



Rye St Antony School
O X F O R D

13a Health Care and First Aid Policy

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Governor Review:

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HEALTH CARE AND FIRST AID POLICY

Introduction

Physical health, mental health and emotional wellbeing are the priorities in the care of pupils. The School is concerned for the health and wellbeing of the whole person and thus takes a holistic approach to the care and education of each pupil.

School Nurse and School Doctor

The School's Health Centre is situated in The Cottage. It is staffed by a qualified School Nurse who is responsible for the health care of pupils. The School Nurse is usually on duty on Mondays from 8.30 – 4.00 pm, Tuesdays 8.30 – 4.00 pm, Thursdays 1.00 – 4.00 pm and Fridays from 8.30 – 4.00 pm to administer First Aid, deal with accidents or emergencies and look after anyone who is taken ill. At other times staff trained in First Aid cover these duties, and there is always one person trained in first aid on site. Boarding pupils are required to register for general medical services with the School Doctor, at Hedena Health Centre, Bury Knowle. Appointments to see a doctor can be made through the School Nurse or a Senior Housemistress. The doctor must be informed of any medication prescribed by other doctors, for example, during school holidays, to pupils registered at the Hedena Health Centre. During their first term, all new boarding pupils receive a health check from the School Nurse.

National Health Service Medical Card

At the time of a boarding pupil's entry to School, the pupil's parents are asked to send to the School Nurse the pupil's National Health Service Medical Card (or, if the pupil does not have an NHS Medical Card, NHS form GMS1, which can be downloaded from the internet).

Medical Questionnaire

A Medical Questionnaire (Health Form) giving a full medical history is required to be completed for every new pupil, boarding and day, at the time of entry to the School. Health Forms are kept, along with any records of visits to the School Nurse or School Doctor, in the Health Centre Office, and are confidential. Parents should notify the School Nurse of all additions to be made to the Health Form during the pupil's time at School, ensuring that the Health Form is kept up-to-date.

Confidentiality

With all medical and nursing matters, the School Doctor and School Nurse will respect a pupil's confidence except on the very rare occasions when, having failed to persuade that pupil, or his or her authorised representative, to give consent to divulgence, the School Doctor or School Nurse considers that it is in the pupil's better interests or necessary for the protection of the wider school community to breach confidence and pass information to a relevant person or body. (See *Safeguarding Policy*)

Immunisations

All pupils should be up-to-date regarding routine immunisations in accordance with Department of Health schedules. Those who are not fully immunised should receive appropriate immunisations as soon as practicable, both for their own protection and that of the wider School community. Parental consent will be sought from time to time for pupils to receive the routine range of immunisations recommended by the Department of Health.

Medical records

The NHS records of pupils who are registered with the School Doctor are stored securely at Hedena Health Centre. At School, we keep records of all treatment and immunisations that pupils receive during their time at the School. We record all accidents and injuries to pupils. Access to medical records is restricted to the Medical Staff.

NHS records will be transferred to the new doctor when a pupil registered through School leaves and re-registers elsewhere. Any other medical records relating to the pupil will be stored in the Health Centre until the pupil's 25th birthday, when they will be securely destroyed.

Emergency medical treatment

We shall always contact parents if a pupil suffers anything more than a trivial injury, or if a pupil becomes unwell, or if we have any worries or concerns about the pupil.

In accepting a place at the School, parents are required to authorise the Head (or an authorised deputy acting on her behalf) to consent, on the advice of an appropriately qualified medical specialist, to their child receiving emergency medical treatment, including general anaesthetic and surgical procedure under the NHS, if the School has been unable to contact the parents in time.

Medical treatment received during school holidays

Parents are asked to inform the School Nurse at the start of term if a pupil received any significant medical treatment or any immunisations during the school holidays.

Medicines and treatments brought to school by pupils

Parents are asked to inform the School Nurse of any medication that a pupil brings into School. If a pupil has a medical condition which necessitates regular access to medication, parents are asked to inform the School Nurse, so that an appropriate regime can be devised. The relevant academic and pastoral staff will be informed, in confidence, of any condition that is likely to affect the pupil in any area of School life.

Consent to treatment

Pupils are able to consent to medical or nursing treatment, regardless of age, if they are deemed Gillick 'competent'; otherwise, parental consent or the consent of a recognised person acting in loco parentis is required. Authorisations concerning immunisations, the dispensing of prescribed and non-prescribed medication, First Aid treatment and emergency treatment are requested on the School's Medical Questionnaire (Health Form). See *Administration of Medicines Policy*.

Action to be taken if a pupil is unwell

A pupil feeling unwell should report to the Health Centre, accompanied if appropriate by a fellow pupil or member of staff. If coming out of a lesson the pupil should bring a medical note completed by his/her teacher. The School Nurse will assess the pupil's condition and decide on the appropriate course of action. In the case of day pupils, the School Nurse will care for a sick pupil in the Health Centre or telephone the pupil's parents inviting collection of the pupil. Boarding pupils who are unwell will be cared for by the School Nurse and the Housemistresses. Boarding pupils may be taken home by their parents or guardians after discussion with the School Nurse or Senior Housemistress if the illness is likely to be of several days' duration. In the absence of the School Nurse, pupils report to the Office and an appropriate course of action is taken by qualified first aiders in School. Care of pupils is transferred to the Health Centre where first aid trained Housestaff will provide cover. Out of School hours care of boarders lies with Housestaff who liaise with the School Nurse.

The School is alert to the need for vigilance concerning particular health vulnerabilities, for example, anaphylaxis, eating disorders, virulent strains of influenza and any notifiable viruses.

Anaphylaxis

Anaphylaxis is a severe allergic response by the body to medication, bee/wasp stings or foods (nuts, eggs, cow's milk, shellfish). This reaction develops after only a few seconds and is a medical emergency. In its most severe form it is life threatening.

When a child is known to be at risk of anaphylaxis the treating doctor will prescribe medication for use in case of an allergic reaction. This may include adrenaline injections. Those most commonly in use are the Epi-Pen the Anapen and the Min-i-Jet (auto-injectors). These devices are preloaded, contain clear and concise instructions, and the medications are simple to administer. A list of pupils who are at risk of an anaphylactic reaction is posted on the noticeboard in the main Staff Room and in the Health Centre. Also posted in both places is a list of members of staff trained in the use of auto-injectors.

Eating disorders

The School is keen to help pupils of all ages to develop healthy eating habits and values, and the promotion of healthy eating is an important part of the PSHEE programme and form parts of the curriculum for Science and Food and Nutrition.

Sometimes, however, young people suffer from eating distress, perhaps as a result of personal or environmental factors. If an eating problem is diagnosed, a support strategy will be planned and implemented. A decision will also be made, taking into account medical advice, as to whether or not the pupil is fit to be in School. If a pupil needs to be away from school for a period of time, arrangements will be made for work to be sent home, if appropriate.

The School follows guidelines laid down by the Child and Adolescent Eating Disorder Group. Advice and information is also available from Child and Adolescent Mental Health Services (CAMHS), and from the school's Medical Adviser. Parents will always be fully informed should any concerns arise in relation to disordered eating and their child.

Influenza

In view of the concern of recent years about virulent strains of influenza, parents are asked to keep pupils at home if they display symptoms of influenza (cough, sore throat, headache, aching muscles, raised temperature). Parents are advised to seek guidance by telephone from their own doctor or from the NHS 111 advice service.

COVID-19 ADDENDUM

Any pupil displaying symptoms of COVID-19 is to be kept at home and undertake a test as soon as possible, informing the school of the result. School should be notified through attendance@ryestantony.co.uk if a child is taking a Covid test and needing to isolate. Parents are asked to inform the school immediately if a test result is positive. Pupils and Staff must follow current government guidance concerning self-isolation and inform the school of their need to self-isolate.

Boarders who display symptoms of COVID-19 will be isolated and tested in school, with the test sent by post.

Notifiable viruses

In the event of a pupil returning to School from an infected area or having been in close contact with someone who is subsequently confirmed as having a notifiable virus, the pupil should report to the School's Health Centre. This will enable the School Nurse to monitor the pupil's health for the required

seven days. Should a pupil at School become infected with a notifiable virus, the School will follow the advice of the Health Protection Agency, and notice of the situation will be given via the School's website (www.ryestantony.co.uk). Parents are asked to check the website regularly during times of sickness.

Diarrhoea and vomiting

To prevent the spread of infection in school settings, the Health Protection Agency recommends the exclusion of any affected member of staff or pupil for a period of 48 hours from the last episode of diarrhoea and vomiting. In the case of boarders, girls will be closely supervised and isolated until free of symptoms for 48 hours.

Counselling

The School counselling service is a professional service primarily available to senior pupils (Years 6-13) to assist them in their personal development. Counselling is offered by a trained, fully qualified School Counsellor who works within the National Counselling Association's code of ethics. Counselling aims to support pupils in addressing emotional and behavioural difficulties by encouraging them to express their feelings and thoughts and develop their understanding of themselves and strategies for managing their emotional health.

The aim of Counselling is to help young people:

- make informed choices
- cope with crisis and give support through preventative strategies
- work through feelings of inner conflict
- improve relationships with others
- gain understanding of themselves
- develop coping strategies
- build confidence and self esteem

Referral is made by the School Nurse, Deputy Head Pastoral or Head.

At the time of acceptance of a place, parents are asked to complete a pupil health form, and it is on this health form that parents are asked to give permission for their daughter to use the School Counselling Service, should the School deem a referral beneficial. The School recognises that good practice involves working in partnership with parents, and, in most cases, dialogue will take place between the School and parents if it is felt that counselling would be of benefit, but the School reserves the right to refer an individual pupil for counselling without express parental permission in circumstances deemed to require this.

For further information please see the *School Counselling Policy*.

Health Education

Issues concerning sex education and substance abuse are topics included in the PSHEE programme. Health Education is central to the work of the School Nurses and Form Tutors and is particularly promoted through the Personal, Social, Health and Economic Education (PSHEE) programme, a programme delivered by members of the teaching and support staff as well as by outside professionals.

First Aid Policy

The School's Health Centre is staffed by a qualified School Nurse. One of the doctors at Hedena Health Centre is the School Doctor.

The School Nurse is on duty in the Health Centre usually on Mondays from 8.30 – 4.00 pm, Tuesdays 8.30 – 4.00 pm, Thursdays 1.00 – 4.00 pm and Fridays from 8.30 – 4.00 pm. The School Nurse is available to administer First Aid, to deal with any accidents or emergencies, or to help if someone is

taken ill. There are also a number of members of the teaching and support staff, including all Housestaff, who are trained as First Aiders and/or Paediatric First Aiders, who are capable of giving First Aid if a pupil is injured, eg during sport or in the absence of the School Nurse. There is always a member of staff trained in First Aid on site. Staff may contact the School Nurse for emergency consultation by mobile telephone after School hours, and at weekends. A list of First Aiders, Paediatric First Aiders and members of staff trained in the management of anaphylaxis including the use of an Auto-injector is posted in the Staff Room, the Early Years Foundation Stage (EYFS) office, the boarding house and on noticeboards throughout the School. Staff with a qualification in First Aid and/or Paediatric First Aid are required to update their training every three years.

First Aid boxes are available in all the areas of the School where an accident is considered possible or likely (eg the Sports Hall). First Aid kits are always taken when pupils go out of School for visits and sports events. There are First Aid notices around the School. All new pupils and staff are given information on where to go for help in the event of an accident as part of their induction programmes. It is the responsibility of the School Nurse to ensure these kits are checked and restocked.

In the event of a medical emergency, 999 should be called. This is when someone is seriously ill or their life is at risk. Medical emergencies include: loss of consciousness, an acute confused state, fits that are not stopping, chest pain, breathing difficulties, bleeding that cannot be stopped, severe allergic reactions, a major trauma such as a fall, a serious head injury, and severe burns and scalds. 999 should be called immediately if someone is having a suspected heart attack or a stroke.

Records are kept of all accidents and injuries, and there is a procedure in place for ensuring that they are reviewed regularly in order, where possible, to minimise the likelihood of recurrence. Accidents should be recorded in the Accident Book which is kept in the Bursary and monitored by the Bursar. Accidents resulting in major injuries or over-three-day injuries and dangerous occurrences (near-miss accidents) are reported in accordance with the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR) by the Bursar. Parents should be informed via email or telephone of an accident or illness in school; this is usually done by the School Nurse.

Parents are contacted if a pupil suffers anything more than a trivial injury or if a pupil becomes unwell or if there are any worries or concerns about the pupil. Parents are asked to contact the School Nurse at the Health Centre at any time if they wish to discuss any concern relating to a pupil's health.

Early Years Foundation Stage (EYFS) pupils: Nursery and Reception

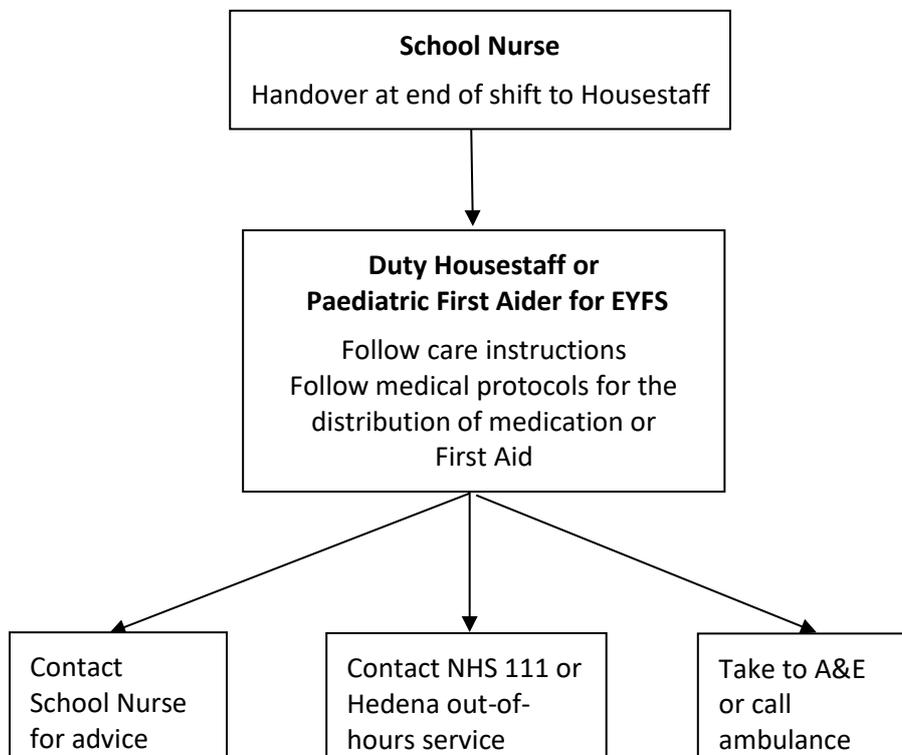
- EYFS staff will discuss with parents the procedure to be followed in the event of illness or infection.
- EYFS parents will be asked to sign a medical consent form.
- EYFS staff will obtain written permission from parents for the administration of any personal medication to a pupil.
- Where medication or First Aid is administered to a pupil, school will inform parents as soon as reasonably possible.
- EYFS staff will keep a written record of accidents or injuries and any First Aid treatment given and keep an accident book to record any accidents or injuries that occur when the School Nurse is absent or during early morning and after school care.

Hygiene procedures

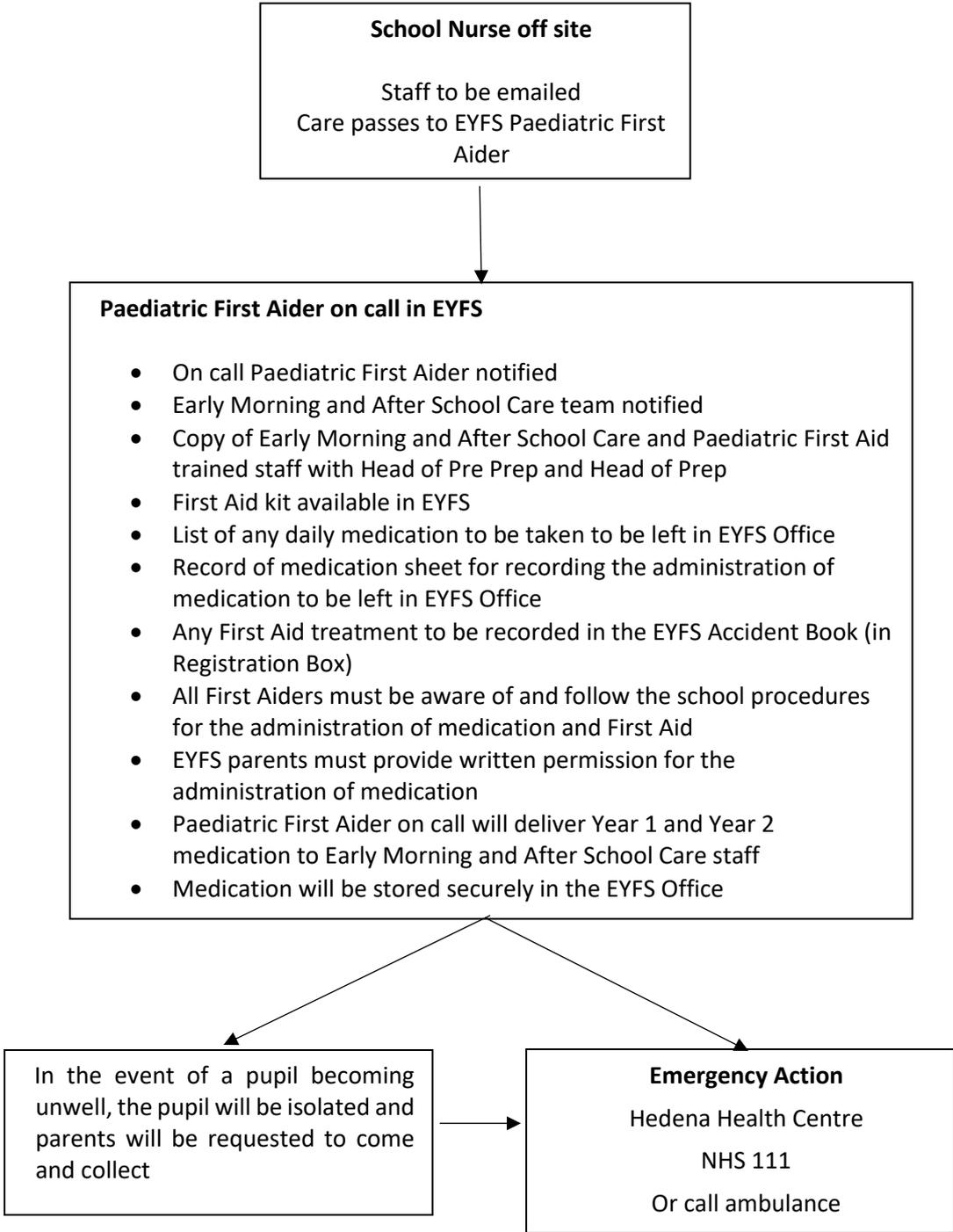
Any spill of blood or body fluids (faeces, urine, nasal and eye discharges, saliva and vomit) is regarded as potentially infectious, and when an incident occurs a suitably trained member of staff (Housekeeper, Caretaker, School Nurse or members of the Housestaff) should be called to help, ensuring that the affected area is safely decontaminated and cleaned, and that all waste is placed in a clinical waste bag,

and any soiled clothing sealed in a plastic bag and taken to the School laundry. Staff should ensure that pupils do not come into contact with the spill.

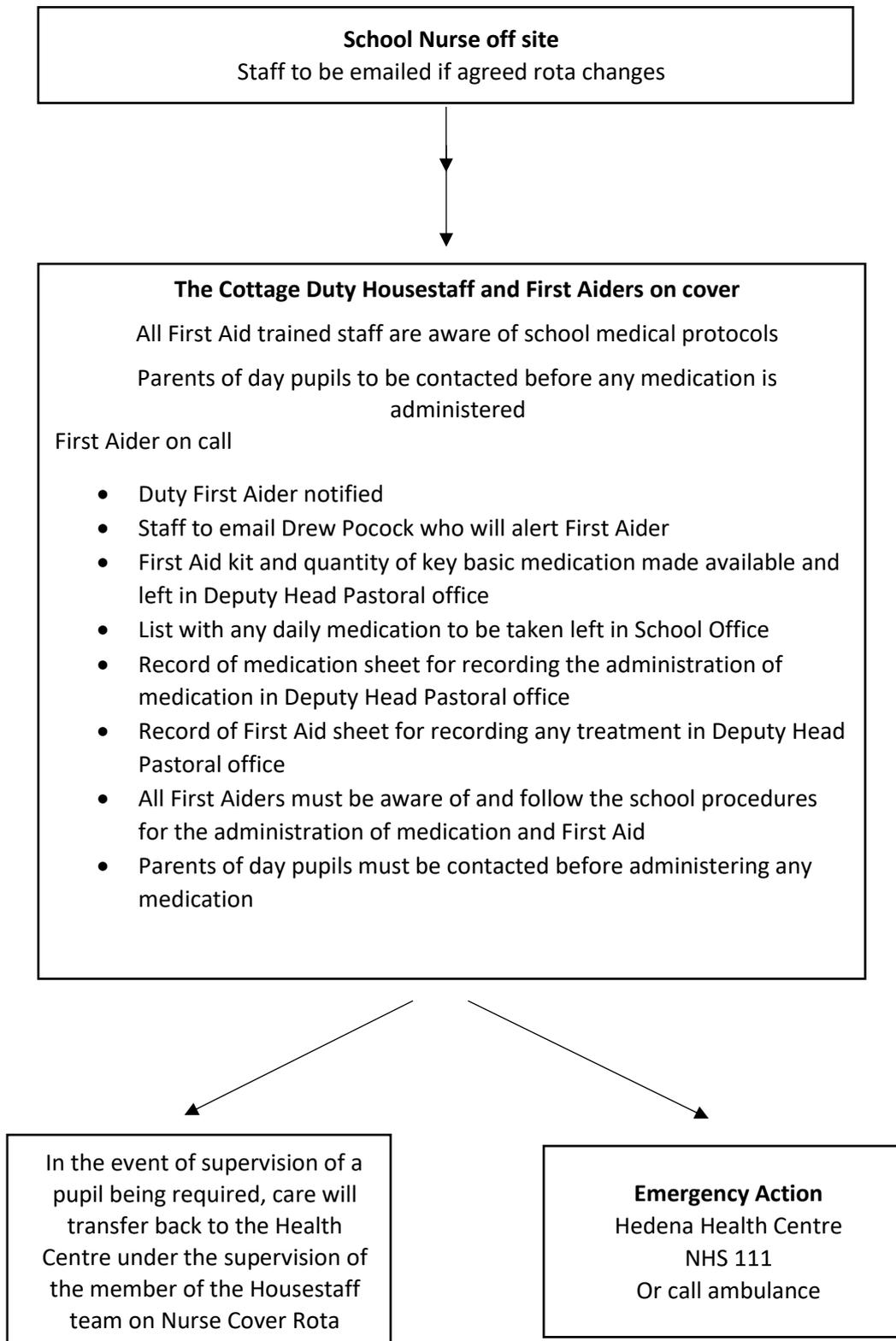
Protocol for Medical Care During Out-of-School Hours



Process for Medical Care when the School Nurse is off site – EYFS and Pre-Prep Department



Process for Medical Care when a School Nurse is off site – Prep Department and Senior School



Annex Dealing with particular conditions

Asthma Emergency Guidelines for School Staff

In an asthma attack the muscles of the air passages in the lungs go into spasm and the linings of the airways swell. As a result, the airways become narrowed and breathing becomes difficult. Sometimes there is a specific trigger for an asthma attack such as:

- An allergy
- A cold
- Cigarette smoke
- Extremes of temperature
- Exercise

People with asthma usually deal well with their own attacks by using a blue reliever inhaler, however you may be required to assist someone having an asthma attack or having an attack for the first time.

Recognition Features

- Difficulty in breathing, with a very prolonged exhaling phase.

There may also be:

- Wheezing as the casualty breaths out.
- Difficulty speaking and whispering.
- Distress and anxiety.
- Coughing.
- Features of hypoxia, such as a blue-grey tinge to the lips, earlobes and nailbeds.

Treatment

Your aims during an asthma attack are to ease the breathing and get medical help.

- You need to keep the casualty calm and reassure them. If there is a second person available ask them to call the Health Centre
- If they have a blue inhaler, then encourage them to use it. It should relieve the attack within a few minutes. If you are alone call the health centre at this point.
- Encourage the casualty to breath slowly and deeply.
- Encourage the casualty to sit in a position that they find most comfortable.

DO NOT LIE THE CASUALTY DOWN.

- A mild asthma attack should ease within 3 minutes, if not encourage them to use their inhaler again.

IF THE CASUALTY BECOMES WORSE OR IF THEY BECOME UNCONSCIOUS (Place in recovery position) CALL AN AMBULANCE IMMEDIATELY.

Diabetes/Hypoglycaemia (Low Blood Sugar) Emergency Guidelines for School Staff

When the blood-sugar level falls below normal (hypoglycaemia) brain function is affected. This problem is sometimes recognised by a rapidly deteriorating level of response.

Hypoglycaemia can occur in people with diabetes mellitus and, more rarely, appear with an epileptic seizure or after an episode of binge drinking.

Recognition Features

There may be:

- A history of diabetes; the casualty may recognise the onset of a 'hypo' attack.
- Weakness, faintness or hunger.
- Palpitations and muscle tremors
- Strange actions or behaviour; the casualty may seem confused or belligerent.
- Sweating and cold, clammy skin.
- Pulse may be strong and rapid.
- Deteriorating level of response.
- Diabetic's warning card, or medic alert necklace/ bracelet, insulin syringe on person or glucose gel.

Treatment

Your aim is to raise the sugar content of the blood as quickly as possible and to obtain medical help.

- Help the casualty sit down.
- If a second person is available ask them to phone the Health Centre
- If the casualty is conscious and able to swallow, give them a sugary drink, sugar lumps, chocolate or any other sweet food.
- Alternatively, if they have their own glucose gel help them to take it, then call the health centre.
- If the casualty is unconscious but breathing normally place in the recovery position. Any concerns regarding breathing place in recovery position and phone for an ambulance and then the Health centre.
- If the casualty is conscious but not fully and is unable to swallow phone the health centre. They may be agitated and resist being placed in the recovery position but if possible do so.

Seizures: Emergency Guidelines for School Staff

A seizure- also called a convulsion or fit – consists of involuntary contractions of many muscles in the body.

The condition is due to a disturbance in the electrical activity of the brain. Seizures usually result in the loss or impairment in consciousness.

The most common cause is epilepsy. Other causes include:

- Head injury
- Some brain damaging diseases
- Shortage of oxygen or glucose in the brain
- The intake of certain poisons including alcohol.

Recognition Features

General recognition features are:

- Sudden unconsciousness
- Rigidity and arching of the back
- Convulsive movements

In epilepsy the following sequence is common:

- The casualty suddenly falls unconscious, often letting out a cry.
- They become rigid, arching his back
- Breathing may cease. The lips show a grey- blue tinge and the neck and face may become red and puffy.
- Convulsive movements begin. The jaw may be clenched and breathing may be noisy. Saliva may appear at the mouth and may be blood stained if the tongue or lips have been bitten. There may be loss of continence.
- Muscles relax and breathing becomes normal; the casualty recovers consciousness, usually within a few minutes. They may be dazed or act strangely. They may be unaware of their actions.
- After a seizure, the casualty may feel tired and fall into a deep sleep.

Aims

- To protect the casualty from injury
- To give care when consciousness is regained
- To arrange removal of the casualty to hospital if necessary

Treatment

- if you see the casualty falling, and if it will cause no harm to yourself, try to ease the fall
- make space around them, ask bystanders to move away and someone to phone the Health Centre
- remove potentially dangerous items such as sharp objects and hot drinks.
- Note the time the seizure started and finished.
- If possible, protect the casualty's head by placing a soft padding underneath it.
- Loosen clothing around the casualty's neck. If you are alone call the health centre at this point.

When the seizure has ceased

- Open the airway and check breathing.
- Be prepared to give rescue breaths and chest compressions if required and you are trained/able to do so. In this instance call an ambulance do not wait for Nurse to arrive.
- If breathing is normal place in the recovery position.
- Note duration of the seizure.

Caution

Do not attempt to restrain the casualty or place anything in their mouth