

New City Primary School

Medicines, Health and Hygiene Policy

November 2016

New City Primary School Medicines, Health and Hygiene Policy

- The following policy deals with all aspects of care and support for children at New City Primary School.
- It covers the basic need for good hygiene procedures and cleanliness.
- It covers our basic first aid procedures and emergency procedures when needed.
- It covers the specific needs of children with identified medical conditions
- It covers the administration of medicines in school
- The person with Lead Responsibility is :-
Alastair Anderson
- Within each Phase this is delegated to the Phase Leader to implement the day to day procedures and requirements of the policy.

Aims for policy

1. That procedures and record keeping systems are in place and consistently used by all staff.
2. That all staff receive inset on first aid, asthma, allergies, epilepsy on a regular basis.
3. That wings should be equipped to enable policy to be carried out.
4. That policy should be reviewed annually by the SENCO in liaison with the School Nurse and other relevant professionals

A. Hygiene Procedures

At New City, we aim to ensure that we have a healthy and safe environment. We have a Hygiene and Medical Procedures Policy to cover toileting, first aid and procedures with medication. All staff are aware of the contents of this policy

Each floor of the building should be equipped with the following:

- Disposable gloves
- Disposable aprons
- Body wipes
- Anti bacterial spray
- Clip on hand wash
- First aid kit
- A locked cupboard

It is the responsibility of a named person to ensure that these are maintained but the responsibility of everyone to support this person by informing them of low stocks etc.

Responsible person:-

Ground Floor -

Middle Floor -

Top Floor -

Carol Rider (Premises Manager) manages and orders the central stock of supplies

1. Toileting and changing procedures

All children have access to toilets at all times.

If a child needs help with toileting the following should be considered: -

1. Whether a toileting programme is necessary as part of a child's management

programme. Depending on level of need the SENCO and class teacher has a responsibility to co-ordinate this and discusses it with parents.

2. Children must only be changed or taken to the toilet by permanent or long-term temporary members of staff, wherever possible it should be someone who has a good relationship with the child.
3. Recognising our equal opportunities policy any person (after considering 2 above) can take the responsibility to change a child however, the following must be considered: -

1. Cultural norms.
2. Child's own level of development.
3. Child's own request.
4. Parents' specific requests.

The following guidelines **must** be followed when toileting children: -

1. Let someone know where you are going and who with.
2. Follow individual toileting programmes.
3. Respect the child's dignity in terms of privacy, close but do not lock door. Wait outside if this is appropriate.
4. Allow the child to do as much as they can themselves.

If for any reason you are unsure or feel unable to change a child then consult the SENCO.

It is not appropriate for children to be involved in the intimate care of each other.

Children's toileting programmes should be regularly reviewed. Help and advice can be sought from health professional (e.g. school nurse, continence advisor, and occupational therapist) as part of this review.

2. If a child needs changing

Gloves must be worn when changing children, dealing with blood, or vomit or any bodily fluids (faeces, etc)

The child should be changed as quickly as possible. The clothes rinsed and sent home at the end of the day. If a child has a toileting programme or wets regularly parents should be encouraged to send changes of clothes. If other arrangements are necessary (e.g. use of school clothes) these must be discussed

with the parents.

All changing/toileting areas should be wiped down after changing the child. Nappy bins should be emptied at least twice a day.

3. If a child arrives at school in a state which affects their education or their relationships with other children

There should be a confidential discussion with the parents and action agreed. This may include the use of school facilities or the development of a hygiene programme.

If the situation does not improve the situation should be discussed with the SENCO or Head teacher who will make the decision whether the concern needs to be passed to the school nurse, health visitor or social services.

4. Cleaning and Hygiene

All equipment and areas of the school must be cleaned to a high standard. It must be remembered that children may mouth equipment, work on the floors or need to spend a great deal of time in the toilets. Each wing should have plans how equipment is cleaned and whose responsibility this is. Toilets should be checked at the beginning of each session.

B. First Aid

In accordance with New City Health and Safety Policy:

"All accidents, dangerous occurrences (including near misses) and certain serious diseases must be reported. The procedure is given in detail in the Health and Safety Policy.

A) Accident books/forms are kept on each floor and will be completed by the employee who was involved with the child/adult.

B) The record of more serious accidents, dangerous occurrences and ill health enquiries registers are kept in the school office. The relevant employee will complete information.

All support staff have completed a day's basic first aid training. In addition we have qualified Paediatric First aid trained staff. The following staff completed

a recognised qualification which includes paediatric training. They should be consulted if a child/adult is hurt.

Office and Admin			
Early Years	Yr 1/2	Yr 3/4	Yr 5/6

The following procedure should be followed: -

1. Consider whether a child should be moved - if:
 There is any suspicion of a broken limb - the child should **not** be moved.
 Do not move a child if this may mean a trail of blood - take steps to control the bleeding first.
2. Minor cuts and abrasions should be cleaned with warm water.
 Antiseptic cream may be used. All minor cuts, open or weeping skin lesions and abrasions should be covered with a waterproof dressing (check with child for allergy). Use disposable gloves at all times.
3. Ice or a cold compress should be administered to knocks and bumps.
4. If necessary inform the Head Teacher and consult whether parents should be informed.
5. Any surface which has had blood splashed on it must be cleaned liberally with detergent and water.
6. Ensure that you wash your hands.
7. Dispose of any blood stained waste in a plastic bag and put in the covered waste bin in hygiene room.
8. Complete accident record.
9. Inform parents either by phone or accident letter, copies of which are in each Wing.

There should be a first aid kit on each floor and in the school office.

There are a few key rules about first aid:

1. **All** cuts, open or weeping skin lesions and abrasions should be covered with waterproof or suitable dressing.
2. **All** medication should be locked in a safe place. If it needs to be refrigerated it should be in the staff room fridge.
3. When toileting children or dealing with injuries the child's safety and dignity is paramount.
4. Staff **must** wear disposable gloves when toileting or dealing with blood or body products.

C. If A Child Is Unwell In School

1. Talk to the child to find out what is wrong.
2. If appropriate give child space and time to recover.
3. If child does not recover or you feel she/he needs to go home inform Phase leader and head teacher who will arrange for parents to be contacted if appropriate.
5. Make child comfortable until parents arrive: -
When parents arrive it should be made clear that the child is unwell and should return to school when she/he is better. It should be made clear that the child should **not** return to school on that school day.
6. If no-one can be contacted make the child comfortable and keep phoning.
7. **If at any time you become very concerned about a child and cannot contact parents discuss with head teacher who will then consider whether an ambulance should be called or alternative action**

Procedures for supporting any members of the school

community infected or affected by HIV

The London Borough of Newham Education Department published its policy on HIV and AIDS in March 1994. Staff and governors of New City school have agreed to follow the procedures laid out in the policy to support any members of the school community infected or affected by HIV. No-body living with HIV should be excluded or prevented from benefiting from all the services provided by the Education Department. The following issues apply:

1) HIV is not a notifiable disease and there is no obligation for anyone associated with the school, either staff or pupil, to inform the school of their HIV status;

2) Confidentiality concerning a person's HIV status must be safeguarded at all times and information shared only with the person's informed consent. The need for strict confidentiality to be maintained, applies to whether a person receives information about someone's HIV status directly (specifically being informed) or indirectly (finding out).

3) Education about HIV and AIDS is an essential part of the drugs and sex education component of any personal, social and health education (PSHE) programme. The purpose of teaching about HIV is to foster a sense of responsibility and respect for oneself and others, and to provide young people with the self-esteem, confidence and skills they will need to maintain good health and relationships. We would also wish to promote a caring and compassionate attitude to those in the community who have become infected with HIV.

4) The school's Hygiene Policy gives details of infection control procedures.

D. Medication in school

Medication must only be taken in school when absolutely essential.

Written permission must be obtained from parents before any medication can be administered.

This must state the dosage, the frequency and the expiry date of the medication.

If emergency medication has been prescribed by a doctor then a copy of the doctor's authorisation should be held on file by the school.

1. Medication other than inhalers

If a child needs medication it must always be considered whether that child is well enough to be at school.

The medication must be clearly labelled and be for the named child. It will be kept in a locked cupboard or the staff room fridge (if necessary). When it is administered this will be recorded by an adult who is happy to supervise the procedure.

A member of the wing staff will check that a child has received their medication.

The permission letter will be in the medical file.

Parents will inform the school of any changes and it is the responsibility of the Curriculum Support Teacher to update records and inform all staff of changes.

2. Asthma inhalers

Written permission is sought from parents.

Inhalers will be kept in a cupboard in the child's classroom. Children will have access to inhalers at all times (provided they do not exceed agreed dosage). Each time a child uses an inhaler, this will be recorded with date and time and signature in the medical file.

Ideally parents will be encouraged to provide a spare inhaler which can remain in school.

Children may have inhalers on their person during school time, if this has been agreed with parents and everyone feels that the child is responsible.

Staff must take a child's inhaler to all off-site activities.

E. Management of asthma

We recognise that asthma is a physical condition, not an emotional illness. It affects at least one in every ten children. A sudden narrowing of the air passages making it difficult to breathe causes an attack. These passages are almost continuously inflamed or red or sore. Asthma can be controlled by,

firstly avoiding known irritants and, secondly, by inhaling specific drugs. Drugs can be self-administered by the child concerned.

As a school we:

- welcome all pupils with asthma
- encourage and help children with asthma to participate fully in all aspects of school life
- recognise that asthma is an important condition affecting many school children
- recognise that immediate access to inhalers is vital
- do all it can to make sure that the school environment is favourable to children with asthma
- ensure that other children understand asthma so that they can support their friends; and so that children with asthma can avoid the stigma sometimes attached to this chronic condition
- have a clear understanding of what to do in the event of a child having an asthma attack
- Work in partnership with parents, schools, school governors, health professionals, school staff and children to ensure the successful implementations of a school policy.

F. Management of epilepsy

In-service sessions are available for staff on the management of epilepsy. Clear procedures must be discussed with parents regarding management of a child's epilepsy.

There are clear written procedures for dealing with each child's individual needs; these may entail use of emergency treatments.

G. Manual Handling Procedures

We follow Newham's *Guidance on Moving and Handling Pupils in Schools and other Educational Establishments*. (Appendix 7)

Each child that needs a *Moving and Handling Assessment* will be reviewed and a plan put into place, this includes procedures for emergency evacuation.

H. Emergency situations

If staff are concerned about any child that they believe to be of an emergency nature then they should relay that to Senior member of staff ASAP. If this is not possible in an emergency then an ambulance should always be called. It is important to remember that we are not medical professionals but are trained to deliver care, medicines and emergency procedures when needed.

I. School Trips and Residential Trips

Staff planning trips should always be aware of and plan for all children to be included. Our policy is that all children should have the opportunity to take part in all activities.

For some children this requires a very considered and risk assessed approach to enable them to take part.

Staff need to be aware of;-

- Levels of staffing needed
- Ensuring appropriately trained and confident staff are available
- Level of First Aid support
- Accessible transport
- Liaison with parents
- Liaison with medical professionals if needed

Policy adopted November 2016

Jim McLucas

Associate Head Teacher

New City Primary School

Record of Medication Administration.

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