

First aid and the administration of medicine

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1. Policy Statement

1.1 At Embley we are committed to ensuring that every pupil (including those in our EYFS setting and in Boarding), every member of staff and every visitor will be provided with adequate first aid in the event of an accident or illness.

1.2 Embley is also committed to enabling all pupils to have full access to the curriculum, including those who have both short term and long term medical needs. To this end we are committed to ensuring that the impact of their medical difficulties upon their life in school is minimised as far as possible and that all staff who work with such pupils understand the nature of their difficulties and how best to help them. While there is no legal or contractual duty on teachers to administer medicines or supervise pupils taking their medicines, nevertheless we would wish to support our pupils where we can.

1.3 The prime responsibility for a pupil's health lies with the parent or carer who is responsible for the pupil's medication and should supply the school with all and any relevant information.

1.4 Procedures and information set out in this document aim to ensure that:

1.4.1 all members of the school community are aware of the procedures to follow in the event of an accident, the support available and the role that they play.

1.4.2 staff members receive appropriate training in First Aid and the support of individual pupils with particular medical needs.

1.4.3 effective management systems are in place to support individual pupils with medical needs.

1.4.4 medicines are recorded, handled, stored and administered responsibly.

1.4.5 first aid provisions are available at all times while pupils or employees are on school premises, and also off the premises whilst on visits or trips.

1.4.6 all incidents involving medical assistance are properly recorded.

1.4.7 there is appropriate liaison between the school, parents, and the medical services. Parents are responsible for keeping the matrons informed of any medical updates.

1.5 By implementing this policy, we will be helping to ensure that all members of the Embley community should be healthy, stay safe, enjoy and achieve, and be able to make a positive contribution.

1.6 To this end, all staff, including non-first aiders, have a responsibility in ensuring the welfare of pupils by ensuring that:

1.6.1 they are familiar with the first aid procedures in operation and know who the current First Aiders are and how they can be located.

1.6.2 pupils are sent to the surgery in the Senior School and the medical room via Reception in the Prep School if there is any reasonable concern about an injury or illness. Safety is paramount at all times.

1.6.3 they are aware of their role 'in loco parentis' and the need for them to take swift action in an emergency, both in school and offsite.

1.6.4 pupils are aware of the first aid procedures.

1.7 As a registered provider Embley will notify Ofsted of any breaches of policy in the administering of medicines and any serious accident, injury to, or death of, any child whilst in their care and of any action taken in respect of it. Notification will be as soon as practicable and within 14 days of the incident occurring.

1.8 This policy applies to all members of our school community, including boarders and those in our EYFS setting.



Embley is fully committed to ensuring that the application of this First Aid and the Administration of Medicines Policy is non-discriminatory in line with the UK Equality Act (2010). Further details are available in the school's Equal Opportunity Policy document.

1.9 Embley seeks to implement this policy through adherence to the procedures set out in the rest of this document.

1.10 This document is available to all interested parties on our website and on request from the Senior or Prep School offices and should be read in conjunction with the following documents:

- Educational Visits and Activities Offsite
- Risk Assessment

PART A

1. Key Personnel

1.1 The **School Matron** is Mrs Helen Gale (extension 311). They are based in the surgery on the Senior School site but also provides guidance to the Prep School office staff who are responsible for first aid.

The School Matron is registered with the Nursing and Midwifery Council and will always act within her scope of practice and adhere to the code and conduct of the NMC at all times. The Headmaster's PA checks her annual verification from the NMC. She will adhere to the School Matron's Confidentiality Policy (see Part F), has completed the First Aid at Work [FAW] training, and has access to professional guidance and consultation through the school GP surgery, Abbeywell Surgery in Romsey.

1.2 A large number of school staff are designated **First Aiders** (see Appendix). They are based in a variety of locations around the school sites and a list is posted at various points around the site. First Aid assistance can always be called for via Reception (ext 300) in the Senior School and the Office (ext 378) at the Prep School.

First Aiders at Embley have undertaken training and have a qualification approved by the HSE. They hold a valid certificate of competence in either **Emergency First Aid at Work (EFAW)** or **First Aid at Work (FAW)**. This training enables them to give emergency first aid to someone who is injured or becomes ill whilst on the school premises. Some of those with the FAW qualification have also completed the Paediatric First Aid training and are also permitted to administer prescribed medicines.

1.3 First Aiders at Embley are co-ordinated by the Bursar and the Health and Safety Co-ordinator, who are responsible for ensuring that:

1.3.1 First Aid qualifications and insurance (provided by the school) is up to date [copies of certificates are kept by the Health and Safety Co-ordinator, who is also the First Aid Trainer.

1.3.2 The list of First Aiders is kept up to date and posted around the school in the designated locations for the benefit of staff, pupils and visitors (see Appendices A and B).

1.3.3 Information on the location of equipment, facilities and first aid personnel is provided to staff via the staff handbook.

1.3.4 The First Aid Notice Board in the staff rooms are kept up to date.

1.3.5 There is a First Aider present on each school site when pupils are present.

1.3.6 There is someone with the relevant paediatric First Aid training (minimum of 12 hours training) on a site where EYFS are present – including on visits.

1.3.7 The number of First Aiders (both EFAW and FAW trained) is adequate to provide First Aid cover during the school day and after school hours for boarding pupils and for after school activities.

1.3.8 In the EYFS setting provision is made for at least one person on the premises or an outing to have a current paediatric first aid certificate. Their training will be local authority approved and relevant for workers caring for young children. Any assistant, who may be in sole charge of the children for any period of time, must hold a current Paediatric certificate.

2. First Aid Equipment and Information

2.1 Medical Centre

A fully stocked and suitable Medical Centre (surgery) is available on the Senior School site and is supervised by the School Matron. The Centre includes toilet, shower, two beds in separate rooms with sinks, a small office area and

main surgery area. On the Prep School site, pupils are supervised in the medical room and the School Matron will attend at the request of Mrs Janaway, Ms Ferriroli or Mrs Boterhoek in the Prep School Office.

2.2 First Aid Information

Information about First Aiders at Embley is available in various locations around the school including the following:

Senior school:

- Reception
- Medical Centre
- Sixth Form
- Staff Room
- Science prep Rooms
- PE Department Office
- Maintenance Department
- Kitchen (responsibility of Chartwells Independent)
- All School minibuses
- Small first aid boxes in DT room, science department, astro turf, staff room, minibuses

Prep School

- School Office
- Staff Room
- Kitchen (responsibility of Chartwells Independent)
- Creche room
- Nursery
- PE Office

2.3 Pupils with Known Conditions

2.3.1 The medical departments in both school provide a list of pupils with known conditions in the staffroom and kitchen – with photographs. The kitchens also have lists of any pupils with allergies (with photographs). Spare EpiPens are kept in the kitchens and all new children with allergies are introduced to kitchen staff.

2.3.2 All staff are first aid trained to deal with specific conditions such as epilepsy, asthma and diabetes.

2.3.3 For asthmatics – the school has Volumatic pumps for administering medication quickly.

[See Part C of this document for further details of the treatment of pupils with specific medical conditions]

2.4 First Aid Supplies

The School Matron (Senior School) and Mrs Janaway (Prep School) will ensure that:

2.4.1 An adequate number of first aid containers are available and easily accessible on the Senior and Prep School sites.

2.4.2 All first aid containers are marked with a white cross on a green background.

2.4.3 Each school minibus carries a small travelling kit. In line with the Educational Visits Policy and Procedures, this is supplemented by full travelling kits for trips which staff collect from surgery.

2.4.4 First aid containers are well stocked and available for PE staff to carry with them during games, PE and fixtures. PE staff carry their own and we, when requested, replace.

2.4.5 Eye wash tubing is based in the science laboratories, where technology and art takes place, where there are significant volumes of hazardous substances such as pesticides and swimming pool chemicals stored.

2.4.6 First aid containers are fully stocked and available from the Senior School surgery or the Prep School medical room and staff rooms.

2.4.7 Spare stock is stored in the surgery and medical room.

2.4.8 All containers are regularly checked for stock levels and expiry dates each term by staff in each department.

2.4.9 Contents of all first aid containers adhere to the guidelines stipulated by the HSE.

3. What to do in the event of an incident requiring medical assistance

3.1 If a person becomes unwell

A pupil, member of staff or visitor who becomes unwell during a lesson or activity may, if they are able, be sent to the Surgery (Senior School) or School Office (Prep School) to seek assistance. They should always be accompanied by another person.

3.2 If a person is involved in an accident or medical emergency

3.2.1 **Call for assistance from the nearest First Aider** or the School Matron.

3.2.2 Ensure that other pupils in the vicinity are safe and supervised.

3.2.3 The First Aider who attends will take charge and will decide on and, if appropriate, administer the relevant First Aid treatment.

3.2.4 All incidents must be recorded and parents informed in line with the Recording and Reporting procedures set out below (Section 4).

3.3 If there is a serious accident or medical emergency necessitating an ambulance or visit to the local doctor (Matron must be contacted and if on school premises will attend all serious injuries/accidents)

3.3.1 Any person who believes that a situation requires it may **telephone for an ambulance**. Dial **999 /112** from any telephone. **DO NOT LEAVE THE CASUALTY ALONE** in order to do this – ask a colleague. (If you send someone else to make the call, ensure that you tell them to return straight to you in order to inform you of the 999 call having been successfully made.).

3.3.2 After an ambulance has been requested, if they have not already been alerted, inform the Matron, Headmaster, either Senior School Deputy Head or Prep School Head. They will, in turn, inform relevant senior colleagues.

3.3.3 Another member of staff should await the arrival of the emergency services and direct them appropriately.

3.3.4 Call for assistance from the nearest First Aider and the School Matron.

3.3.5 Ensure that other pupils in the vicinity are safe and supervised.

3.3.6 The First Aider who attends will take charge and will decide on and, if appropriate, administer the relevant First Aid treatment.

3.3.7 The member of staff who initially called for assistance will stay with the casualty at least until the First Aider has taken responsibility for the welfare of the casualty concerned. This may include escorting them to the hospital if required.

3.3.8 If they are not already present, inform the School Matron or Prep School Office staff immediately of the incident /accident.

3.3.9 A familiar member of staff will accompany the casualty in the ambulance and at the hospital until the parent or guardian arrives. The Head in the Prep School and Deputy Head Pastoral in the Senior School will arrange any necessary teaching cover.

3.3.10 Where there is an urgent need for surgical or medical treatment to be given and the parents cannot be contacted, the decision about the competence of the pupil to give or withhold consent to urgent surgical or medical treatment, in the absence of the parent, must be the responsibility of the doctor.

3.3.11 All incidents must be recorded in line with the Recording and Reporting procedures set out below (Section 4)

3.4 Hygiene and infection control when dealing with a medical incident

3.4.1 Common sense infection control measures (such as hand washing and the use of disposable gloves when dealing with blood or bodily fluids) must be followed by all staff when dealing with medical incidents.

3.4.2 Hand washing facilities and/or alcohol gel dispensers are available throughout the school.

3.4.3 Single use disposable gloves are to be found in medical kits and must be used at all times when providing treatment involving blood or body fluids.

3.4.4 Cleaning staff should always be called (when in school) to deal with the clearing up of spillages of bodily fluids and any items contaminated must be disposed of in line with the HSE guidance. In the absence of cleaning staff should follow the same procedure. Yellow bags for the disposal of contaminated items are available from Surgery in the Senior School or the Prep School Medical Room.

3.5 Head injuries – Embley Head Injury Policy

3.5.1 **All head injuries should be regarded as potentially serious**, irrespective of the extent of external injury. It is important to monitor any person with a head injury very carefully, looking for key signs such as sickness, dizziness, incoherence or drowsiness. If in doubt, or if any of the key signs are exhibited, seek medical help. **The school policy with regard to head injuries is always to ‘play safe’.**

3.5.2 Parents will be asked to collect their child and seek expert medical attention.

3.5.3 The School Matron or Prep School Office staff will ensure that **any pupil who has been treated for a head injury, no matter how minor, takes home a note** advising parents of developing symptoms that may require medical investigation. (‘Head Case’ card)

4. Accident Reporting and Record Keeping

4.1 Where there is an accident or medical emergency and first aid assistance has been provided **the person who has administered First Aid must record the incident** according to the procedure outlined in procedures in the Staff Handbook and set out below. In line with statutory requirements, all accidents / incidents as described in the Health and Safety policy are recorded on A.R.M.S online system

4.2 Parents are initially notified of an incident involving their child by the School Office and must be kept sensibly informed by an appropriate member of staff. The School Matron or Prep School Office staff will be responsible for ensuring that parents are notified of significant incidents / accidents both verbally and in writing. (For Nursery – Y6 copies of the accident report form are provided to the form teacher and also a copy sent home for the parent to be checked

4.3 How to record an accident or medical incident

4.3.1 Any incident /accident must be **recorded A.R.M.S** by the person attending the casualty or dealing with the incident.

4.3.2 The **record of first aid treatment** given by a First Aider or appointed person is entered on to A.R.M.S and iSams by the first aider.

- Full name of injured/ ill person
- Detail of the injury/illness and what first aid treatment was given
- Any review of the person's condition
- Electronic signature of the first aider or appointed person dealing with the incident

4.3.3 Once an Accident or Incident Report has been put on A.R.M.S this will be viewed by **the Bursar (Claire Brighton)**.

4.4 Informing the HSE or RIDDOR - statutory requirements & Notifiable Incidents and Diseases

4.4.1 In line with the Accident, Records and Notification procedures in the United Learning Group Health and Safety document (page 13). Claire Brighton, Bursar at the school, will notify the HSE, under RIDDOR, of any serious accident, illness or serious injury to, or death of, any pupil whilst in our care, and of action taken in respect of it. For EYFS pupils Ofsted will also be notified and will be notified of any instance in connection to medicines which leads to such an event. A pupil's GP has the responsibility of reporting notifiable diseases and ensuring that a pupil is safe to return to school and not cause public health problems from infections. For boarders, this role will be fulfilled by Abbeywell Surgery, Romsey, if appropriate during term time. However, the school may also seek advice from the Health Protection Agency if a pupil is believed to be suffering from a notifiable disease as identified under the Health Protection (Notification) Regulations 2010 (see Appendix C). For pupils in our EYFS, notification will be made to Ofsted as soon as is reasonably practicable, but in any event within 14 days of the incident occurring.

4.4.2 If Embley, without reasonable excuse, fails to comply with this requirement, we commit an offence.

4.4.3 Contact details for Ofsted are as follows: www.ofsted.gov.uk or by telephone on 0300 123 4666.

4.4.4 The Bursar responsible for ensuring that the HSE, at the HSE Incident Contact Centre at www.hse.gov.uk/contact/index.htm, is notified without delay about the above accidents and then followed up with a completed RIDDOR form (F2508) within 10 days. These can be accessed online www.hse.gov.uk/riddor/online or by telephone **0845 300 99 23**.

4.4.5 Details of RIDDOR accidents will be made available to the Health and Safety Committee and will also be forwarded to UNITED LEARNING Central Office.

5. Risk Assessment for Medical and First Aid Needs

5.1 Reviews are to be carried out annually by the Health and Safety co-ordinator and the Heads of Departments (including the Heads of Boarding) and recommendations for prevention or control of identified risks are forwarded to the Headmaster for consideration.

5.2 During this monitoring and evaluating the following aspects are considered:

- any changes to staff, building/site, activities, off site facilities
- further training and refresher courses required for staff
- specific hazards in time or place
- specific health needs, i.e. epilepsy, serious allergies
- numbers of first aiders required in both time and place
- accident statistics - aimed at finding ways to reduce number of preventable injuries.

PART B

1. Administration of Medicines Policy

1.1 Policy Statement

Most pupils will at some time have a medical condition that may affect their participation in normal school life. This may either be a short-term condition which is quickly resolved or a long-term condition with pupils having medical needs that limit their access to education. At Embley we aim to work with the parents to provide measures to minimise the impact of medical difficulties on the pupil's school life.

Parents or guardians have prime responsibility for their children's health and should provide the school with information about their child's medical conditions.

Whilst there is no legal duty requiring staff to administer medicines or supervise pupils taking their medicines, we wish to support pupils where we can but will only accept medicines in school in line with the procedures set out below if deemed absolutely essential, i.e. where it would be detrimental to a pupil's health if the medicine were not to be taken during the school day. Our preferred approach is to encourage parents wherever possible to administer medicines before and after school, and just before bedtimes. Parents are encouraged to refer to their GP on issues of dosage with this in mind.

For specific information on our Provision of Medication and Medical Care to Boarding Pupils at Embley, please see part D of this document.

1.2 Aims

The aims of this policy are to ensure:

- 1.2.1 The school assists parents in providing medical care for their children.
- 1.2.2. Staff and pupils are educated in respect of special medical needs.
- 1.2.3 Training is arranged for staff who volunteer to support individual pupils with special medical needs as appropriate.
- 1.2.4 There is appropriate liaison with the medical services as necessary.
- 1.2.5 Relevant national guidance in relation to medication in schools is adopted and implemented the responsibilities for the administration of medicines are set out clearly.

1.3 Non-prescribed medication

1.3.1 Embley does allow on site and administers non-prescribed medicines to the pupils in our care; these include over the counter medicines such as Calpol/Aspirin etc. Aspirin based products are only to be provided in EYFS following written advice or a prescription from a GP.

1.3.2 In the event of parents requesting this they should be referred to the Headmaster who may arrange for the School Matron to administer such medicines. Similarly, in the Prep School, parents requesting this should be referred to the Head of prep School who may arrange for Mrs Janaway to administer such medicines. For the Prep School, in these cases, medication should be brought to the Prep School Office where parents will be given a form to provide written consent for the school to administer the medication. These forms should be completed each week and every time medicine/symptoms change. Any such administering of non-prescription medication is recorded in the school's medications book. In circumstances where on-going medication is required (i.e. antihistamines, pain relief) parents will be advised via written notification sent home with the pupil if and when medication has been administered on a particular day.

1.3.3 The records indicate the following (only in the Prep School):

- Date and time medication administered
- Full name of pupil
- Reason for administering the medication
- Dose, method and form of medication
- Signature and name of person administering the medication.

1.4 Prescribed medicines

1.4.1 The school only accepts medicines that have been supplied by a registered doctor, dentist, the School Matron or pharmacist prescriber. The medicines must be provided in the original container (as dispensed by the pharmacist), be clearly labelled with the pupil's name and include prescriber's instructions for administration.

1.4.2 For the Prep School, in these cases, medication should be brought to the school office where parents will be given a form to provide written consent for the school to administer the medication. These forms should be completed each week and every time medicine/symptoms change. Any such administering of non-prescription medication is recorded in the school's medications book. In circumstances where on-going medication is required (i.e. antihistamines, pain relief) parents will be advised via written notification sent home with the pupil if and when medication has been administered on a particular day.

1.4.3 ONLY the first-aiders below are authorised to administer prescribed medicines:

Mrs Helen Gale(SS matrons) Mrs Janaway (with a witness present) plus all boarding staff who have received relevant training from the School Matron. And completed the OPUS dispensing of medicine course.

We do NOT accept medicines that have been removed from their original container nor make changes to dosage on parental instruction.

1.4.4 Medication will be returned to the parent at the end of each day, whereupon the parent will be advised what time the medication was administered (which will be in line with the information provided by the parent on the medical form). In the event of a pupil using school transport, prescribed medication must be brought in by the parent and collected by the parent (it is often the case that parents must request double quantities of prescribed medication).

1.4.5 A self-medication form will be completed by the pupil if deemed competent by the matrons to self-administer any prescribed medications.

1.5 Record keeping

1.5.1 Clear written records will be maintained for all medication given in school in a DAILY LOG and entered on to iSAMs. Entries to The DAILY LOG are made in ink in chronological order and it is kept in the Senior School Surgery and in the Prep School Office. It is in an approved format and entries are kept until the pupil in question has attained the age of 22.

1.6 Refusing medication

If a pupil refuses to take any prescribed medication, staff at Embley do not force them to take it. The school will inform the parents as soon as possible if this occurs.

1.7 School trips

6.7.1 Embley tries to encourage all pupils with special medical needs to participate in school trips where safety permits.

6.7.2 Any medication taken out on a trip must be signed out and signed in again by the trip organiser.

6.7.3 Teachers taking pupils out on Learning Outside the Classroom (LOC) activities should take appropriate first aid kits with them.

7.7.4 Staff supervising pupils on school trips are made aware of any medical needs in their information pack. The School Matron or Prep School Office Staff will advise on any special precautions or emergency procedures that may be required. A First Aid bag is provided by the School Matron or Prep School Office Staff for all school tips and all EYFS trips will be accompanied by a First Aider who has the necessary paediatric First Aid training. Medicines are only administered on school trips by experienced members of staff following written instructions.

1.8 Storage of medication

1.8.1 All medication is locked away in the surgery (Senior School site) and medical room (Prep School site). Pupils and staff know how such medication can be accessed.

1.8.2 Asthma inhalers and EpiPens are NOT locked away and are readily available to staff and pupils.

1.8.3 Where medication needs to be refrigerated this is placed in a fridge available for this purpose in the Senior School surgery or Prep School medical room. Access to this refrigerator is restricted to first aiders **and** medicine must never be put onto a fridge shelf containing food.

1.9 Disposal of medication

School staff will not dispose of any prescribed medication. Parents are required to collect all prescribed medication held at school at the end of each term and are responsible for the disposal of expired medication.

1.10 Legislation

1.10.1 The procedures in this section have regard to the National '**Pastoral Practitioners Organisation**' who also advise that all schools develop effective management systems to support individual pupils with medical needs, in accordance with the '*Medicines Standard of the National Service Framework for Children*'. Embley understands that failing to comply with them could make the school and staff both civilly and criminally liable.

1.10.2 Embley recognises its responsibility to adhere to the following areas of legislation:

The Medicines Act 1968

The Misuse of Drugs Act 1971

The Controlled Drugs (Penalties) Act 1985

The Health and Safety at Work act 1974

Management of Health and Safety at Work Act 1999

Control of Substances Harmful to Health Regulations 2002

The Education (School Premises) Regulations 1999

The Education (ISS) (England) Regulations 2003

Part 4, The Disability Discrimination Act as amended by the SEN and Disability Act of 2001. First Aid Regs and RIDDOR

PART C

1. Management of Medical Conditions

ASTHMA

1.2 Asthma is a condition of the respiratory system – it affects the airways in the lungs. When a person with asthma comes into contact with something that irritates their airway [an asthma trigger], the muscles around the walls of the airway tighten so that the airways become narrower and the lining of the airways become inflamed and start to swell. Sometimes sticky mucous or phlegm builds up which can further narrow the airways. This makes it difficult to breathe and leads to symptoms of asthma.

1.2 Recognition of an asthma attack

- The airways in the chest become restricted
- The pupil may only be able to speak with difficulty
- The pupil may wheeze, unable to breathe out
- The pupil may become distressed, anxious, exhausted, have a tight chest or may even go blue around the lips and mouth

1.3 What to do if a pupil has an asthma attack

1.3.1 **Call for help from the School Matron** (ext 311) or Mrs Janaway PS (ext 378).

1.3.2 If the School Matron is not available call for a first aider – via Reception (ext 300) at Senior School, or the Office (378) at the Prep School.

1.3.3 Ask a member of staff to get the pupil's emergency box from the surgery at the Senior School site or from the school office at the Prep School.

1.3.4 **Ensure that the reliever medicine** is taken. The medication must belong to the pupil having the asthma attack.

1.3.5 Note that some pupils may not have spare medication stored with school.

1.3.6 **Stay calm and reassure the pupil.** Attacks can be frightening, so stay calm, the pupil has probably been through this before. It is very comforting to have a hand to hold but do not put your arm around the pupil's shoulder as this is very constrictive. Listen carefully to what the pupil is saying. Loosen any tight clothing.

1.3.7 **Encourage the pupil to breathe deeply and slowly.** Most people find it easier to sit upright or lean forward slightly. Lying flat on the back is not recommended.

1.3.8 Call 999/112 and request an ambulance urgently if:

- The reliever has no effect after five or ten minutes
- The pupil is becoming distressed or unable to talk
- The pupil is getting exhausted, becomes disorientated or collapses
- The pupil looks blue
- You have any doubts at all about the pupil's condition.

1.3.9 The pupil's parents or guardian will need to be informed after an attack even if relatively brief.

1.3.10 Minor attacks should not interrupt a pupil's involvement in the school. As soon as the pupil feels better they can return to school activities.

1.4 Please contact the School Matron for advice, help and support and for further information or training regarding the practical use of asthma inhalers.

1.5 Policy

In developing this set of procedures, has regard to the guidance of the National Asthma Campaign, Asthma UK and the School Matrons. In recent years the incidence of childhood asthma has doubled, and the school recognises its responsibility in dealing with pupils appropriately.

1.5.1 Embley understands the importance of ensuring the pupils feel safe and secure.

1.5.2 Embley recognises that asthma is a widespread, serious but controllable condition and welcomes pupils with asthma.

1.5.3 Embley tries to ensure that its environment is favourable to pupils with asthma.

1.5.4 Embley encourages, helps and supports pupils with asthma to achieve their potential and to participate fully in aspects of school life.

1.5.5 Pupils with inhalers are expected to have been educated in their use by parents or carers.

Pupils with inhalers are expected to know their whereabouts and to take them to sports activities, fixtures, day trips and swimming.

1.5.6 Pupils with severe asthma will have an Individual Health Care Plan.

1.5.7 All Embley staff, through reading of this document, should have an understanding of what it means to be asthmatic, signs and symptoms of an asthma attack and what to do in an emergency.

1.5.8 All staff must understand that access to inhalers is vital. The majority of pupils keep spare inhalers, labelled with the pupil's name. Seniors: in the surgery at the Senior School site. Preps: Spare inhalers for every asthmatic child are kept in the medical room. They are collected by the pupils when they leave the site for PE or games lessons or they use the one that they have with them.

1.5.9 Some pupils may not have spare medication kept by the School and, instead, responsibly carry it themselves.

1.5.10 Pupils are encouraged through the school's PSHE programme to understand their condition so that they can support their friends.

1.5.11 All staff, teaching and non Embley -teaching, are informed of pupils with asthma by the School Matron or Mrs Janaway and via the medical information register.

1.5.12 A printout of pupils' medical conditions and Individual Health Care Plans is available to all staff and kept confidentially and are available from the School Matron or Mrs Janaway.

1.5.13 Advice and further information is available from the School Matrons.

1.5.14 The School keeps spare inhalers.

1.5.15 Embley is committed to working in partnership with all parties to ensure the policy is implemented and maintained and to ensure effective communication of the policy.

EPILEPSY

1.6 Epilepsy is a tendency to brief disruption in the normal electrochemical activity of the brain, which can affect people of all ages, backgrounds and levels of intelligence. It is not a disease or an illness, but it may be a symptom of some physical disorder. However, its cause – especially in the young – may have no precise medical explanation.

1.7 Tonic Clonic Seizures (arinal mal)

The person may make a strange cry and fall suddenly. Muscles first stiffen and then relax, and jerking or convulsive movements begin which can be quite vigorous. Saliva may appear around the mouth and the person may be incontinent.

1.8 Complex and partial seizures (temporal lobe seizures)

These occur when only a portion of the brain is affected by excessive electrical discharge. There may be involuntary movements, such as twitching, plucking at clothing or lip smacking. The person appears conscious but may be unable to speak or respond during this form of seizure. Ensure safety of the person – gently guide away from dangers and speak calmly to the person and stay until they recover.

1.9 Absence (petit mal)

This can easily pass unnoticed. The person may appear to daydream or stare blankly. There are very few signs, if any, of an 'absence/petit mal' seizure. This can lead to serious learning problems as the seizures may be frequent and the person does not receive any visual or aural messages during those few seconds. Therefore, it is so important to be understanding, note any petit mals and inform parents.

Teachers can play an important role in the recognition of epilepsy and in the recognition of changing patterns or an increased rate of seizures.

PROCEDURE FOR AN EPILEPTIC SEIZURE

1.10 Total seizure (total clonic)

1.10.1 **Keep calm** – pupils will tend to follow your example! Let the seizure follow its own course. It cannot be stopped or altered.

1.10.2 Ask the other pupils to leave the room and ask a responsible pupil to fetch another adult.

Call or send for help from the School Matron (Senior School) (ext 311) or Mrs Janaway, Mrs Boterhoek or Mrs Ferriroli in the Prep School Office (Prep School) (ext 378).

1.10.3 If the School Matron is not available call for a first aider – via Reception (ext 300.) at Senior, the Office (376) at the Prep School.

1.10.4 **Note the time.**

1.10.5 **Refer to the pupil's Individual Health Care Plan** which can be accessed from the School Matron or Mrs Janaway.

1.10.5 If the pupil has emergency medication, **ask a member of staff to get the pupil's emergency box** from the surgery at the Senior School site or from the office at the Prep School.

1.10.6 **Administer the prescribed medication** as per instruction – kept with the emergency medication – according to the pupil's Individual Health Care Plan.

1.10.7 **Protect the pupil from harm.** Only move the pupil during the seizure if you have to for their protection. If possible move any objects that may hurt them, rather than move them from dangerous objects.

1.10.8 As soon as possible (normally post-seizure) **place the pupil on their side** – this does not have to be true recovery position – just so that the tongue falls forward so that any saliva can drain out of the mouth easily.

1.10.9 **Put something under their head** to protect them from facial abrasions if at all possible.

1.10.10 **Try not to leave the pupil alone if at all possible.** If you need to leave the pupil, make sure there is something behind their back to try to maintain a sideways position.

1.10.11 **Talk quietly to the pupil** to reassure them but do not try to restrain any convulsive movements.

1.10.12 **Do not place anything in their mouth.**

1.10.13 **Minimise any embarrassment** as during the fit the pupil may be incontinent – cover with a blanket to keep warm.

1.10.14 **Once recovered, move them to the surgery or medical room.**

- If possible, ask other pupils to leave the surgery or medical room – perhaps sick pupils could sit in the Reception area.
- Allow the pupil to sleep on their side. Do not leave them alone as the seizure may be the first of a cluster – leave with the School Matron or a First Aider.

1.10.15 **Call the pupil's parent/guardian** and request the pupil be collected from school so that they can sleep as long as needed. If the seizure occurs in the morning they may even be able to return in the afternoon. This is a very individual decision and will be left to the parent to decide.

1.10.16 **If the seizure lasts five minutes or longer call an ambulance immediately.**

- If a seizure lasts that long, it is likely to last longer. It is very important that the pupil goes to hospital and gets the proper treatment within one hour of the beginning of the seizure. If you are concerned or the pupil has received injury e.g. due to a fall, call an ambulance. We are advised it is better not to call an ambulance if the seizure lasts less than five minutes as they are better off left in peace and quiet.
- When the ambulance arrives, report to the paramedic details of the seizure – especially how long it has lasted. If the parent arrives, report the details of the seizure to them.
- An appropriate member of staff must accompany the pupil in the ambulance and stay with them until the parents arrive.

1.10.17 **Ensure any pupils who were present at the time of the seizure have a chance to talk it over with the School Matron.**

1.11 Please contact the School Matron for advice, help and support and for further information or training in the administration of emergency epileptic medication.

1.11 Policy

In developing this policy, Embley has regard to the guidance of Epilepsy Action and the School Matron. The school recognises its responsibility in dealing with pupils appropriately.

1.11.1 Embley understands the importance of ensuring the pupils feel safe and secure.

1.11.2 Embley recognises that epilepsy is a common condition affecting many pupils and welcomes pupils with epilepsy.

1.11.3 Embley encourages, helps and supports pupils with epilepsy to achieve their potential and to participate fully in aspects of School life.

1.11.4 Pupils with epilepsy will have an Individual Health Care Plan.

1.11.5 All Embley staff, through reading of this document, should have a clear understanding of the condition epilepsy and what to do in the event of a pupil having an epileptic seizure.

1.11.6 Some pupils may have emergency medication – but it is NOT carried by pupils, so it is vital that all staff know where this is kept:

- Seniors: in the surgery at Senior site
- Prep School: in the Medical Room

1.11.7 The School Matron provides training for all staff on the use of epileptic emergency medication.

1.11.8 Pupils are encouraged through the school's PSHE programme to understand their condition so that they can support their friends.

1.11.9 Embley advises pupils with epilepsy to provide spare clothing to be kept in school especially underwear and socks.

1.11.10 All staff, teaching and non-teaching will be informed of pupils with epilepsy by the School Matron and Mrs Janaway, via the Medical Register.

1.11.11 A printout of pupils' medical conditions and Individual Health Care Plans is available to all staff and kept confidentially and are available from the School Matron or Mrs Janaway.

1.11.12 Advice and further information is available from the School Matron.

1.11.13 Embley is committed to working in partnership with all parties to ensure the policy is implemented and maintained and to ensure effective communication of the policy.

ALLERGIES AND ANAPHYLAXIS

1.12 An allergy is a hypersensitive reaction to intrinsically harmless antigens (substances, usually proteins, that cause the formation of an antibody and react specifically with that antibody). In susceptible individuals, the reaction may develop within seconds or minutes of contact with a trigger factor. Exposure may result in a severe allergic reaction (anaphylaxis) that can be life threatening. In an anaphylactic reaction, chemicals are released into the blood stream that widen the blood vessels and narrow the air passages. Blood pressure falls and breathing becomes impaired. The throat and tongue can swell thus increasing the risk of hypoxia (lack of oxygen in the blood).

1.13 Triggers can be

- Skin or airborne contact with particular materials
- Injection of a specific drug or insect bite
- Ingestion of a certain food, e.g. nuts, fish, eggs

1.14 Recognition

- Anxiety
- Widespread red blotchy skin eruption
- Swelling of the tongue and throat
- Puffiness around the eyes
- Impaired breathing from tight chest to severe difficulty in breathing

1.15 Serious symptoms

- Cold, clammy skin
- Blue-grey tinge around the lips
- Weakness/dizziness

- Feeling of impending doom

1.16 Progresses further

- Restlessness
- Aggressiveness
- Gasping for air
- Yawning (trying to get oxygen into the body to the brain)
- Unconsciousness

1.17 Treatment

1.17.1 Call or send for help from the School Matron ext 311 or Mrs Janaway ext 378.

1.17.2 If the School Matron is not available call for a first aider – via Reception (ext 300) at the Senior School, or the Office at the Prep School (ext 376).

1.17.3 Ask a member of staff to **get the pupil's emergency box from the surgery** at the Senior School site or from the office in the Prep School.

1.17.4 Administer antihistamine tablets/syrup as prescribed in the emergency box.

1.17.5 If the pupil feels better, allow them to rest and contact the parents.

1.17.6 **If the serious symptoms appear call for an ambulance and ADMINISTER ADRENALINE VIA EPIPEN IMMEDIATELY.** Instructions are kept in the emergency box with the EpiPen.

- Lie the pupil down if possible, and lift the legs up slightly
- Try and expose the thigh, especially if the pupil is wearing thick trousers. Remove the safety cap of the EpiPen
- Hold the EpiPen very firmly to the outer aspect of the thigh, at right angles to the leg o Press hard into the thigh, UNTIL A CLICK IS HEARD. Hold the EpiPen in place for a count of ten seconds
- Remove the EpiPen from the thigh and rub the area gently
- Do NOT throw the used EpiPen away
- Ensure the used EpiPen is taken to hospital with the pupil in the ambulance
- If the pupil is feeling no better or appears worse after ten minutes you may need to give a second injection if available (using the other thigh)

1.17.7 Stay with the pupil until the ambulance arrives.

1.17.8 Please contact the School Matron for advice, help and support and for further information or training in the administration of an EpiPen.

Policy

1.18 In developing this policy, Embley recognises the advice and guidance of the Anaphylaxis Society, Allergy UK and the School Matron. The School recognises its responsibility in dealing with pupils appropriately.

1.18.1 Embley understands the importance of ensuring the pupils feel safe and secure.

1.18.2 Embley recognises that allergic shock (anaphylaxis) is a common condition affecting many children and positively welcomes pupils with different types of allergies.

1.18.3 Embley encourages, helps and supports pupils with allergies to achieve their potential and to participate fully in aspects of School life.

1.18.4 All Embley staff will have a clear understanding, through reading of this document, of what it means to be allergic to a particular substance (whether the trigger of a reaction is skin or airborne contact, injection or

ingestion), signs and symptoms of a reaction, and what to do in the event of a pupil having an anaphylactic reaction, including the use of an EpiPen to administer emergency adrenaline.

1.18.5 The School Matron or Prep School Office Staff provides training for all staff and how to administer the emergency medication.

1.18.6 All staff must understand that immediate access to EpiPens and/or antihistamine tablets/syrup is vital. The School has at least one EpiPen and/or two antihistamine tablets or a bottle of antihistamine syrup which are be labelled correctly with the pupil's name and form, in a clear box.

1.18.7 Allergy boxes are kept in a large box labelled 'Emergency Medication' in the Medical Room at the Senior School site and in the Medical Room in the Prep School. Staff must familiarise themselves with these locations.

1.18.8 Please note that some pupils may not have spare medication in the emergency boxes – they carry it with themselves responsibly.

1.18.9 Pupils are encouraged through the school's PSHE programme to understand their condition so that they can support their friends.

1.18.10 All staff, teaching and non-teaching, will be informed of pupils with allergies via the medical register. A printout of pupils' medical conditions and Individual Health Care Plans is available to all staff and kept confidentially and is available from Matron or Mrs Janaway.

1.18.11 The school will also inform catering staff of pupils with food allergies, to ensure the pupils' dietary requirements are catered for.

1.18.12 Advice and further information is available from the School Matron.

1.18.13 Embley is committed to working in partnership with all parties to ensure the policy is implemented and maintained and to ensure effective communication of the policy.

DIABETES MELLITUS: TYPE 1 INSULIN DEPENDENT

1.19 Diabetes Mellitus is a condition when the body fails to produce sufficient amounts of insulin, a chemical that regulates blood sugar (glucose) levels. As a result, sugar builds up in the blood stream and can cause hyperglycaemia. People with diabetes control their blood sugar with diet (which provides a predictable amount of sugar and carbohydrate) and insulin injections. Pupils can have emotional, eating, behavioural and confidence difficulties as a result of their condition. Therefore, much support is required.

Hypoglycaemia – low blood sugar (below 4) Hyperglycaemia – high blood sugar (Above 10)

1.20 Causes of Hypoglycaemia

- Inadequate amounts of food ingested – missed or delayed
- Too much or too intense exercise
- Excessive insulin
- Unscheduled exercise

1.21 Recognition of Hypoglycaemia

- Onset is SUDDEN
- Weakness, faintness or hunger
- Palpitations, tremors
- Strange behaviours or actions
- Sweating, cold, clammy skin
- Headache, blurred speech

- Confusion, deteriorating level of response, leading to unconsciousness
- Seizures

1.22 Treatment of Hypoglycaemia

- **Call and send for help from the School Matron** (ext 311).
- If the School Matron is not available call for a first aider – via Reception (ext. 300) at the Senior School, the Office (ext 378) at the Prep School
- Ask a member of staff to **get the pupil's emergency box from the Medical Centre** at the Senior School site, or from the Medical Room in the Prep School. (Follow pupil's Individual Medical Plan)
- **Ensure the pupil eats a quick sugar source**, eg three glucose tablets, glucogel, fruit juice or fizzy drink (not a diet version)
- In the surgery or Prep School medical room there is a 'diabetic snack box' should the pupil not have any snacks with them
- **Wait ten minutes** and, if the pupil feels better, follow with a carbohydrate snack, eg cereal bar, toast □
Once recovered allow the pupil to resume school activities
- If the pupil becomes drowsy and unconscious, then the situation is now LIFE-THREATENING and call an ambulance
- Place the pupil in the recovery position and stay with the pupil until the ambulance arrives
- **Contact the parent/guardian immediately**

1.23 Causes of Hyperglycaemia

- Too much food
- Too little insulin
- Decreased activity
- Illness
- Infection
- Stress

1.24 Recognition of Hyperglycaemia

- Onset is over time – hours or days
- Warm, dry skin, rapid breathing
- Fruity/sweet breath
- Excessive thirst and increased hunger
- Frequent urination
- Blurred vision
- Stomach ache, nausea, vomiting
- Skin flushing
- Lack of concentration
- Confusion
- Drowsiness that could lead to unconsciousness

1.25 Treatment of Hyperglycaemia

- **Call and send for help from the School Matron** ext 311 If the School Matron is not available call for a first aider – via Reception (ext 300) at the Senior School, the Office at the Prep School (ext 378)
- Ask a member of staff to **get the pupil's emergency box from the surgery** at the Senior School site, **or from the medical room** at the Prep School site. (Follow pupil's Individual Medical Plan)

- **Check blood sugars, if above 10 check for ketones.**
- **Encourage the pupil to drink water or sugar-free drinks**
- **Allow the pupil to administer the extra insulin** required
- **Permit the pupil to rest** before resuming school activities if able
- **Contact parent/guardian**

1.26 Please contact the School Matron for further advice, help and support and for further information.

Policy

1.27 In developing this policy, Embley recognises the advice and guidance of the British Diabetic Society, Diabetes UK and the School Matron. The School recognises its responsibility in dealing with children appropriately.

1.27.1 Embley understands the importance of ensuring the pupils feel safe and secure.

1.27.2 Embley recognises that diabetes is a widespread condition affecting children and welcomes pupils with diabetes.

1.27.3 All pupils with diabetes will have an Individual Health Care Plan.

1.27.4 Embley encourages, helps and supports pupils with diabetes to achieve their potential and to participate fully in aspects of school life.

1.27.5 All Embley staff will have a clear understanding, through reading this document, of what it means to be a diabetic and what to do in the event of a pupil having a hypoglycaemic or hyperglycaemic episode and what to do in an emergency.

1.27.6 **All staff must understand that immediate access to insulin or diabetic snacks is vital.**

1.27.7 Pupils' emergency boxes are kept in the surgery at the Senior School site and in the medical room in the Prep School. Staff must familiarise themselves with these locations. The surgery and the Prep School medical room also have 'spare diabetic snacks' in a labelled emergency box.

1.27.8 Please note that some pupils do not lodge spare insulin with school – they have it on them at all times.

1.27.9 Pupils are encouraged through the school's PSHE programme to understand their condition so that they can support their friends.

1.27.10 All staff, teaching and non-teaching will be informed of pupils with diabetes via the medical register. A printout of pupils' medical conditions and Individual Health Care Plans is available to all staff and kept confidentially and is available from the School Matron or Mrs Janaway.

1.27.11 The school will also inform catering staff of pupils with diabetes in case these pupils have no snacks with them and urgently need something to eat.

1.27.12 Advice and further information is available from the School Matron.

1.27.13 Embley is committed to working in partnership with all parties to ensure the policy is implemented and maintained and to ensure effective communication of the policy.

HEAD LICE

1.28 Policy and Procedures

In developing this policy, Embley has regard to the advice and guidance of the Infection Control Matrons' Association and the School Matron. The school recognises its responsibility in dealing with pupils appropriately.

1.28.1 Head lice infection is not primarily a school problem but one of the wider communities.

1.28.2 Whilst the school cannot solve the problem it can help parents to deal with it.

1.28.3 Head lice do cause concern and frustration for some pupils, parents and teachers.

1.28.4 **The School Matron or Mrs Janaway should be informed in confidence of all head lice cases.**

1.28.5 The School Matron or Mrs Janaway may decide to offer information, advice and support to parents.

1.28.6 All reports shall remain confidential.

1.28.7 The school may inform parents by an 'advice' letter given to a whole year or class group but not individual parents.

1.28.8 Affected pupils will not be excluded from school.

1.28.9 The school will maintain a sympathetic attitude and avoid stigmatising/blaming families who are experiencing difficulty with control measures.

1.28.10 The school will assist in reducing agitation and alarm.

1.28.11 Routine head inspections are not effective and will not be introduced to placate anxious parents.

SICKNESS AND DIARRHOEA

1.29 In developing these procedures Embley has regard to the advice and guidance of Ofsted and the HSE. The School recognises its responsibility in dealing with pupils appropriately and Ofsted are notified if there are two cases of food poisoning at any one time.

1.30 In order to minimise the spread of a gastro-intestinal infection in the school environment we ask that parents adhere to the following guidelines:

1.30.1 If your child has been unwell at home with sickness and/or diarrhoea, please keep your child off school for minimum of 48 hours following the last episode of illness.

1.30.2 If your child is sick and/or has diarrhoea at school, we will contact you to collect your child as soon as possible. Your child should then remain off school for a minimum 48-hour period following the last episode of illness.

1.30.3 When your child returns to school we do ask that they are well enough to be eating their normal diet.

1.30.4 We ask that you keep us informed about how your child is and whether you have had to seek medical advice for the episode.

COVID-19

1.31 In developing these procedures Embley has regarded the Governments advice and will adapt any of our procedures based on the current Government guidelines.

1.32 Currently all pupils with COVID-19 symptoms are to isolate and take a LFT. If positive to be confirmed by a follow up PCR test.

1.33 All pupils are to complete twice weekly LFT to check for any asymptomatic patients.

1.34 The school matrons will give any updated advice out to teachers and parents when required.

PART D

1. Policy for Provision of Medication and Medical Care to Boarding Pupils at Embley

1.1 This guidance is aimed at standard 3 of the minimum standards produced by the National Care Standards Commission for Boarding Schools.

1.2 The Headmaster and boarding staff of Embley wish to ensure that pupils with medication needs receive appropriate care and support within each of the boarding houses.

1.3 ***It is expected that parents would normally keep their children at home if acutely unwell or infectious.***

1.3.1 Appropriate first aid and minor illness treatment is available for boarders at all times and there is access to medical, dental and optical services as required. First aid treatment is given by a qualified first aider.

1.3.2 All boarders are registered with the local doctor's surgery (see below) unless they live locally, in which case they are registered with their own local surgery.

1.3.3 Two of the school nursing staff hold a current nursing registration, this was confirmed on appointment and is reconfirmed annually by Bursar.

1.3.4 The School has access to the local GP for professional guidance and consultation.

1.3.5 If boarders need to see a doctor, optician or dentist they can choose whether or not to be accompanied by a member of staff. They may see a female or male doctor on request.

1.3.6 Prescribed medication is only given to the boarder for whom it was prescribed and not kept for general use or added to "stock".

1.3.7 School procedures are followed in the administration of all prescribed and non-prescribed medications. All medications are kept securely.

1.3.8 Any boarders who are self-medicating have to be assessed as responsible to do so and follow school policy for the safe storage of such medication.

1.3.9 Written records of all medication, treatment and first aid are kept with name and date and signed by the responsible member of staff.

1.3.10 There are written records kept of all significant illnesses, accidents or injuries.

1.3.11 Written permission is obtained in advance for the administration of first aid and appropriate non-prescription medication and also for seeking medical, dental or optical treatment when required.

1.3.12 The School Matrons, Mrs Appleton and Mrs Carleton-Green, keeps the medical department handbook updated and is part of the regular review of policies and practice.

1.4 GP Services

1.4.1 All boarders have access to a Doctor at Abbeywell Surgery. Boarders are routinely registered with this practice unless they live locally and are registered with another local doctor.

1.4.2 The boarders have a choice as to whether they are seen by a male or female doctor.

1.4.3 Boarders can freely choose whether or not they are accompanied by staff when being seen by the doctor.

1.4.4 Pupils ask the School Matron to make a GP appointment. The pupil will then be escorted by a staff member to that appointment.

1.4.5 Weekly boarders who are not registered at this practice and who need a routine appointment can be registered as a temporary patient but the prime responsibility for booking routine appointments lies with the parent/guardians.

1.5 First Aid and Minor Illnesses

1.5.1 Treatment is given at school by the School Matron or a qualified first aider.

1.5.2 A written school record is kept by the School Matron in the surgery of all medication, treatment and first aid administered to boarders, giving name, date, time, medication/treatment and reason for administration (if not prescribed), which is signed by the responsible member of staff.

1.5.3 A written record is kept by the School Matron in the surgery of all significant illnesses, accidents or injuries to boarders (either as part of the above school medication and treatment records or separately).

1.5.4 Written parental permission is obtained in advance for the administration of first aid and appropriate non-prescription medication to boarders, and to seek medical, dental or optical treatment when required. The requirement is without prejudice to the right of a Gillick-competent or Fraser Guidelines boarder to give or withhold consent to medical treatment or to seek medical advice or treatment in confidence.

1.6 Dentist and Optician Services

Pupils are advised to stay with their own dentist/optician and arrange for routine check-ups during the school holidays. If emergency care is needed this will be arranged through the School Matron.

1.7 Other Medical Services

Links exist via the GP with outside professional services (e.g. psychologist, social worker etc. through Child and adolescent Mental Health services.)

PART E

1. School Matron's Confidentiality Policy

1.1 Embley will respect the privacy of pupils and staff by encouraging a safe, caring environment. The safety, well-being and protection of our pupils are the paramount consideration in all decisions regarding confidentiality. It is an essential part of the ethos of our school that trust is established to enable pupils, staff and parents to seek help. The maintenance of non NHS records are regularly monitored by an appropriate designated member of staff – the Bursar.

1.2 In developing this policy, the school acknowledges the advice and guidance of the Nursing and Midwifery Council (NMC). This policy is available to all pupils, staff – teaching and non-teaching, permanent or temporary – and parents/guardians.

1.3 As a Registered General and Children's Matron, the School Matron is required to comply with the Nursing and Midwifery Council Code of Professional Conduct which gives clear guidelines for professional practice with regard to confidentiality and trust-based patient relationships. The School Matron is accountable and responsible for her actions.

1.4 Aims

1.4.1 To ensure that all pupils, staff and parents are aware of the School Matron's professional and ethical obligations regarding confidentiality.

1.4.2 To ensure that all pupils, staff and parents are aware of the legal and professional duty of care required of a registered Matron.

1.5 Confidentiality

Confidentiality is defined as 'something which is spoken or given in private'. Confidentiality is a fundamental part of the Matron-patient relationship. Pupils, staff and parents need to know the boundaries of confidentiality in order to feel safe and comfortable discussing personal issues and concerns including relationships.

1.5.1 The School Matron has a responsibility and duty to act in the best interests of the school, which includes balancing openness with maintaining the necessary confidentiality.

1.5.2 The complexity of meeting the privacy needs of each pupil, complying with regulations both educational and medical, and meeting professional standards, can present conflicting directions.

1.5.3 However, the duty of confidentiality to her 'client' is greater than that owed to the school which employs the School Matron.

1.5.4 Matrons also have a legal (common law and statutory) duty of confidence and a breach of confidentiality may render them liable to disciplinary proceedings by the NMC.

1.5.5 The NMC is responsible for maintaining professional standards.

1.6 Medical information

1.6.1 Standards are established for collecting and recording pupil health information and are used to enhance the welfare of the pupil.

1.6.2 All pupil health information is distinguished from other types of school records.

1.6.3 All health information is confidential and is treated in a manner in accordance with ethical standards of nursing practice as pupils, staff and parents entrust their private information to the School Matron.

1.6.4 Health and mental health information should be shared only when it is educationally relevant for a pupil's academic progress or essential to ensure the protection of other pupils and staff.

1.6.5 The School Matron will use her professional judgement and knowledge to determine which health information is to be shared and to whom – information available to others will be on a 'need to know' basis and the appropriate sharing of information between school staff is an essential element in ensuring our pupils' wellbeing and safety.

1.6.6 Staff may be informed of certain relevant chronic medical conditions that may affect the pupil during their school day, with parental/pupil consent.

1.6.7 If information is to be copied or released to individuals outside the school, then the nature of the disclosure should be documented along with written parental consent.

1.6.8 Disclosure may occur if information on certain subjects is sensitive, i.e. bereavement, parental separation or divorce, serious physical or mental illness, suicide or attempted suicide, physical abuse, bullying, substance abuse, sexual problems, serious academic problems or disciplinary matters.

1.6.9 As a general rule, medical information is confidential and should not be discussed without parental consent unless the pupil is in danger or a high-risk situation.

1.6.10 The School Matron 'owes' the same duty of confidentiality to a person consulting because of a cold as to one seeking sexual health advice – i.e. no distinction between the reasons for the consultation.

1.7 Medical emergencies

Confidential information may be disclosed when a medical emergency means a patient's consent cannot be obtained, e.g. serious accident or unconsciousness, as it is in their medical interest.

1.8 Child Protection

1.8.1 If the pupil has disclosed something that the School Matron feels may cause them or other people harm then the Matron will follow the school's Child Protection Policy. This means that confidentiality cannot be guaranteed to pupils in matters of disclosure relating to safeguarding issues.

1.8.2 The School Matron will be able to help and listen to pupils' problems, concerns or worries, so pupils should not hesitate in contacting her for support and guidance. The surgery door is always open.

PART F

1. First aid procedure – Games & PE

1.1 There must always be a suitable qualified first aider in attendance. Matron must be informed of any fixtures happening on site and will be available for Senior School or Prep School.

1.2 If a serious incident happens during PE, Games or fixtures, that requires an advanced level first aid:

1.2.1 Only a qualified first aider should deal with the incident.

1.2.2 Ensure the other group members are safe.

1.2.3 Matron/Prep School Office Staff must be immediately informed of the incident.

1.2.4 Staff should stay with the pupil until parents or matron/Prep School Office Staff has taken responsibility for the welfare of the pupil. This includes escorting the pupil to hospital if required (normally 'away' matches). As such, 'away' matches should always have at least two members of staff or designated responsible adults with them.

1.2.5 An incident report/injury form must be filled in and a copy passed to Assistant Head Co-Curricular, Elaine Morgan.

1.2.6 A record of what care was given must be placed in the Injury Form file.

1.2.7 If the incident was serious enough for an ambulance, or parents, to be called to transport the pupil to hospital, then a member of LT and the school receptionists must also be informed.

1.2.8 At all times the welfare of the pupils is of paramount importance.

PART G

1. Boarding

1.1 Embley has and implements appropriate policies for the care of boarders who are unwell. These include first aid, care for and treatment of those with chronic conditions (Asthma, diabetes, epilepsy and allergies) and disabilities (prepared as required), dealing with medical emergencies and the use of household remedies.

1.2 The school provides suitable accommodation, including toilet and washing facilities, in order to cater for the needs of boarding pupils who are sick or injured. The accommodation is adequately staffed by appropriately qualified personnel, adequately separated from other boarders and provides separate accommodation for male and female boarders where this is necessary.

1.3 In addition to any provision on site, boarders have access to local medical, dental, optometric and other specialist services or provision as necessary.

1.4 Prescribed medicines are given only to the boarder to whom they are prescribed. Boarders allowed to self-medicate are assessed as sufficiently responsible to do so.

1.5 The confidentiality and rights of boarders as patients are appropriately respected. This includes the right of a boarder deemed to be “Gillick Competent or Fraser Guidelines” to give or withhold consent for his/her own treatment.

Appendix A: FIRST AIDERS – Senior School

School Nurse:

Olivia Carleton-Green

Certified First Aiders:	Nominated Persons:
Andrew Campbell	Mark Aslett
Aurelie Sanner Theaker	Alison Cooper
Bobby Pearson	Catriona Walker
Claire Brighton	David Chinnock
Helen Smart	Elaine Morgan
Jack Bowe	Hazel Irish
Jon Holmes	John McCredie
Kate Rodgers	Karen LeLean
Liz Dudley	Kathleen Bolton
Locryn Williams	Ken Morris
Mark Aslett	Leah Goodey
Rebecca Clayton	Matthew Morgan
Richard Porges	Samantha Eastaugh
Sophie Bubb	Simon Morgan
Suzanne Winsor	Millie Stuart
	Zoe Leavers

Appendix B: FIRST AIDERS – Prep School

School Nurse:

Olivia Carleton-Green

Certified Paediatric First Aiders:	Certified First Aiders – Games/OE Staff:
Amanda Wright	Bobby Pearson
Billie-Jean Janaway	Locryn Williams
Claire Harvey	Sophie Bubb
Debra Murphy	
Harriet Povey	Nominated Persons:
Holly Souter	Lucy Phillips
Julie Wilson	Michelle Wolton
Judith Smith	
Louise Ranson	
Mandy Boterhoek	
Melissa Coveney	
Paula Ferriroli	
Rosie High	
Sarah King	
Sophie Chalk	
Trudi Collins	

Appendix C: RIDDOR Notifiable Illnesses and Diseases

- Acute encephalitis
- Acute infectious hepatitis
- Acute meningitis
- Acute poliomyelitis
- Anthrax
- Botulism
- Brucellosis/Cholera
- Diphtheria
- Enteric fever (typhoid or paratyphoid fever)
- Food poisoning
- Haemolytic uraemic syndrome (HUS)
- Infectious bloody diarrhoea
- Invasive group A streptococcal disease
- Legionnaires' Disease
- Leprosy
- Malaria
- Measles
- Meningococcal septicaemia
- Mumps
- Plague
- Rabies
- Rubella
- SARS
- Scarlet fever
- Smallpox
- Tetanus
- Tuberculosis
- Typhus
- Viral haemorrhagic fever (VHF)
- Whooping cough
- Yellow fever

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