St Mary's School
Gerrards Cross

FIRST AID POLICY

MONITORING AND REVIEW

Person Responsible	Bursar
Reviewed by	SLT
Frequency of Review	Bi-Annually
Date of Last Review	September 2026
Date of Next Review	September 2028

POLICY STATEMENT

This policy is for the purpose of establishing a robust, legally compliant framework that ensures the immediate, effective, and safe administration of first aid to all pupils, staff, and visitors during the school day and during off-site activities.

By standardising emergency protocols and defining a clear scope of care, this policy guarantees that a sufficient number of certified first aiders are always available, and that medical equipment—including first aid kits, auto-injectors and automated external defibrillators (AEDs)—is properly maintained and accessible.

Furthermore, it serves to minimise risk and satisfy statutory obligations under national education and safety regulations by mandating accurate incident logging, identifying safety trends, and enforcing strict protocols for the swift notification of parents and next of kin following any injury or sudden illness.

AIMS

- To ensure that the school has adequate and appropriate equipment, facilities and procedures to provide appropriate first aid
- To ensure that the first aid arrangements are based on a risk assessment of the school

WIDER REFERENCES

This policy operates within a wider national framework. It operates with due regard to:

- Working Together to Safeguard Children 2026
- KCSIE 2026
- https://www.gov.uk/government/publications/first-aid-in-schools/first-aid-in-schools-early-years-and-further-education
- https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3
- UKHSA
- Health & Safety Executive
- Department for Education
- The Equality Act 2010

RELATED INTERNAL POLICY

This policy should be read in conjunction with:

- Admissions Policy
- Health and Safety Policy
- Allergy Safety Policy
- Risk Assessment Policy
- Educational Trips and Visits Policy

INTERNAL MANAGEMENT

The internal management responsibility for first aid is delegated to the Bursar by the Governors.
The Bursar must ensure that parents and staff are aware of the school Health & Safety and First Aid policies.

The school has a School Nurse/Lead First Aider who responsible for first aid provision, they will:

- Ensure that the first aid provision is adequate and appropriate
- Ensure that the number of first aiders/appointed persons meets the assessed need
- Ensure that the equipment and facilities are fit for purpose

INSURANCE

The school governors must ensure that insurance arrangements provide full cover for claims arising from actions of staff acting within the scope of their employment.

Appropriate risk assessments and Individual Healthcare Plans (IHP) for students will be completed by the person in charge of first aid, and suitable provision will be made in liaison with the Bursar and Head of Year. In the case of staff, this should be done jointly with first aid and their line manager.

FIRST AIDERS AND TRAINING

The school maintains enough appropriately trained first aiders to always ensure adequate and appropriate coverage, considering pupil numbers, site layout, activities, educational visits, medical needs and operational risk.

11 members of staff are First Aid at Work (FAW) qualified, 5 are trained in Paediatric First Aid

Information about the First Aid policies will be distributed so that everyone is aware of personnel. Those who are specially trained in First Aid can be quickly identified via their green lanyard.

The school will ensure that there is always at least one qualified person on each school site when children are present.

Duties of a First Aider:

- Complete an approved HSE (FAW/Paediatric First Aid) training course
- Give immediate help to casualties
- Ensure, when necessary, that an ambulance or other professional medical help is sought
- Take charge when someone is ill or injured
- Monitor and replace items in first aid kits when necessary
- Keep and maintain accurate records

St Mary's School
Gerrards Cross

FIRST AID SUPPLIES

The first aid boxes will be located as agreed by the Bursar. All staff should know where the first aid boxes are kept. Information about the first aid policies will be distributed so that everyone is aware of location of equipment. The boxes must contain a 'sufficient quantity' of first aid material as per HSE government guidelines https://www.hse.gov.uk/simple-health-safety/firstaid/what-to-put-in-your-first-aid-kit.htm. The first aid boxes will be monitored regularly and restocked as required.

For trips organised by the school a first aid bag will be prepared in line with the medical needs of the students.

First aid boxes are situated in:

BOX NUMBER	LOCATION	
1	PREP - SCIENCE LAB. **SMITH BUILDING**	
2	PREP – THE HUB - after-school supervision	
3	PREP - **OAKDENE** HALL	
4	PREP- **OAKDENE** 1st FLOOR CLASSROOMS	
5	PREP - **OAKDENE** ICT SUITE	
6	MEDICAL ROOM	
7	PREP- RECEPTION LANDING	
8	S.H – FOOD & NUTRITION (slip room)	
9	S.H - DRAMA DEPARTMENT	
10	S.H – ART ROOM	
12	S.H - SCIENCE DEPARTMENT - **BIOLOGY LAB**.	
13	S.H - SCIENCE DEPT. - **CHEMISTRY LAB**.	
14	S.H - SIXTH FORM CENTRE – **CEDAR HOUSE**	
15	S.H – STAFF KITCHEN	
16	S.H - PE - **MAIN HALL**	
17	SH – SCIENCE DEPARTMENT **– PHYSICS LAB.**	
18	S.H – LIBRARY	
21	S.H – MUSIC ROOM	
22	LITTLE ST. MARYS	
23	SH – MAIN HALL	
24	PREP PE - **SPORTS HALL**	

27	PREP – 1st Floor SMITH BUILDING	
29	SH – ICT **CEDAR HOUSE**	
30	SH – ground Floor **CHERRY TREE**	
31	SH – 2nd Floor **CHERRY TREE**	
34	YR 1 CLASSROOM	
40	FOREST SCHOOL	
Trip 1	MEDICAL ROOM	
Trip 2	MEDICAL ROOM	
Trip 3	MEDICAL ROOM	
Trip 4	MEDICAL ROOM	

Two additional first aid boxes can be found in the kitchen; these boxes are maintained by the catering company Holroyd Howe.

All six school minibuses are equipped with an emergency first aid kit, which is readily accessible for use in the event of an incident or medical emergency.

PROCEDURE IN THE CASE OF ACCIDENT/INJURY/ILLNESS - AT SCHOOL

1. **A Mobile Casualty**

- All mobile casualties should report to the nearest first aider.
- In the event of significant accidents and/or injuries, the parents, Bursar and the Head should be informed.
- In the event of an accident, injury or illness, whoever carries out treatment must update the school records in line with the recording procedure and complete an accident form which must be sent home to parents.

2. **Immobile Casualty**

Call for help. Reassure the casualty whilst waiting for additional help from a first aider. First aider will assess and treat/escalate to appropriate services as necessary.

3. **Sending a Casualty Home**

If a student has been assessed as unfit to remain in school, parents will be informed and relevant staff will be notified.

4. **Sending a Casualty to Hospital**

If the nature of the accident/injury/illness is such that the casualty requires immediate medical attention, parents should be contacted via phone immediately and appropriate arrangements made for transfer to hospital. The bursar and head will be made aware as well as relevant staff. A member of staff will accompany the student if a parent is unable to do so and further arrangements will be made to meet the parents at hospital.

5. **Calling an Ambulance Procedure**

Call 999 in a medical emergency and follow instructions from the 999 operators.

6. **Recording**

The school will keep a record of any first aid treatment given by first aiders and appointed persons. This will include:

- The date, time and place of incident
- The name (and class) of the injured or ill person
- Details of the injury/illness and what first aid was given
- What happened to the person immediately afterwards (for example went home, resumed normal duties, went back to class, went to hospital)
- Name and signature of the first aider or person dealing with the incident.

The school acknowledges that the information in the record book can:

- Help the School identify accident trends and possible areas for improvement in the control of health and safety risks
- Be used for reference in future first aid needs assessments
- Be helpful for insurance and investigative purposes

Parents of girls in Senior House are notified of medication administered via an AUTOMATED e-mail sent home. It states the medication, dose, time and reason for the medication along with which staff member administered it.

MEDICATION AND PRE-EXSISTING CONDITIONS

A register of students with a diagnosis of asthma and other allergies is held centrally. A copy of all prescribed medication, including asthma inhalers and adrenaline auto injectors, are kept with the School Nurse/Lead First Aider.
In most cases, Senior House students will carry their emergency medication with them (i.e. adrenaline auto injectors, inhalers, diabetic kit). In the Prep Department, a bag is kept with classes which contains their emergency medication. Please see the Allergy Safety Policy for further information relating to auto-injectors and inhalers.

Medication is used in accordance with the individual healthcare plan of each student and consent of each student and parents. All medication provided and administered will be recorded. Please see the school policy on Supporting Students with Medical Conditions and Administration of Medicines Policy for further information.

St Mary's School
Gerrards Cross

ADMINISTRATION OF MEDICINES

The governing body recognises that many students will at some time need to take medicines during the school day. For some students such medication will be essential as it would be detrimental to the child's health if medicine were not administered during the school day.

The governing body also recognises that some students will have long-term or permanent need for regular medication. Such students would be put at a disadvantage if the school did not arrange for these students to take medicines.
While parents retain responsibility for their child's medication, the school has a duty of care to the students while at school, and the governing body wishes to do all that is reasonably practicable to safeguard and promote children's health and well-being.

The Bursar takes responsibility for the administration of medicines during school time in accordance with the government's policies and guidelines. The Bursar will implement this policy and report as required to the governing body. Medication will normally be administered by the School Nurse/First Aid Officer or by specially trained staff.

All teachers are expected to maintain professional standards of care but have no contractual or legal duty to administer medication. The governing body does not require staff to administer medication.

However, some specified staff (e.g. PE or staff taking educational visits) that volunteer their services, and/or those support staff managing the administration of and administering medicines, will be given training to administer First Aid and/or medication to students.

The governing body fully indemnifies all staff against claims for any alleged negligence, providing they are acting within their conditions of service and following governing body guidelines. The indemnity covers situations where an incorrect dose is administered or where any other mistake in the procedure is made. The governing body will meet any claims in these circumstances.

1. RECORD KEEPING

On admission of a student to the school, all parents are required to provide information giving full details of:

- Medical conditions
- Allergies
- Any regular medication
- Emergency contact numbers
- Name of family doctor/consultants
- Any specific requirements (e.g. dietary)

At the beginning of each academic year, all parents will be required to update the medical form.

2. ADMINISTRATION OF MEDICATION

The school expects that normally parents will administer medication to their children outside the school setting. The school will only manage the administration or administer medicines when essential, that is where it would be detrimental to the child's health if medicine were not administered during the school 'day'.

Any requests for medicine to be administered must come from a parent in writing on the school's 'Authorisation to Administer Medication Form' and each request will be considered on an individual basis.

The Form will include:

- Name of parent and contact number
- Name of child and class
- Name of medicine
- Name of prescriber and contact details

Although parents should give detailed information, as set out below, the school will follow the instructions as provided on the original medicine container as dispensed by the pharmacist, in regard to:

- How much to give
- How it should be kept and stored
- How it is to be administered
- When to be given
- Any other instructions

The form will end with the following consent statement:

'The above information is accurate to the best of my knowledge at the time of writing, and I give consent to the school to administer the medication in accordance with the school policy. I will inform the school in writing of any changes to the above information. It will be signed and dated by a parent or someone with parental control.'

A separate form must be completed for each medicine to be administered.

Parents will be expected to notify any requests for the administration of medicines at the earliest opportunity and if appropriate to discuss the request with the Bursar and the School Nurse. In some circumstances a discussion involving the consultant community paediatrician or the child's consultant will be required to see what can be done in the school, before the Bursar decides.

The Bursar (or person authorised by the Bursar) will decide whether any medication will be administered in school, and by whom. In appropriate cases the Bursar and parents in consultation with the health professional (GP, paediatrician, nurse consultant or dentist) responsible for the child and anyone else the Bursar deems necessary will draw up a healthcare plan.

The medicine must be in the original container as dispensed by a pharmacist with the child's name and instructions for administration as supplied by the pharmacist on the label.

The school will not deal with any requests to renew the supply of medicine. This is entirely a matter for the parents.

If the student is required and able to administer her own medicine (e.g. inhaler for asthma) a designated member of staff will supervise the administration dependent on the age and understanding of the particular child.

Normally medication will be kept under the control of a designated member of staff unless other arrangements are made with the parent.

Normally the administration of medication will only be done in school at the following times:

- Immediately before school
- Breaks and lunch time
- Exceptionally, immediately after the end of the school day

In particular circumstances, such as for children with diabetes, medicines will be administered at times as advised by the child's consultant or specialist nurse.

All personal non-prescription medicines, including painkillers, must be kept in the Medical Room. Parents are required to supply the School Nurse with written consent to administer. This written consent should state the name of the product and instruction for dosage. Personal non-prescription medicines may be kept long-term, in a secure place, by the School Nurse, for students with specific medical needs.

Any medicines provided to the school by parents should be in their original container/packaging as bought/dispensed, including instructions for administration. The school will not accept medicines that have been taken out of the container as originally dispensed nor make changes to dosages on parental instructions.

3. ADMINISTRATION OF SCHOOL SUPPLIED OVER THE COUNTER MEDICATION

On admission to the school, parents of students of Years 7 and above are given the opportunity to sign a consent form which gives the school permission to administer over the counter medication Paracetamol and Ibuprofen for mild pain, antihistamine cream for insect bites and stings, and antiseptic cream for minor cuts and grazes. Specific details will be recorded by the School Nurse/ First Aid Officer or member of staff administering the Paracetamol, this will include the time given and dose. Under no circumstances will aspirin be given to a child under 16 years without a doctor's prescription.

4. ADMINISTRATION OF SCHOOL SUPPLIED OVER THE COUNTER MEDICATION IN PREP AND EYFS

Parental consent for the administration of over-the-counter medication to Prep (including EYFS) students is not obtained on admission to the school. However, occasions may arise whereby students in the Prep Department require liquid paracetamol (Calpol). If the need for Calpol has been assessed by the School Nurse or First Aid Officer parental consent will be sought in writing before **each** administration of the medication. An ongoing consent from parents to administer Calpol as and when required will not be accepted for Prep (including EYFS) students. A written record of the time and dose will be kept for each girl where Calpol has been administered.

5. CONTROLLED/PRESCRIBED MEDICATION

The Medical Team (school staff on trips) may administer a controlled drug to the child for whom it has been prescribed. Staff administering medicines should do so in accordance with the prescriber's instructions. St Mary's School will record all controlled medicines administered to individual children, stating what, how much was administered, when and by whom in a controlled drug record book. The

record book is kept in the medical room. Any side effects of the medication to be administered at school should be noted in school.

On trips, the medication will be signed out of the medical room, to the trip leader, by the Medical Team. The trip leader will sign a record document for each child, which contains details of the amount of medication supplied for the trip. This document will be used to log medication administered and stock levels whilst on the trip. The trip leader will oversee the administration of the medication and record the stock level. Any remaining controlled medication, at the end of the trip, will be returned immediately to the medical room by the trip leader and will be logged back into the controlled drugs record book and stored in the locked cupboard.

6. SAFE STORAGE OF MEDICINES

Medicines except for adrenaline pens, emergency diabetic kits and asthma inhalers will be stored in a locked cupboard - in the original container in which they were purchased. The access code is known by the School Nurse and designated first aid staff. Students know where their medication is stored and who to contact to have their medication administered.

Emergency medicines and devices such as asthma inhalers, emergency diabetic kits and adrenaline pens are stored in an unlocked cupboard in the medical room. Emergency access to the medical room is available to all staff via a universally known key code.

A few medicines require refrigeration. They will be kept in a clean storage container, clearly labelled, and stored in the Medical Room refrigerator (which is behind a locked door,) the key is available from the office. A weekly temperature log of the refrigerator will be taken during the period of storage.

An audit of student's medication will be undertaken monthly, disposing of any medication that has expired or is no longer required. It is the parent's responsibility to ensure their child's medication remains in date. The school will remind parents where possible when their child's medication is due to expire.

It is the responsibility of parents to ensure that the school is provided with emergency medication (e.g. AAI, inhalers and diabetes kit) that is in date for their child before going on a trip. If this is not provided the child will not be able to take part in the trip.

7. RECORDS

All medication administered will be digitally recorded within the student's individual medical records area of the school database, iSAMS.

The form will record:

- Name of the student
- Date and time of the administration
- Who supervised the administration
- Which medication
- How much was given
- A note of any side-effects

Medical records will be archived until the student is 25 years old. The record of administration of medication will be updated every academic year.

8. TRAINING

The governing body is committed to providing appropriate training for staff that volunteer or are contracted to participate in the administration of medicines.

PAIN RELIEF

The school holds a supply of paracetamol and ibuprofen, which may be issued to students in Senior House upon request, provided that the parents have consented on the school admission form. Paracetamol and/or ibuprofen will be given by the School Nurse, First Aid Officer or designated First Aiders. The member of staff will ensure via questioning that the girl has had a sufficient 4-hour gap since her last dose either via the student or by speaking to parents. Ibuprofen will be administered after food.

The school holds a supply of Calpol, which may be issued to a student in the Prep Department only once a parent has been spoken to on that day and has provided written consent. No prior or standing consent can be given.
The first aider may offer ice spray instead of an ice pack for sporting or other injuries. Allergies will be checked for in advance of administration.

ANTIHISTAMINES

The school does not hold a supply of antihistamines. If a student requires them then these should be provided to the school in the original packaging, in date and should be accompanied by a signed medical consent form.

SCHOOL SPARE EMERGENCY MEDICATIONS

School spare salbutamol inhaler
The spare school inhaler is only available for use for students who have been prescribed an inhaler and whose own personal inhaler is not immediately available and written parental consent has been given. All parents who have a student in school with a prescribed inhaler are given the opportunity to consent for the use of the school spare inhaler. The school spare inhalers are located as follows:

1. Reception
2. Science block (ground floor)
3. Medical waiting room area
4. Dining Hall (opposite servery)
5. Sports Hall

School spare emergency adrenaline Auto-injector
The spare school AAIs are only available for use for students who have been prescribed an AAI, whose own personal AAI is not immediately available and written parental consent has been given. All parents who have a student in school with a prescribed AAI are given the opportunity to consent for the use of the school spare AAI, stating clearly which dose of AAI they are consenting to. The school spare auto-injectors are located as follows:

1. Medical room – 1 x adult 300mg and 1 x child 150mg

2. Reception - 1 x adult 300mg and 1 x child 150mg
3. Dining Hall - 1 x adult 300mg and 1 x child 150mg

EYFS

- A student must not return to school after symptoms of vomiting or diarrhoea for 48 hours after symptoms have ceased.
- The school must be notified immediately if a child contracts any notifiable disease.
- Written permission must be obtained before any medicine is administered to EYFS pupils.
- Any medicine given to EYFS pupils, along with the timing of the dose, will be reported to their parents on the same day, or as soon as reasonably practicable.
- There will always be a trained paediatric first aider on site, and on outings when EYFS pupils are present.

INFECTIOUS ILLNESSES / DISEASES -Management of Notifiable Infectious Diseases

1) Notify the following members of staff immediately:

- Bursar
- School Nurse/Lead First Aider
- Head or Senior Deputy Head if not available.

2) Medical team to access the government website to gain provision of specific management guidelines: **https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/managing-specific-infectious-diseases-a-to-z**

3) Individual guidelines will state whether the infectious disease needs to be notified and which agencies should be involved, along with relevant contact details.

4) Schools must perform a risk assessment to determine the safety of both students and staff. Appropriate measures to be put in place and further assistance sought from relevant agencies if required.

5) Timeline of events must be documented throughout and the Head and Senior Deputy Head to be consulted and updated throughout.

6) Should there be a case of a student testing positive for an infectious disease and having been identified as contactable whilst on school premises, reporting may be necessary

UK Health Security Agency (to report notifiable diseases): 0344 225 3861

AED (Automated External Defibrillator)

The school currently operates one AED. **This easily accessible and is located at the front door of the Senior House by reception.** All staff are aware of its location should they need to use it in an emergency.

INTIMATE OR INVASIVE TREATMENT

The school will not normally allow these to take place in school. However, in exceptional circumstances the Head can authorise intimate or invasive treatment. Two adults should be present when these takes place, at least one of whom should be of the same gender as the student.

SUPPORTING STUDENTS AT SCHOOL WITH MEDICAL CONDITIONS
INTERNAL MANAGEMENT

The internal management responsibility is delegated to the Bursar by the governors.

The School Nurse:

- Ensures that students medical conditions are highlighted appropriately to staff
- Ensures that sufficient plans are in place to care for students with pre-existing conditions

1. STUDENTS

Required students with medical conditions will be consulted to provide information about how their condition affects them. They will be involved in discussions about their medical support needs and contribute where possible to the development of, and compliance with, their individual Healthcare Plan. Most Senior House students will carry their own emergency medication (e.g. adrenaline auto injectors, antihistamines, inhalers and diabetic equipment), in Prep Department this emergency medication will be contained in a bag that travels with the group of students. Students should not carry any routine medication, such as paracetamol, as this should be administered by the School Nurse.

2. PARENTS

Parents include any person who is not a 'parent', but who has parental responsibility for or care of a child. Parents have the prime responsibility for their child's health.

- Parents should provide the school with sufficient and up to date information about their child's medical needs
- Parents should tell the school of any change in prescription which should be supported by either new directions on the packaging of medication or by a supporting letter from a medical professional
- Parents are key partners and will be involved in the development and review of the Healthcare Plan for their child
- Parents should provide medicines and equipment as required by the Healthcare Plan
    - Ensure students bring their emergency medication with them to school each day
    - Replace medication before the expiry date
    - Dispose of expired items safely
    - Ensure any medication that would be beneficial to take before school is taken (e.g. antihistamines during periods of high pollen count)

- Keep their child at home when they are acutely unwell: informing the school office of the absence

- Acknowledge that it only requires one parent to request that medicines are administered. This will be the parent with whom the school has day-to-day contact with. Parents should ensure that they or another nominated adult is contactable at all times.

3. STAFF

All members of staff may be asked to provide support to students with medical conditions. They should know what to do and how to respond accordingly if they become aware that a student with a medical condition needs help. Staff must not give prescription medication or undertake healthcare procedures without appropriate training.

LONG-TERM MEDICAL NEEDS

The governing body and Bursar will do all they reasonably can to assist students with long-term needs. Each case will be determined after discussion with the parents, and in most cases the family doctor. The governing body also reserves the right to discuss the matter with the school's medical adviser. Please see the Supporting Students at School with Medical Conditions Policy for further information.

STAFF TRAINING

Specific medical staff training needs will be identified by the School Nurse and agreed with the Head and Bursar. This will have been identified based on the current needs of the student body. Training will be provided by appropriate healthcare professionals (including the school nurse), so that staff are fully competent and confident in meeting the needs of a student's Healthcare Plan. Only staff with appropriate training will give prescription medicines or undertake healthcare procedures. A First Aid certificate DOES NOT constitute appropriate training in supporting children with medical conditions. Staff will report to parents in cases where they note a student may need to have their medical condition re-examined, such as using an inhaler more frequently than usual.

TRIPS AND RESIDENTIALS

The School Nurse/Lead First Aider will provide details of students on a school trip that have medical conditions, IHP's and those in need of prescribed medication. If required a medical risk assessment will be provided for individual students.

During School hours any trips should contact the School Reception immediately in an emergency. All trips outside of School hours have a designated member of the Senior Leadership Team as an emergency contact. This should be contacted immediately.

Staff should follow the individualised trip risk assessment for the given trip. All trips will have a

The school will actively support students with medical conditions to participate in school trips and visits; by making reasonable adjustments and these will be included in the risk assessment for the event. Some students may need to take precautionary measures before or during some activities, and may need access, for example, to asthma inhalers. Staff supervising activities will be made aware of relevant medical conditions and will consider the need for a risk assessment to be made. One member of staff accompanying the visit will be asked to take on the lead role for administering medicines or healthcare

procedures. Individual Healthcare Plans (including information about consent), medicines, equipment and copies of the relevant appendix will be taken on school visits. Medicines are administered and witnessed and added to the record of administration of medication on return from the visit.

It is the responsibility of parents to ensure that the school is provided with emergency medication (e.g. AAI, inhalers and diabetes kit) that is in date for their child before going on a trip. If this is not provided the child will not be able to take part in the trip. The school will remind parents, where possible, when their child's medication is due to expire.

St Mary's School
Gerrards Cross

APPENDICES

APPENDIX ONE – HANDLING BODY FLUIDS

Blood and body fluids (e.g. faeces, vomit, saliva, urine, nasal and eye discharge) may contain viruses or bacteria capable of causing disease. It is therefore vital to protect both yourself and others from the risk of cross infection. To minimize the risk of transmission of infection, both staff and pupils should practice good personal hygiene and be aware of the procedure for dealing with body spillages.

Clean Up Procedure

- Estates Manager and/or Site Team to be contacted speak to Estates Manager for information
- Remove students from the area or position a member of staff on duty to guard the area
- Wash hands
- If a student or staff member has any body fluids on them, they should be sent to the medical room
- Any article of clothing that has got contaminated with the spill should be wiped cleaned and then put in a plastic bag and tied up for the parents to take home
- Wash hands
- Site team and Estates Manager arrange for a member of their team to clean the area appropriately

If a member the site team is not available for any reason:

- Get some disposable gloves from the nearest first aid kit. Gloves are to be always worn
- Place absorbent paper towels over the affected area and allow the spill to absorb
- Wipe up the spill using the absorbent paper towels and then place in a bin (which has a bin liner)
- Put more absorbent towels over the affected area
- The bin liner that has had the soiled paper towels put in, then needs to be tied up and double bagged and put in an outside bin
- The area then needs to be cordoned off until cleaned
- Wash hands
- If a cleaner is not immediately available, then a disposable cleaning kit will need to be used
- If the spillage has been quite extensive then the area may need to be closed off until the area can be cleaned correctly
- The area must be cleaned with disinfectant following the manufacturer's instructions
- A 'Wet Floor Hazard' sign then needs to be put by the affected area
- The area should then be ventilated well and left to dry
- All reusable cleaning up equipment then needs to be appropriately disinfected according to the manufacturer's instructions
- Wash hands
- All rubbish bags to be disposed of in outside bins
- Wash hands

Management of Accidental Exposure to Blood

Accidental exposure to blood and other body fluids can occur by:

- Percutaneous injury e.g. from needles, significant bites that break the skin

- Exposure to broken skin e.g. abrasions and grazes
- Exposure of mucous membranes, including the eyes and mouth

Action to Take

- If broken skin encourage bleeding of the wound by applying pressure – do not suck
- Wash thoroughly under running water
- Dry and apply a waterproof dressing
- If blood and body fluids splash into your mouth – do not swallow
- Rinse out mouth several times
- Report the incident to the School Nurse or First Aid Officer and Senior Leadership Team
- If necessary, take further advice from NHS Direct
- An accident form will need to be completed, and it may need to be reported to RIDDOR

APPENDIX TWO – ALLERGY & ANAPHYLAXIS

Management guidelines of students and staff at risk of anaphylaxis can be found within the Allergey Safety Policy.

APPENDIX THREE - DIABETES

What is diabetes?

Diabetes is a condition in which the body cannot make its own insulin. Insulin enables the body to use glucose and therefore produce energy. Without insulin the blood sugar will rise, and the person will become very unwell.

This condition is controlled by the administration of insulin by injection. The blood sugar must be closely monitored at all times. If too much insulin is given, too little food is eaten or exercise is undertaken, the blood sugar may fall dangerously low.

Responsibility

Parents are asked to inform the school of any known medical conditions on admission. Diabetes is one we must be aware of.

Parents must inform school if their daughter is unwell or if there is any change to their circumstances or treatment which may affect them during the school day.

Staff who teach or care for a diabetic student have a responsibility to be aware of what to look for and how to deal with an emergency. This includes being aware of signs and symptoms of hypoglycaemia and hyperglycaemia and steps required to treat this situation.

The school will liaise closely with parents, student, diabetic nurse, and doctor.

Students must act responsibly and ensure that they eat regularly and sufficiently to maintain their health and wellbeing.

Implications for School

There are no learning problems associated with diabetes. A student with diabetes must eat at regular times. This may mean having to be flexible at lunchtime and allowing students to eat between lessons, in class or even during exams if necessary.

The student may need extra food if undertaking exercise.

If the student is unwell, this may affect their blood sugar, causing them to be unpredictable.

If the blood sugar falls below a normal level this is called hypoglycaemia (hypo). This is a serious situation and must be treated urgently as it may lead to rapid unconsciousness.

Signs, Symptoms and Treatment of Hypoglycaemia (Hypo)

- Drowsiness and lack of concentration
- Pallor, sweating, shaking
- Difficulty in communication
- Stomachache and vomiting
- Aggression and confusion

Most diabetics recognise when their blood sugar is low and will have something sweet to eat or drink.

If any of these symptoms are seen or there is any concern:

- Do not leave the student alone
- Call for the Nurse or a First Aider – The Nurse or First Aider should go to the student
- Follow the steps on their Individual Healthcare Plan (this can be found with their emergency diabetic kit in the Medical Room)
- The student will need to rest until recovered.

If they become unconscious, place in the recovery position and call 999.

Inform the parents as soon as possible.

Special Provision

There is no reason a diabetic should not take a full and active part in all activities in and out of school.

Allowance must be made for students to be able to check their blood sugar at any time. They may carry their testing kit with them or leave it in the medical room.

If a student needs to inject insulin during the school day, appropriate provision must be made for this.

The student must be responsible for carrying their own snacks and is advised to keep extra snacks or drinks in the medical room.

School Trips / Residential Visits

All prescribed medications, a copy of the diabetes appendix, a first aid prompt sheet and the Individual Healthcare Plan (including consent information) must accompany the student and the member of staff in charge of administering the medicine for the trip, this must include name, dosage and frequency of the medicine to be administered.

If for any reason a girl cannot give their own injection, they will only be able to travel if a suitably qualified adult accompanies them.

Staff accompanying students on all visits must be aware of their need to have a regular routine of meals. If there is a change of time as on international travel, any difficulties must be addressed by student, parents, and staff before travel.

APPENDIX FOUR - EPILEPSY

St Mary's School is committed to fully meeting the needs of pupils who have epilepsy, keeping them safe, ensuring they achieve to their full potential, and are fully included in school life. We will do this by:

- Tackling any problems early
- Ensuring that all pupils with epilepsy are fully included in school life, activities and outings (day and residential) and are not isolated or stigmatised
- Giving voice to the views of pupils with epilepsy, for example regarding feeling safe, respect from other pupils, teasing and bullying, what should happen during and following a seizure, adjustments to support them in learning, adjustments to enable full participation in school life and raising epilepsy awareness in school
- Making necessary adjustments e.g. exam timings, coursework deadlines, timetables
- Liaising fully with parents and health professionals (with the parent's permission) to share information about the pupil's education, healthcare, medication and any effects this has on their school life (for example epilepsy medication and seizures can affect a person's ability to concentrate). This will be an ongoing process
- Ensure that staff are epilepsy aware and know what to do if a pupil has a seizure.
- If needed, there will always be a trained member of staff available to deliver emergency medication
- Every student with epilepsy will have an Individual Healthcare Plan in place which will include information on the pupil's seizures, medication, and emergency protocols
- Raising awareness of epilepsy across the whole school community, including pupils, staff, and parents

General Advice for Seizure First Aid

- Stay calm
- If the child is convulsing, then put something soft under their head
- Protect the child from injury (remove harmful objects from nearby or guide away from danger)
- NEVER try to put anything in their mouth or between their teeth
- Remove all other students from the area
- Try and time how long the seizure lasts - if it lasts longer than usual for that child or continues for more than five minutes then dial 999
- When the seizure is over stay with them, reassure them and call for the school nurse.
- Do not try to move the child unless they are in danger.
- Do not try to restrain the child
- Do not give them food or drink until they have fully recovered from the seizure
- If the child is still very drowsy after the seizure aid breathing by gently placing the child in the recovery position once the seizure has finished

Sometimes a child may become incontinent during the seizure. If this happens, try to put a blanket or cover around them when their seizure is finished to avoid potential embarrassment.

St Mary's School recognises that children with epilepsy can have special educational needs because of their condition. If this is the case, the procedures for helping children with additional needs will be put in place. We also recognise the importance of having a school environment that supports the needs of children with epilepsy. Any child suffering with epilepsy will be able to rest, supervised, in the medical room if necessary.

School trips / Residential Visits

All prescribed medications, a copy of the epilepsy appendix, a first aid prompt sheet and the Individual Healthcare Plan (including consent information) must accompany the student and the member of staff in charge of administering the medicine for the trip, this must include name, dosage and frequency of the medicine to be administered.