.

### **First aid boxes**



Each box/bag contains a required list of contents which are checked each half term in the Pre-prep and Nursery School and every month in Highgrove Nursery for expiry dates by the designated staff responsible for maintaining the First Aid supplies. Supplies that are out of date are discarded and replaced immediately.

## **First Aid Procedures**

First Aid is administered by the qualified first aiders.

Hands must be washed before and after dealing with any cuts or grazes. Disposable gloves are used if the wound is bleeding.

Water is used to clean cuts or grazes. No lotions or creams are used. If necessary, cuts are covered with a hypo-allergenic plaster or other dressing.

If a child is feeling unwell and needs to go home parents are contacted and asked to collect their child.

Any child that shows signs of any infectious illness will either be cared for appropriately within the setting or supported by the medical centre staff while they wait to be collected by a parent.

The child's name, injury and treatment is witnessed and a record is entered in the First Aid folder. The member of staff treating the injury then signs and dates the entry, also recording the time the injury took place.

If an accident occurs that involves an injury to a child's intimate area the parents are contacted in the first instance for advice as to how they wish the school/nursery to proceed as to whether the child is supported by the College medical team, taken to A and E or whether the parent attends to the injury themselves.

If a child needs to have his/her temperature taken in Pre-prep and Nursery School it is recorded in the First Aid folder and parents are informed. In Highgrove Nursery when a child's temperature is taken it is recorded on a medication form and also in the child's home/ school diary.

Accident records are kept in Highgrove Nursery, Nursery School, Pre-Prep staffroom. Nursery parents are required to countersign to acknowledge receipt of the information. Pre-Prep pupils are provided with a note for their parents following minor accidents or injuries.

Bumps to the head and body will be treated by placing a cooling bruise pack on the affected area. Ice packs are not used unless a member of the medical center deems it appropriate. In this case ice packs will only be used if wrapped up suitably to prevent burns.

Any staff accidents are recorded in the central First Aid folder in Pre-Prep/Highgrove Nursery.

In the event of an emergency, the emergency services are called and the School Nurse may also be contacted during term time.

For pupils with long-term needs (such as asthma) staff follow guidance provided by the child's doctor. Individual Medical Healthcare Plans are kept in the Highgrove Nursery, Nursery School and Pre-Prep. Further details of these conditions are kept in the child's medication bag, with contact forms and in the class SEND files / room register.



## **Defibrillators.**

There is a defibrillator stored in the Junior School entrance hall for use in the event of an emergency.

## **RIDDOR**

Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR)

Accident books are held in Junior School, Highgrove Nursery, Pre-Prep School, Domestic Manager's office, Estates Office and Medical Centre. Certain incidents are reportable under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR) The Site Manager's Office will undertake the reporting of incidents to the Health & Safety Executive on receipt of information from Departments and/or the College Medical Centre.

Information regarding current legislation can be found at:  
<http://www.hse.gov.uk/pubns/indg453.pdf>

RIDDOR forms are kept in the Staffroom First Aid drawers. Completed forms should be given to the Head of Pre-Prep to be forwarded to the designated staff member within the college.

## **Medicines**

Provided the parent has given permission or completed a Medical Healthcare Plan (MHP) we administer prescribed medicines that have been prescribed by a doctor, dentist, nurse or pharmacist for short or long term conditions. MHPs are kept in the individual child's records in the office, in the child's medication bag and with the contact forms in the Staffroom which also are taken out on trips. Medicines are kept in a locked first aid cupboard in the Pre-Prep staffroom, Yr2 Prentice block locked cupboard, Nursery School / Highgrove Nursery fridge, Nursery office or in staff room fridge as appropriate.

Queen's Pre-Prep, Nursery School and Highgrove Nursery safely store sachets of Calpol and check the expiry date regularly. The Highgrove Nursery *Welcome Pack* contains information about the child's medical history and confirms whether or not they have previously had Calpol with no reaction (and the dosage.) In Pre-Prep and Nursery School parents are asked to indicate on their child's contact form whether they consent to the school administering over the counter medicines (calpol) when they move across from Highgrove department or join as a new pupil. Additional contact with the parent and permission is always sought prior to administering calpol.

If a child becomes ill, staff will ring the parent requesting them to come to nursery/school and collect the child. Where appropriate, staff may ask for parental permission to administer Calpol in the interim. In this case, they will also ask the parent if any other medication has been administered in the previous 24 hours. If parents give permission, the Calpol is administered, witnessed, recorded and signed following the Nursery phase procedure outlined below.

Staff will complete and sign a record each time medicine is administered. A witness will always be present when medicine is administered and will countersign the record; this record will then be signed by the parent when they collect the child.

If a child has been prescribed any new medication, s/he must be kept at home for 24 hours in case of any adverse reactions. Following immunisation, a child must be kept at home for the rest of the day in order to monitor reactions.



Prescribed medicines should be brought into school in the original container with the labels attached and the child's name clearly marked. Spoons/ oral syringes should also be supplied by the parent.

Parents should provide written and signed instructions regarding how and when the medicine is to be administered and any additional requirements regarding parental contact by the school.

Any member of staff administering medicine checks:

- pupil's name
- written instructions including time to be administered.
- dose
- expiry date

Prescribed medicines are labelled and stored safely away from the children and locked away overnight or sent home with the parent/carer at the end of the day.

Asthma inhalers are labelled and kept safely in the child's classroom and accompany them outside the classroom. In line with the College's protocol there is an emergency inhaler kept in the Junior School that has been prescribed by the College doctor for use only with those children who normally carry a prescribed inhaler within Pre-Prep and Nursery School. These will only be used if parents give consent via a consent form completed at the start of the academic year.

The college ensures that there are sufficient members of staff who are employed, appropriately trained and willing to manage individual children's medicines as part of their MHP.

## **Refusal to take medicines**

If a child refuses to take medicine staff will not force them to do so but will note this in the records and inform the parents immediately. If a refusal to take the medicine results in an emergency, then the usual emergency procedures will follow.

## **Ill/Infectious Policy and Procedure**

If children are unwell and unable to cope with a Nursery/school day or if the child has an infectious or contagious condition they should not be sent to school. If they become ill during the day, parents/carers will be contacted by a member of staff in order that the child can be taken home. The child will be taken to a quiet place in the setting in order to minimize the risk of spreading the infection/illness. A child who is ill with vomiting or diarrhoea must be kept at home for 48 hours after the final episode of illness.

If a child contracts a notifiable/communicable disease, the Head of PrePrep/Head of Nursery School/ Highgrove Nursery Manager will notify OFSTED and the Health Protection Agency. If food poisoning affects two or more children within Highgrove Nursery, Nursery School or Reception, OFSTED will be notified. (0300 123 1231)

Emergency contact details for all children are held on the College database and on contact forms. Contact forms are updated annually and parents are requested to inform us of any changes to contact details (including emergency contact details) should they change within this period.

Please see Appendix 2 for exclusion periods relating to infectious conditions. This guidance is provided by *Public Health, England*. Further guidance relating to illnesses may be found in 'The Spotty Book', a copy of which is kept in Pre-Prep and Highgrove Nursery.



## **Guidance on managing Blood and Bodily fluids**

Spillages of blood, vomit, urine and excreta are cleaned up promptly and appropriately in line with the guidance provided by the College medical centre entitled 'Managing Blood and Bodily Fluids' which is kept with the designated equipment provided.

## **Medical Healthcare Plans**

In response to the Children and Families Act 2014, Queen's College Highgrove Nursery, Nursery School and Pre-Prep have implemented Medical Healthcare Plans (MHP) for every pupil who has a long-term medical condition such as Asthma, Epilepsy, Diabetes, Anaphylaxia, Cancer or Juvenile Arthritis. The plans are completed by parents, returned to nursery/school and discussed with the class teacher or Nursery Key Person.

## **Creating a Medical Healthcare Plan (MHP)**

MHPs include details of the child's condition, any medication, daily care requirements, action to be taken in an emergency and parents/carers details including emergency contact numbers.

Contributors to MHPs may include healthcare professionals/teams, parents/carers, the child (where appropriate) the class teacher, key person and SENCO, support staff who are trained to administer medicines or trained in emergency procedures.

Should a child have severe medical needs a risk assessment may also need to be put in place alongside the MHP to manage these risks which is also subject to a regular reviews.

Parents will indicate on the MHP the frequency of a joint review of the plan. In most cases this will be annually but each case will be reviewed according to parental wishes/change in child's individual needs.

Medical Healthcare plans are not transferable from year to year without a regular review.

It is the parents' responsibility to inform the Pre-Prep Office/nursery key person of any changes to the MHP. This advice will be passed onto the SENCO.

## **Information sharing and storage**

The Admissions Registrar/Highgrove Nursery Manager sends MHPs to parents in the first instance.

It is the SENCO's responsibility to monitor the database and request reviews at appropriate times.

It is the responsibility of the class teacher/Nursery key person to share key information from MHPs with all members of staff working with children in their class.

Individual Medical Healthcare Plans are kept in the Highgrove Nursery, Nursery School and Pre-Prep and further details of these conditions are kept in the child's medication bag, with contact forms and in class SEND files/Highgrove room register. Copies are also kept by the SENCO, and sent to the College Medical Centre central register.

## **Training**

If school/Nursery staff need to be trained to administer medical procedures, advice will be sought from the relevant healthcare professional e.g. the College Sister or Diabetic Nurse.

Parents and school staff cannot cascade training that they have received when that training is specific to a child.



School/Nursery staff who have been trained are responsible for following and delivering the MHP. If the child's condition alters, staff will contact an appropriate professional and the parents, making them aware of the change and requesting further training if needed or an alteration to the plan. The SENCO will liaise with healthcare professionals to facilitate training and updated training as needed.

Individual members of staff are responsible for identifying and communicating any changes that they notice in the child's care needs. The SENCO will inform parents and healthcare professionals in writing and discuss whether further training is needed.

## **Educational and offsite visits.**

Visits and offsite trips will be planned so that pupils can participate and reasonable adjustments will be made within the existing resources, expertise and staffing structure within the college. If a risk assessment indicates that it is not safe for the pupil to participate in part of the experience because of their condition, then reasonable adjustments will be made to ensure that the child is able to participate in the curriculum surrounding the trip/visit.

A copy of a child's MHP and medication will be taken on every trip and stored appropriately throughout the duration of the visit.

A dedicated member of staff will be allocated the responsibility of overseeing the safe carriage of medicines and the medical needs of the child.

## **Games, P.E. and Swimming**

All children with medical conditions will be encouraged to participate as fully as possible in physical activities. Staff will be sensitive to individual needs and sufficient flexibility will be incorporated into the lesson planning in order that all children may be included in ways appropriate to their own abilities.

Any restrictions on a child's ability to participate in PE, swimming or games will be recorded in the child's MHP. This will include a reference to any issues of privacy and dignity for children with particular needs.

Some children may need to take precautionary measures before or during exercise, and may also need to be allowed immediate access to their medication e.g. asthma inhalers.

## **Long-term absence or regular absence due to medical reasons**

For those children who attend hospital appointments or are admitted to hospital on a regular basis, special arrangements may need to be considered. The College will make arrangements to link the child to suitable learning opportunities e.g. in Early Years the advice and support of the PIMS team or Early Years Area SENCOs may be sought.

In Highgrove Nursery, Nursery School and Pre-Prep, adaptations may be needed to support the child at points in the school day e.g. a child with type1 Diabetes will require regular monitoring and administration of insulin.

## **Existing injuries**

# Queen's College EYFS and Pre-Prep



If a child comes into Nursery or Pre-Prep with an injury e.g. bruising/cuts/scratches parents are requested to complete a form providing information about the injury and marking the site of the injury on a body map.

## **Insurance**

This is an Independent School. The governors, Finance team and Headteacher will ensure that the appropriate level of insurance is in place and appropriately reflects the level of risk.

**Review:** The Early Years Leadership team and SENCO will review the policy every two years.

**Signed:** \_\_\_\_\_  
**Headteacher**

**Signed:** \_\_\_\_\_  
**Head of Pre-Prep**

**Signed:** \_\_\_\_\_  
**Head of Nursery Education**

**Signed:** \_\_\_\_\_  
**Nursery Manager**

**Signed:** \_\_\_\_\_  
**SENCO**

**Date: 14<sup>th</sup> March 2017**

Date of Next Review: March 2019

## **Links to other policies and Legislation**

EYFS Statutory Guidance 2017  
Queen's College First Aid and Medical Policy  
Childcare Act 2004  
Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 1995  
Risk Assessment Policy  
Health Protection Regulations 2010  
Health Protection Agency Act 2004  
Health Protection Agency Infection Control Guidelines  
Public Health (Control of Diseases) Act 1984  
Induction Procedure  
Safeguarding Policy  
Health and Safety Policy  
Confidentiality Policy  
Medicines Act 1968  
Data Protection Act 2003  
Medicines Factsheet (OFSTED)  
Individual Medical Healthcare plans  
Permission Forms



**Appendix 2** - exclusion periods relating to infectious conditions. This guidance is provided by *Public Health, England*.

## 1. Rashes and skin infections

<b>Infection or complaint</b>	<b>Recommended period to be kept away from school, nursery or childminders</b>	<b>Comments</b>
Athlete's foot	None	Athlete's foot is not a serious condition. Treatment is recommended
Chickenpox	Until all vesicles have crusted over	<i>See: Vulnerable Children and Female Staff – Pregnancy</i>
Cold sores, (Herpes simplex)	None	Avoid kissing and contact with the sores. Cold sores are generally mild and self-limiting
German measles (rubella)*	Four days from onset of rash (as per "Green Book")	Preventable by immunisation (MMR x2 doses). <i>See: Female Staff – Pregnancy</i>
Hand, foot and mouth	None	Contact your local HPT if a large number of children are affected. Exclusion may be considered in some circumstances
Impetigo	Until lesions are crusted and healed, or 48 hours after starting antibiotic treatment	Antibiotic treatment speeds healing and reduces the infectious period
Measles*	Four days from onset of rash	Preventable by vaccination (MMR x2). <i>See: Vulnerable Children and Female</i>

# Queen's College EYFS and Pre-Prep



## *Staff – Pregnancy*

Molluscum contagiosum	None	A self-limiting condition
Ringworm	Exclusion not usually required	Treatment is required
Roseola (infantum)	None	None
Scabies	Child can return after first treatment	Household and close contacts require treatment
Scarlet fever*	Child can return 24 hours after starting appropriate antibiotic treatment	Antibiotic treatment is recommended for the affected child
Slap cheek/fifth disease. Parvovirus B19	None (once rash has developed)	<i>See: Vulnerable Children and Female Staff – Pregnancy</i>
Shingles	Exclude only if rash is weeping and cannot be covered	Can cause chickenpox in those who are not immune, ie have not had chickenpox. It is spread by very close contact and touch. If further information is required, contact your local PHE centre. <i>See: Vulnerable Children and Female Staff – Pregnancy</i>
Warts and verrucae	None	Verrucae should be covered in swimming pools, gymnasiums and changing rooms

## 2. Diarrhoea and Vomiting Illness

**Infection or**

**Recommended  
period to be kept**

**Comments**



## complaint

## away from school, nursery or childminders

48 h

*E. coli* O157 VTEC  
Typhoid\* [and  
paratyphoid\*] (enteric  
fever) Shigella  
(dysentery)

Should be excluded  
for 48 hours from the  
last episode of  
diarrhoea. Further  
exclusion may be  
required for some  
children until they are  
no longer excreting

Further exclusion is  
required for children  
aged five years or  
younger and those  
who have difficulty in  
adhering to hygiene  
practices.

Children in these  
categories should be  
excluded until there is  
evidence of  
microbiological  
clearance. This  
guidance may also  
apply to some  
contacts who may  
also require  
microbiological  
clearance. Please  
consult your local PHE  
centre for further  
advice

Cryptosporidiosis

Exclude for 48 hours  
from the last episode  
of diarrhoea

Exclusion from  
swimming is advisable  
for two weeks after  
the diarrhoea has  
settled

Diarrhoea and vomiting

Exclude for 48 hours from the last episode.

### 3. Respiratory Infections

## Infection or complaint

## Recommended period to be kept away from school, nursery or childminders

## Comments

Flu (influenza)

Until recovered

See: *Vulnerable*



## Children

Tuberculosis*	Always consult your local PHE centre	Requires prolonged close contact for spread
Whooping cough* (pertussis)	Five days from starting antibiotic treatment, or 21 days from onset of illness if no antibiotic treatment	Preventable by vaccination. After treatment, non-infectious coughing may continue for many weeks. Your local PHE centre will organise any contact tracing necessary

## 4. Other Infections

Infection or complaint	Recommended period to be kept away from school, nursery or childminders	Comments
Flu (influenza)	Until recovered	See: <i>Vulnerable Children</i>
Tuberculosis*	Always consult your local PHE centre	Requires prolonged close contact for spread