



Whiteways Primary School

Health and Safety Policy

Plan Administration

Version	1
Date	19th March 2019
Responsibility for the Plan	Lyn Burgin Federation Business Manager
Approved by	Finance and Staffing Committee
Date of review	March 2020

INDEX

Section	Page
Policy Statement	4
Aims	4
Responsibilities	5-6
Risk Assessments	7
Fire	8
Permission to Work	9
Asbestos	10
Legionella	10
Accidents	11
First Aid	12
Electricity	12
Gas	13
Substances – COSHH	14
Site Safety & Security	14
Personal Safety	15
Appendix 1 - CYPD Health & Safety contacts & codes of Practice	16
Appendix 2 - Medical/Accident Procedures	17
Administering Medicines	18
Asthma	19
Sunburn	19
Appendix 3 – What to do in an Asthma Attack	20
Appendix 4 – Managing Medicines Policy	21 – 27
Appendix 5	28
Health Care Plan – Form 2	29
Parental Agreement to Administer Medicines – Form 3A	30
Parental Agreement to Administer Medicines – Form 3B	31
Headteacher Agreement to Administer Medicines – Form 4	32
Record of medicine administered to a child – Form 5	33
Record of medicine administered to all children – Form 6	34
Request for child to carry own medicine – Form 7	36
Staff Training record – Form 8	36
Appendix 6 - Educational Visits – H & S Policy guidelines	37

This policy includes our Statement of Intent, our organisational structure of responsibilities and the methods by which we will achieve a safe working environment for staff, pupils, visitors and other users of our site.

This Policy incorporates the Medical/accidents Procedures and Managing Medicines Policies.

Policy Statement

The Headteacher, Governors and staff at this school are committed to providing a safe and healthy environment for all users of the school in such a way that it:-

- Prevents harm and loss to employees, service users, including pupils, members of the public and contractors.
- Promotes the safety, health and welfare of employees, service users, including pupils, vulnerable groups, members of the public and contractors.
- Does not contravene criminal or civil law.

As a school, our educational priorities aim to:-

- encourage all pupils to achieve their full academic and social potential;
- provide pupils with the skills and experience which will ensure that the widest possible range of choices are open to them in their future lives;
- provide a sense of community in which individuals feel valued and are actively encouraged to value, respect and help others;
- create an atmosphere in which students enjoy and take pride in their achievements.

Quite clearly these educational and social priorities can only be fully realised within a physical environment that is both a safe and healthy place to work. This in turn can only be brought about by the dedicated co-operation of all within the school. Health and safety at this school is an area where Governors, the Headteacher, staff, safety representatives and parents share common objectives. It is vital that we all understand each other's duties, functions and responsibilities as well as our own because it is only by the co-operation and teamwork of everyone involved that health and safety objectives in school can be achieved.

Aims

- To ensure that the school is always a safe and healthy place in which to work.
- To provide plant, equipment and systems of work that are safe and without risks to health.
- To raise awareness among all users of the school as to their responsibility for themselves and others.
- To provide sufficient information, instruction, training and supervision to enable all employees to avoid hazards and contribute positively to their own health and safety at work.
- To ensure the dissemination of all relevant information from the CYPD and other bodies to the correct user(s).
- To regularly monitor and review safety procedures throughout the school.
- To create and update a central file containing relevant health and safety information.

Responsibilities

- Overall responsibility for the management of health and safety in the school lies with the Headteacher and the school Governors, although many of the specific tasks are delegated to the Federation Business Manager.
- All those who work in our school have the responsibility to do what they can to take care of themselves, their colleagues, pupils and visitors. In particular employees should co-operate with their managers.
- We will ensure adequate consultation takes place between managers and employees to allow everyone to contribute to safe working. This will usually be done through staff meetings for education staff and non-education staff will be briefed by their line managers.

1. Overall responsibility for the management of health and safety in the school is that of:-

- The Head Teacher

2. Responsibility for the following areas is that of:-

- Federation Business Manager - Overseeing of school systems
- Site Manager - Premises safety, security and general maintenance
- Catering Manager - Catering and the school kitchen
- ICT Technician
- Education Visits Co-ordinator

General Responsibilities

The Governors will:

- Ensure that adequate funding is provided from the school budget to enable the school to be organised and run in a safe and healthy manner.
- Where funding for particular hazards is the responsibility of the CYPD, the Governors, through the Headteacher, will inform the CYPD of the problem and assess the hazard in order to render the problem area safe.
- Deal with any health and safety problems brought to them by the Headteacher, staff or parents, through their termly meetings or any emergency meetings, which may be called due to unforeseen circumstances.
- Ensure that the CYPD's Health and Safety Policy is brought to the attention of all staff and implemented in school.
- Help prepare and implement a "site-specific" health and safety policy.
- Confirm compliance with CYPD policies and procedures.
- Ensure that appropriate risk assessments have been carried out.
- Ensure that all members of staff receive appropriate training.
- Ensure adequate consultation takes place between managers and employees to allow everyone to contribute to safe working.

The Headteacher will:

- Ensure that health and safety is incorporated into the planning and organisation of all school functions.
- Ensure that suitable and sufficient assessments of hazards and risks to staff members, pupils and other visitors and users of the school are carried out. Also to act upon these assessments in order to reduce risk.
- Attend health and safety training courses as appropriate.
- Ensure the provision of adequate training, instruction and supervision for all members of staff.
- Provide necessary information to staff members and their representatives on health and safety matters.
- Ensure that staff members who are delegated to carry out particular tasks are competent and fully aware of their responsibilities.
- Investigate any accidents or near misses and bring these, along with any other health and safety problems, to the attention of the Governors.
- Support the Federation Business Manager in carrying out the role of Health & Safety Officer.
- Ensure adequate consultation takes place between managers and employees to allow everyone to contribute to safe working. This is usually done through staff meetings.

The Federation Business Manager and Site Manager will:

- Provide necessary information to staff members and their representatives on health and safety matters and, in consultation with the Headteacher, ensure the provision of adequate training, instruction and supervision.
- Ensure staff members who are delegated to carry out particular tasks are competent and fully aware of their responsibilities.
- Investigate any accidents or near misses and bring these, along with any other health and safety problems, to the attention of the Headteacher and Governors.
- Inform relevant staff of LA updates with regard to Health & Safety issues.
- Organise risk assessments and school Health & Safety walk rounds with the relevant Governors.
- Ensure that the Health & Safety Policy is updated at regular intervals.

All Staff Members will:

- Ensure that they are fully aware of their roles and responsibilities, co-operate with the schools policies and procedures and follow any Codes of Practice produced by the CYPD.
- Ensure that safe working practices are adopted at all times and comply with the findings/other outcomes of risk assessments, whether in school or on educational visits.
- Attend health and safety training courses as appropriate.
- Bring to the attention of the Headteacher any accidents, near misses, dangerous equipment or situations which may occur whilst in school or on educational visits.
- Report to the Headteacher any problems that they feel that they cannot deal with themselves.
- All those who work in our school have the responsibility to do what they can to take care of themselves, their colleagues, pupils and visitors. In particular employees should co-operate with their managers.

Risk Assessment

Risk Assessments are a legal requirement mainly under the **Management of Health and Safety at Work Regulations 1999**, although most health and safety legislation requires a risk assessment approach.

Risk Assessments must be recorded. This could be in the CYPD's Generic Risk Assessment booklets or on the risk assessment form (a blank assessment form can be found at the back of each of the generic booklets). The booklets must be kept on the school premises. Risks should be assessed periodically, following an accident, on the introduction of any new process/equipment and also any change in circumstances.

The CYPD's Generic Risk Assessment for Whiteways can be found electronically on *School information on server* in the *Risk Assessment folder* within the *Premises, Health & Safety folder*. A paper copy is also kept in the Federation Business Manager's office. This is completed annually by the Federation Business Manager and Site Manager, along with the Assets Officer. Risks should be assessed periodically and also any new process or change in circumstances will require an updated assessment.

Educational visits also require a written risk assessment, see copy of CYPD guidelines from Thornbridge which can be found on *School information on server* on the school network.

Shown below are the roles of the staff assisting with the assessment process as well as details on when they will be carried out and our updating systems.

The following people assist with the assessment process for their individual area of work:

The Site Manager – Andy Roe Premises safety, security and general maintenance
The Catering Manager – Marie Montgomery Catering and the school kitchen
The SENCO – Lisa Whitehead Personal care plan for individual children
The EVC – Rachael Kunze Educational visits and trips out of school

It is the Headteacher's responsibility to ensure that risk assessments are carried out. However the Headteacher may request the assistance of competent staff in carrying out a risk assessment.

The Federation Business Manager and the Health & Safety Governor review the School's Risk Register on a regular basis and this is shared with the Governing Body.

Fire

An outbreak of fire in a school can be extremely serious. Under the **Regulatory Reform (Fire Safety) Order 2005**, there is a legal requirement for each building to have an up to date fire risk assessment. This should identify all sources of heat with the potential to cause fire e.g. gas heaters, bunsen burners, cookers etc. and also consider the storage of combustible materials.

The Site Manager is responsible for ensuring that a Fire Risk Assessment has been carried out and also that there is a process in place for reviewing/updating this on a regular basis. This is done as part of the servicing package which is purchased from the LA.

The Site Manager and Assistant Caretaker are responsible for maintaining the boiler room in a clean and tidy condition to ensure that any danger from fire is minimised. The Catering Manager is responsible for ensuring that any danger from fire is minimised within the School Kitchen.

Every member of staff is responsible for their own work area. At the end of the session everyone should ensure that all electrical equipment is switched off and not left on standby. This will help minimise the risk for fire as items left on standby could be a potential fire risk. If using multi-plugs these should be power surge protected and any reel cables should be unravelled before use.

The Site Manager is responsible for ensuring that the Fire Precaution Log Book is kept up to date and that fire drills are carried out. Fire evacuation drills are carried out once per term and are recorded in the Fire Precautions Log Book which is kept in the School Office. Follow-up feedback is reported to staff and pupils. Fire evacuation posters are displayed in every classroom and full fire evacuation instructions are given to every member of staff at the start of the academic year and are displayed in the Staff room, Admin Office and School Kitchen.

The Site Manager is responsible for ensuring that various other fire precautions such as fire alarm and emergency lighting testing and fire extinguisher maintenance are carried out and recorded. The Site Manager and Assistant Caretaker test the fire alarms and emergency lighting on a regular basis and these are recorded in the Fire Precaution Log Book which is kept in the main school admin office with the Site Manager's record books. Fire Officers visits are also recorded in this book.

When the school requires painting, only paints providing a flame retardant surface will be used in high risk areas (assembly halls, means of escape, staircases, areas where there is an added fire risk etc)

Ongoing monitoring is required to ensure that combustible materials (liquids, solids or gases) do not come into contact with sources of heat.

Internal fire doors should be kept closed to stop fire spreading. Hydraulic door closers should be maintained to ensure correct operation (damage to these closers is very common in schools).

Smoking is not allowed in any part of the building, yards or car park in line with the No Smoking Act. See No Smoking Policy.

Permission to Work

The CYPD Permission to Work process is in place at this school.

Intrusive Work

A permission to work process must be followed for any work that is intrusive to the structure of the building.

The Federation Business Manager and Site Manager are responsible for ensuring that the CYPD Assets Team are informed, via the permission to work scheme, at the planning stage of any such work.

Non-Intrusive Work

The Site Manager is responsible for ensuring that all non-intrusive work is risk assessed and a log kept in a site workbook.

The Non-Intrusive Workbook is located in the staffroom in the Site Manager's pigeon hole. The Workbook needs to be kept up to date and available for inspection.

Asbestos

Asbestos is a naturally occurring mineral that has been used for many years in the construction of buildings and in many products. It was mainly used because of its fire proofing and insulation qualities.

There is an Asbestos Register on site and is kept in the main school office. The location of the register is important, as it must be readily available to all who need to consult and sign it.

The Headteacher, as the duty holder under the **Control of Asbestos Regulations 2006**, has responsibility for the management of asbestos on site, although some functions and day-to-day issues may be delegated to other competent and trained members of staff.

The Site Manager and Federation Business Manager are responsible for ensuring that the asbestos register and the information within is brought to the attention of anyone likely to disturb asbestos fibres in the course of daily routines or proposing to plan or carry out work. (Examples are site staff, surveyors, contractors, computer technicians, visitors, helpers etc).

Asbestos survey information in the form of Asbestos Management Reports and localised survey reports are kept in the asbestos register which is kept in the main school admin office with the Site Manager's record books.

A permission to work process must also be followed for any work that is intrusive to the structure of the building.

Where invasive building works are to be carried out on the school premises (e.g. refurbishment, demolition, additional electrical wiring, installation of whiteboards and projectors etc) a more in depth, type 3, asbestos survey must be carried out at the

planning stage and certainly before work commences. (A CYPD Assets Officer can help to arrange the appropriate survey if needed.)

This survey must cover the full scope of works.

The Site Manager and Federation Business Manager are responsible for ensuring that the CYPD Assets Team are informed, via the permission to work scheme, at the planning stage of any such work.

The Site Manager and Federation Business Manager are responsible for liaison with the CYPD Assets team to ensure

- the condition of asbestos materials are reviewed.
- any asbestos hazard risk assessments reviewed.
- any floor plan changes are recorded and updated.

As long as the asbestos is in good condition and is not disturbed or damaged there is no risk to individuals. However, if it becomes damaged or disturbed, it can become a danger to health as asbestos fibres can become released into the atmosphere and therefore people can inhale the fibres.

Legionella Risk Management

Legionnaires' disease is a type of pneumonia. It is an uncommon but serious disease.

The germ which causes legionnaires disease is a bacterium called Legionella pneumophila. People catch legionnaires disease by inhaling small droplets of water suspended in the air which contain the Legionella bacterium. However, most people who are exposed to Legionella do not become ill.

Legionnaires' disease does not spread from person to person.

The bacterium which causes legionnaires disease is widespread in nature. It mainly lives in water, for example ponds, where it does not usually cause problems.

Outbreaks occur from purpose-built water systems where temperatures are warm enough to encourage growth of the bacteria, eg in cooling towers, evaporative condensers and whirlpool spas (trade name Jacuzzi) and from water used for domestic purposes in buildings such as hotels and schools.

A Legionella Survey has been carried out at this school. The survey report is located in the main school office.

A Legionella Maintenance Programme to prevent the occurrence of legionella bacteria is required at this school. This is located within the Log Book which accompanies the Legionella Survey Report.

The Federation Business Manager is responsible for ensuring

- that the recommendations of the report are carried out.
- that appropriate members of staff are trained to understand the reports and carry out or arrange for work required in the maintenance programme.

The Federation Business Manager is responsible for ensuring that a competent person reviews the information in the Legionella Survey Report at least every 12 months or when changes occur to any systems affected.

The Site Manager is responsible for ensuring the activities in the maintenance programme are up to date and carried out on time.

The Site Manager is responsible for carrying out or arranging the maintenance programme and documenting the activities in the Log Book which accompanies the Legionella Survey Report.

Accidents

Even in a safety conscious school, accidents may still occur. This is how we deal with them.

All accidents to our staff or pupils will be recorded and investigated, as appropriate to find out what happened and how any similar incident can be avoided.

The Headteacher will ensure that accidents are investigated and that major accidents, which are reportable to the Health and Safety Executive, are reported to the incident call centre (0845 300 9923) and also to the CYPD's Health and Safety Advisers. The Safety Advisers can give assistance in investigating accidents.

The Federation Business Manager will ensure that all accidents are recorded on an Accident/Serious Incident sheet. A copy is sent to CYPD's Health & Safety department and one is kept in school in the Federation Business Manager's office

The Federation Business Manager will review any accident reports.

The Federation Business Manager and Headteacher will carry out any accident investigations to see what lessons can be learnt and how similar incidents can be avoided. Risk assessments will also be reviewed in light of any lessons learnt.

The CYPD Code of Practice No10, which can be found in the CYPD Health & Safety folder in the Documents section of School Point, will be adhered to following an accident.

Minor accidents and injuries to pupils and staff will be dealt with in accordance with the Medical/Accidents Policy. Appendix 2, page 17.

All staff are responsible for notifying the Site Manager or the Assistant Caretaker of any hazards which could cause an accident and it is the Site Manager and Assistant Caretaker's responsibility to take appropriate action.

First Aid

Under the **First Aid at Work Regulations 1981**, employers have to ensure that there are adequate and appropriate equipment and facilities for providing first aid in the workplace. This should include arrangements for first aid based on a risk assessment of the school.

The following people are the named first aiders and hold a relevant first aid qualification. There are several other members of staff who have also undertaken first aid training.

Name	Usual Location on Site
Margaret Howe	Class base or staff room
Janet Howe	Class base or staff room
Balkies Shah	Class base or staff room

The Federation Business Manager keeps records of qualifications on site and there is a procedure in place for revalidating first aid certificates. The records are kept on the individual's personnel file which is kept in the Federation Business Manager's office.

Margaret Howe is responsible for ensuring that the First Aid boxes are restocked. The first aid boxes are located in the staff room, Medical Room and Nursery.

The Medical/Accidents Policy can be found in Appendix 2, page 17.

Consideration should also be given to the level of first aid provision that is required on off-site activities.

In line with DCSF guidance there should be 1 first aider for every 100 people on site. This is usually made up of 2 four day qualified first aiders, with the remainder being 1 day trained.

Electricity

Electricity has the potential to cause serious harm, or even death and is treated as a priority with regard to maintenance and repair. The **Electricity at Work Regulations 1989** requires that all electrical systems and appliances are periodically inspected and maintained.

The maintenance and repair of electrical equipment is the responsibility of the school.

Fixed installations i.e. sockets, light fittings and general wiring throughout the school will be tested at least every five years by a competent electrician. This school arranges the testing and maintenance of the fixed electrical installation through the Leaf Premises Package.

Portable electrical equipment will be inspected and tested annually in accordance with CYPD advice. This is set out to comply with the Institute of Electrical Engineers Guidance.

Unless staff can prove that any personal electrical equipment brought in for use in school is less than 12 months old then it cannot be used until it undergoes a Portable Appliance Test (PAT).

The Site Manager is responsible for arranging the testing and maintenance of portable electrical appliances.

The test certificates and recommendation documentation is kept in the Federation Business Manager's Office.

All members of staff have a responsibility to undertake a visual check of all electrical equipment before use and should not use the equipment if any of the following are present:-

- Damaged cables or coloured wires showing.
- Cracked or loose plugs or bulbs.
- Any signs of overheating/burning.
- Any unusual noise or smell when the equipment is in use.
- If cable reels are used these should be fully unravelled before use.

Any electrical equipment which is faulty or damaged should be reported to the Site Manager and details entered into his repair book which is kept in the Staff Room. This equipment should be taken out of use immediately. The Federation Business Manager should be notified by the Site Manager of faulty/damaged equipment in order that either repair or disposal can be arranged.

At the end of the session every member of staff should ensure that all electrical equipment is switched off and not left on standby. This will help minimise the risk for fire as items left on standby could be a potential fire risk. If using multi-plugs these should be power surge protected and any reel cables should be unravelled before use.

Gas

Under the **Gas (Installation and Use) Regulations 1994**, there is a requirement for all gas appliances (central heating boilers, gas water heaters etc) to be checked, serviced and maintained by a competent (CORGI registered) Contractor on an annual basis.

The testing and maintenance of the gas appliances is carried out automatically as the school subscribes to the Leaf Premises Package.

Gas servicing certificates and recommendation documentation is kept in the Federation Business Manager's office and on Technology Forge.

In case of heating breakdown, there may be a need to bring in supplementary heating (usually Calor gas). Help and advice can be obtained from The CYPD Assets Team. Code of Practice No 25 in the Health & Safety folder in the Documents section of School Point gives clear advice on this issue.

Substances

The **Control of Substances Hazardous to Health Regulations 2002 (COSHH)** require an assessment to be made of the work processes that involve the use of substances that are hazardous to health.

The COSHH regulations do not solely apply to cleaning products. Consider cleaning, decoration, maintenance works, janitorial, science, design and technology, art etc.

There is an inventory on site of all hazardous substances

The Site Manager is responsible for ensuring the cleaning staff are informed and trained regarding hazardous substances or when handling hazardous substances and is responsible for keeping the inventories up to date.

The Catering Manager is responsible for ensuring the catering staff are informed and trained regarding hazardous substances or when handling hazardous substances and is responsible for keeping the inventories up to date.

The Site Manager and Catering Manager are responsible for ensuring that data sheets are available on site and that appropriate assessments have been carried out.

Inventory Location-:

- Cleaners Sluice x 2
- Catering Office

Site Safety and Security

A perimeter fence secures the school buildings on this site but does not cover the car park or caretakers' residence. Any issues regarding damage or access to the site should be directed to the Site Manager.

The Site Manager is responsible for ensuring that regular inspections of the external areas of the site are carried out. The following checks are carried out at this site.

Item	Frequency
Fencing, walls and access gates	Weekly
External Surfaces (Condition / Dangerous Objects)	Weekly
Trees (An annual Tree Survey is carried out as part of the Servicing Package)	Weekly
Services (Manhole Covers, Drainpipes, Guttering, etc)	Termly

A security intruder alarm system and CCTV covering the outside of the building is installed at this site.

The Site Manager is responsible for the maintenance and running of the security systems.

In cases of emergencies outside normal hours the following people can be contacted.

Name	Telephone Number
Resident Assistant Caretaker – Robert Woodhead	07798 907964
Site Manager – Andy Roe	07810 634867
Exec Head – Sue Bridges	07572 379796
Federation Business Manager -	07805 739335

All staff should be vigilant with regard to security of the building so as not to allow intruders into school. Access to the main school outside school start and finish times is via an electronic gate which is operated from the school office. Entry to the Nursery can only be gained by being let in by members of staff. All other outside doors are fob operated or cannot be opened from the outside.

Entrance doors should be securely closed once all the children are in school.

If classes are on the school field the rear entrance door should not be left open to gain access at the end of the lesson. Access should be gained by a member of staff using their fob. Similarly, classroom doors which open on to the yards should not be left open when there are no adults in the classroom.

PERSONAL SAFETY

All staff should ensure that the following procedures are carried out to keep themselves safe.

All staff have a duty to challenge any strangers or intruders to the school site and to report any incidents to the school office.

When staff leave the school site during the day they should inform the office staff where they are going and how long they expect to be off site. Everyone must sign out when they leave the site and in again when they return.

If staff are meeting with a parent/carer this should be done in an area where they are visible to other members of staff.

All staff should be aware of the Child Protection Policy and should not put themselves in vulnerable situations with children. A copy of the Child Protection Policy can be found in the School Policy Folder on staff shared and hard copies are in the School Policy Folders

Staff should be aware of the CYPD code of conduct with regard to the how other people should be treated. A copy of the CYPD Dignity and Respect at Work guidelines is in the staff room and in the School Policy Folder on staff shared

Staff and parents working in school should be aware of personal information with regards to pupils and members of staff which could be confidential and should not be disclosed and discussed outside of school. Staff should also be mindful not to discuss matters regarding pupils and members of staff in earshot of visitors and parents.

Children and Young People's Directorate

Useful Contacts

Health and Safety Advisers

The CYPD's Safety Advisers are based at:

**Level 8 , East Wing
Moorfoot Building
Sheffield S1 4PL**

Name	Position	Telephone Number
Claire Hallam	Senior Safety Adviser	0114 2734082
claire.hallam@sheffield.gov.uk		
Sarah Green	Safety Adviser	0114 2734082
sarah.green@sheffield.gov.uk		

Codes of Practice

Codes of Practice, Best Practice Notes and Risk Assessments which are produced by CYPD cover many aspects of school safety. Copies of these can be found on School Point in the Health, Safety and Risk folder in the Document Centre. These are a useful source of reference when carrying out a task (e.g. planning an educational visit, organising a barbecue or setting up portable gas heaters in the event of a heating breakdown). The log in for School Point is:

User name – portal/2040schl
Password – DN3566

Then follow the following link:

Document Centre/ Health, Safety and Risk

**WHITEWAYS PRIMARY SCHOOL
MEDICAL/ACCIDENT PROCEDURES POLICY**

ACCIDENTS AND FIRST AID

At Whiteways Primary School there are three named first aiders, Margaret Howe, Jan Howe and Balkies Shah, although there are other staff who hold a full first aid certificate. There are three main first aid boxes which are situated in the staff room, the Medical room and the Nursery.

First aiders should be called to attend any serious injury or accident to anyone on school premises. All accidents which need a visit to hospital should be reported immediately to the Headteacher or Federation Business Manager. An accident form should be completed by the person treating the injury and this is then forwarded to the LA's Health & Safety department by the Federation Business Manager. These forms are kept in the Federation Business Manager's office. All Injuries, however minor, should be recorded in the First Aid book located in the First Aid cupboard in the staff room.

If an ambulance is called to a pupil a member of staff should accompany the child to hospital and stay until the parent/carer arrives. Where possible staff should not take children to hospital in their own car unless it is quicker to do so. Staff should not use their own cars unless they are covered for business use either on their own motor insurance policy or have elected to be included in the School's Business Use Motor Insurance Policy.

INJURIES TO PUPILS

If a child sustains a minor injury in school such a graze or minor bump they are dealt with by a Teaching Assistant or at lunch time by a lunch- time supervisor. If a more serious accident occurs a trained first aider will be called for. Details of all injuries to children are entered into the First Aid Book by the person dealing with the injury. This book is situated in the staff room and also contains letters to be given to the child to take home to notify parents of the injury. If it is thought that a child's parent could have difficulty reading English a medical sticker is put on the child.

Most of the lunchtime supervisors are first aid trained and they carry an emergency first aid kit along with a first aid book which contains injury letters. They deal with any minor injury and enter the details in their individual book. At the end of lunch time injury details are transferred to the lunch time first aid book by the lunch- time supervisor in charge. This book is kept in the School Office.

An emergency first aid kit is always taken on trips out of school.

ADMINISTERING MEDICINES

(See Managing Medicines Policy for full details. – Appendix 4, page 20)

Medicines can only be administered during school time by arrangement with the Headteacher. Parents must complete a Parental Agreement Form for Administering of Medicines before school can administer any medicine. Medicines can only be administered by an appropriately trained first aider who has attended an Administering Medicines Course. Margaret Howe and Janet Howe have attended a Managing Medicines Course. Other staff must not administer medicines except in the case of an epipen or an asthma inhaler. There must be a designate number of at least two people who are responsible for administering medicine to a child.

If a prescription medicine needs to be administered on a regular basis over 8 days or more the school should have an individual Health Care Plan for the child which should be set up by the School Nurse with the child's parent/carer.

Parents/carers should provide full written information about their child's medical needs. It is the parent's responsibility to monitor when further supplies of medication are needed, not the schools.

Short term prescription requirements should only be brought to school if it is detrimental to the child's health not to have the medicine during the school day. All prescription medicines should be kept in a locked cupboard, or in a refrigerator if necessary.

Medicines should always be provided in the original container as dispensed by a pharmacist and should include the prescriber's instructions for administration. In all cases this should include:

- Name of child
- Name of medicine
- Dosage
- Method of administration
- Time/frequency of administration
- Any side effects
- Expiry date

Medicines should be stored strictly in accordance with the product's instructions paying particular attention to temperature. If refrigeration is needed they can be kept in a refrigerator containing food but must be in an airtight container and clearly labelled. It is acceptable for a staff room fridge to be used for storage as long as the medical items are clearly labelled.

Medicines should never be transferred from their original container.

Staff should never give a non-prescribed medicine to a child unless it is part of an individual Health Care Plan, involving specific written permission from the parents/carers. Where it is administered it must be recorded and the parents informed. A child under 16 must **never** be given aspirin or ibuprofen unless prescribed by a doctor.

Some children may need to take precautionary measures before or during exercise such as use of an asthma inhaler. See section on Asthma below.

Disposal of medicines

School staff should never dispose of medicines. Parents/carers should be asked to collect medicines at the end of each term and it is their responsibility to dispose of them safely.

ASTHMA

Medical advice informs us that asthma in school can be controlled by the use of reliever inhalers (usually blue) only. Other medicines or preventer inhalers (generally brown) are taken at home and do not need to be in school.

If blue inhalers are required in school they should be kept by the individual child and should be taken to PE lessons and to swimming lessons so that immediate relief may be obtained when necessary. Children will need to take inhalers on visits outside school and they should not be allowed to go on trips if an inhaler is not available. They may be used before activities as well as during an attack. Inhalers need to have a label with the child's name stuck onto it.

The medication in blue inhalers is not harmful to non-sufferers and affected pupils can take as many inhalations as they need to help control the attack or pre-empt one. Brown inhalers or tablets should not be brought into school.

If a child suffers an asthma attack please follow the instructions on "The Asthma Attack – What to do" document which is attached. Appendix 3, page 19.

Further information relating to Asthma can be found in the Health Authority's "Supporting Children with Asthma in Schools" folder which is kept in the staff room underneath the photographs of pupils with medical conditions.

DANGER OF SUNBURN

Parents should be reminded about the danger of sunburn and the options open to them ie: send child in protective clothing and with a hat, use protective cream or spray which can be applied by the children. All staff should discuss the dangers of sunburn with children and, where appropriate, with parents. All children, but particularly those with fair skin should be watched carefully for any signs of overheating. They should be encouraged to keep their heads and shoulders covered. If in doubt they should be asked to stay inside. Where possible children should be encouraged to play in the shade. On outings or visits teachers should endeavour to keep vulnerable children out of strong sun unless suitable protective precautions have been taken.

Children should be encouraged to drink plenty of water. All cold water taps in school are mains fed and this water can be used for drinking.

THE ASTHMA ATTACK – WHAT TO DO

If an asthmatic pupils becomes breathless and wheezy or coughs continually:

1. Keep calm. It's treatable.
2. Let the pupils sit down in the position they find most comfortable. Do not make them lie down.
3. Let the pupil take their usual reliever treatment – normally a blue inhaler. If the pupil has forgotten their inhaler and you do not have prior permission to use another inhaler:
 - Call the parents
 - Failing that, call the family doctor
 - Check the attack is not severe – see below
4. Wait 5-20 minutes.
5. If the symptoms disappear the pupil can go back to what they were doing.
6. If the symptoms have improved, but not completely disappeared, call the parents and give another dose of the inhaler whilst waiting for them.
7. If the normal medication has had no effect, see severe asthma attack below.

WHAT IS A SEVERE ASTHMA ATTACK?

Any of these signs mean severe:

- Normal relief medication does not work at all
- The pupil is breathless enough to have difficulty in talking normally
- The pulse rate is 120 per minute or more
- Rapid breathing of 30 breaths a minute or more.

HOW TO DEAL WITH A SEVERE ASTHMA ATTACK

1. Call the family doctor
2. Ask the doctor to come immediately
3. If they are reluctant take the pupil to the nearest hospital casualty department straight away and get someone to warn them you are coming. (Ideally a second adult should go to reassure the pupil). Alternatively call an ambulance.
4. Get someone to inform the parents.
5. If the pupil has an emergency supply of oral steroids (prednisolone, prednesol) give them the stated dose **now.**
6. Keep trying with the usual reliever inhaler every 5-10 minutes and don't worry about possible overdosing.

WHITEWAYS PRIMARY SCHOOL MANAGING MEDICINES POLICY

Whiteways Primary School is committed to reducing the barriers to sharing in school life and learning for all its pupils. This policy sets out the steps which the school will take to ensure full access to learning for all its children who have medical needs and are able to attend school.

SUPPORT FOR CHILDREN WITH MEDICAL NEEDS

Parents/carers have the prime responsibility for their child's health and should provide schools and settings with *detailed* information about their child's medical condition.

There is no legal duty that requires school staff to administer medicines. Schools will try to ensure that they have sufficient members of support staff who volunteer and who are appropriately trained to manage medicines.

Employees of the Local Authority who are not medical healthcare professionals will be supported by their school and the Local Authority in carrying out specified duties, and covered by the Local Authority's insurance arrangements provided that they follow this policy, act in good faith and act in accordance with their training.

Staff managing the administration of medicines and those who administer medicines will receive appropriate training and support from health professionals. *They will be made aware of the correct procedures to follow in administering medicines, and procedures in the event of the child not reacting in the expected way.*

1. MANAGING PRESCRIPTION MEDICINES WHICH NEED TO BE TAKEN DURING THE SCHOOL DAY.

- 1.1 Parents/carers should provide full *written* information about their child's medical needs. A Health Care Plan (Form 2, page 28) should be completed by the School Nurse with the child's parent/carer. This is kept in a folder in the staff room underneath the photographs of pupils with medical conditions.
- 1.2 Short-term prescription requirements should only be brought to school if it is detrimental to the child's health not to have the medicine during the school day.
- 1.3 In order that medicines can be administered by the school a Parental Agreement for the School to administer medicines form must be completed by the parent/carer. (Form 3A or 3B, pages 29 & 30).
- 1.4 The school will **not** accept medicines that have been taken out of the container as originally dispensed, nor make changes to prescribed dosages.
15. The school will **not administer** medicines that have not been prescribed by a doctor, dentist, nurse prescriber or pharmacist prescriber, unless it is done as part of an individual Health Care Plan.
- 1.6 Some medicines prescribed for children (e.g. methylphenidate, known as Ritalin) are controlled by the Misuse of Drugs Act. Members of staff are authorised to administer a controlled drug, in accordance with the prescriber's instructions. A child may legally have a prescribed controlled drug in their possession. The school will keep controlled drugs in a locked cupboard, to which only named staff will have access.

A record of access to the cupboard will be kept. Misuse of a controlled drug is an offence, and will be dealt with under the school's behaviour policy.

1.7 Medicines should always be provided in the original container as dispensed by a pharmacist and should include the prescriber's instructions for administration. In all cases this should include:

- Name of child
- Name of medicine
- Dose
- Method of administration
- Time/frequency of administration
- Any side effects
- Expiry date

1.8 The school will refer to the DfES guidance document when dealing with any other particular issues relating to managing medicines. A copy of these guidelines can be found in the Policies folder on the staff shared.

2. PROCEDURES FOR MANAGING PRESCRIPTION MEDICINES ON TRIPS AND OUTINGS AND DURING SPORTING ACTIVITIES

2.1 The school will consider what reasonable adjustments might be made to enable children with medical needs to participate fully and safely on visits. This may extend to reviewing and revising the visits policy and procedures so that planning arrangements incorporate the necessary steps to include children with medical needs. It might also incorporate risk assessments for such children.

2.2 The school will support children wherever possible in participating in physical activities and extra-curricular sport. Any restriction on a child's ability to participate in PE should be recorded on their Health Care Plan and the relevant teachers should be notified.

2.3 Some children may need to take precautionary measures before or during exercise, and may need access, for example, to asthma inhalers. Staff supervising sporting activities will be made aware of relevant medical conditions, and will consider the need for a risk assessment to be made.

3. THE ROLES AND RESPONSIBILITIES OF STAFF MANAGING ADMINISTRATION OF MEDICINES, AND FOR ADMINISTERING OR SUPERVISING THE ADMINISTRATION OF MEDICINES

3.1 Close co-operation between schools, parents/carers, health professionals and other agencies will help provide a suitably supportive environment for children with medical needs.

3.2 It is important that responsibility for child safety is clearly defined and that each person responsible for a child with medical needs is aware of what is expected of them.

3.3 The school will always take full account of temporary, supply and peripatetic staff when informing staff of arrangements for the administration of medicines.

- 3.4 The school will always designate a minimum of two people to be responsible for the administering of medicine to a child.
- 3.5 Staff should **never** give a non-prescribed medicine to a child unless this is part of an individual Health Care Plan, involving specific written permission from the parents/carers. Where the Headteacher agrees to administer a non-prescribed medicine it **must** be in accordance with this policy. The school will inform parents of this policy. Criteria in the national standards for under 8s day care make it clear that non-prescription medicines should not normally be administered. Where a non-prescribed medicine is administered to a child it should be recorded on a form such as Form 5 or 6 (Pages 32 & 33) and the parents/carers informed. If a child suffers from frequent or acute pain the parents/carers should be encouraged to refer the matter to the child's GP.
- 3.6 National Guidance states: 'A child under 16 should **never** be given aspirin or medicines containing ibuprofen unless prescribed by a doctor.' The school will inform parents of this policy.
- 3.7 Any controlled drugs that have been prescribed for a child must be kept in a locked cupboard with access by the named members of staff who have responsibility for administering medicines.
- 3.8 If a child refuses to take medicine, staff will not force them to do so. Staff should record the incident and follow agreed procedures (which should be set out in the policy or the child's Health Care Plan). Parents/carers will be informed of the refusal on the same day. If refusal results in an emergency, the school's normal emergency procedures will be followed.
- 3.9 **If in doubt about a procedure, staff should not administer the medicine, but check with the parents or a health professional before taking further action.**

4. PARENTAL RESPONSIBILITIES IN RESPECT OF THEIR CHILD'S MEDICAL NEEDS

- 4.1 It is the parents/carers' responsibility to provide the Headteacher with sufficient *written* information about their child's medical needs if treatment or special care is needed.
- 4.2 Parents are expected to work with the Headteacher or designated person to reach an agreement on the school's role in supporting their child's medical needs, in accordance with the school's policy.
- 4.3 The Headteacher should have *written* parental agreement before passing on information about their child's health to other staff including transport staff. Sharing information is important if staff and parents/carers are to ensure the best care for a child.
- 4.4 If parents/carers have difficulty understanding or supporting their child's medical condition themselves, they should be encouraged to contact either the school nurse or the health visitor, as appropriate.
- 4.5 It is the parents/carers' responsibility to keep their children at home when they are acutely unwell.

- 4.6 It requires only one parent/carer to agree to or request that medicines are administered to a child. It is likely that this will be the parent with whom the school has day-to-day contact.
- 4.7 Prior written agreement should be obtained from parents/carers for any medicines to be given to a child using Form 3A or 3B (Appendix 5, page 29).

5. ASSISTING CHILDREN WITH LONG-TERM OR COMPLEX MEDICAL NEEDS

- 5.1 Where there are long-term medical needs for a child, including administration of medicine for a period of 8 days or more, a Health Care Plan should be completed, using Form 2 (Page 28) involving both parents/carers and relevant health professionals.
- 5.2 A Health Care Plan clarifies for staff, parents/carers and the child the help that can be provided. It is important for staff to be guided by the school nurse or the child's GP or paediatrician.
- 5.3 The school will agree with parents/carers how often they should jointly review the Health Care Plan. It is sensible to do this at least once a year, but much depends on the nature of the child's particular needs; some would need reviewing more frequently.
- 5.4 The school will judge each child's needs individually as children and young people vary in their ability to cope with poor health or a particular medical condition. Plans will also take into account a pupil's age and need to take personal responsibility.
- 5.5 Developing a Health Care Plan should not be onerous, although each plan will contain different levels of detail according to the needs of the individual child.
- 5.6 In addition to input from the school health service, the child's GP or other health care professionals, depending on the level of support the child needs, others who may need to contribute to a health care pro forma include the:
- Headteacher
 - Parent or carer
 - Child (if appropriate)
 - Class Teacher
 - Care assistant or support staff
 - Staff who are trained to administer medicines
 - Staff who are trained in emergency procedures
- 5.7 The school will consult the DfES publication '*Managing Medicines in Schools and Early Years Settings*' (copy on staff shared) when dealing with the needs of children with the following common conditions:
- Asthma
 - Epilepsy
 - Diabetes
 - Anaphylaxis

6 CHILDREN CARRYING AND TAKING THEIR PRESCRIBED MEDICINES THEMSELVES.

An example of this would be a child with asthma using an inhaler.

- 6.1 It is good practice to support and encourage pupils, who are able, to take responsibility to manage their own medicines. If such medicines are taken under supervision, this should be recorded.
- 6.2 There is no set age when a child or young person can take responsibility for their own medication. This needs to be a joint decision between school, parents/carers and the pupil. Refer to Form 7 (page 34).
- 6.3 Where pupils have been prescribed controlled drugs, these must be kept in safe custody in a locked cupboard.

7 STAFF SUPPORT AND TRAINING IN DEALING WITH MEDICAL NEEDS

- 7.1 The school will ensure that there are sufficient members of support staff who manage medicines. This will involve participation in appropriate training.
- 7.2 Any member of staff who agrees to accept responsibility for administering prescribed medicines to a child **does so voluntarily** and will have appropriate training and guidance. They will also be made aware of possible side effects of the medicines, and what to do if they occur. The type of training necessary will depend on the individual case.
- 7.3 **Teachers' conditions of employment do not include giving or supervising a pupil taking medicines. Agreement to do so must be voluntary.**
- 7.4 The school will ensure that staff receive proper support and training where necessary, in line with the contractual duty on Headteachers, to ensure that their staff receive the training. The Headteacher will agree when and how such training takes place, in their capacity as a line manager. The Headteacher will make sure that all staff and parents/carers are aware of the policy and procedures for dealing with medical needs.
- 7.5 Staff who have a child with medical needs in their class or group will be informed about the nature of the condition, and when and where the child may need extra attention. This information will be provided by the child's parents/carers and health professionals and will be added to their school record on the SIMs database. At the beginning of each year the School Administrator will provide a list of children who have specific medical needs for each year group. This information is also on the class information sheet which is passed up to the next year group at the end of each school year.
- 7.6 All staff should be aware of the likelihood of an emergency arising and what action to take if one occurs.
- 7.7 Back up cover should be arranged for when the member of staff responsible is absent or unavailable.
- 7.8 At different times of the day other staff, such as lunchtime supervisors, may be responsible for children. They will also be provided with training and advice.

8 RECORD KEEPING

- 8.1 Parents/carers should tell the school about the medicines that their child needs to take and provide details of any changes to the prescription or the support required. However staff should make sure that this information is the same as that provided by the prescriber. Any change in prescription should be supported by either new directions on the packaging of medication or by a supporting letter from a medical professional.
- 8.2 The school will use Form 3A (page 29) to record short-term administration of medication. Consent forms should be delivered personally by the consenting parent/carer. Staff should check that any details provided by parents, or in particular cases by a paediatrician or specialist nurse, are consistent with the instructions on the container.
- 8.3 The school will use Form 3B (page 30) to record long-term administration of medication. Consent forms should be delivered personally by the consenting parent/carer. Staff should check that any details provided by parents, or in particular cases by a paediatrician or specialist nurse, are consistent with the instructions on the container.
- 8.4 It is the parent/carer's responsibility to monitor when further supplies of medication are needed in the school. **It is not the school's responsibility.**
- 8.5 Form 4 (page 31) should be used to confirm, with the parents/carers, that a member of staff will administer medicine to their child.
- 8.6 Consent forms will be kept by the persons designated to administer medicines.

9. SAFE STORAGE OF MEDICINES

- 9.1 The school will only store, supervise and administer medicine that has been prescribed for an individual child.
- 9.2 Medicines will be stored strictly in accordance with product instructions - paying particular note to temperature and in the original container in which dispensed.
- 9.3 Staff will ensure that the supplied container is clearly labelled with the name of the child, the name and dose of the medicine, the method and frequency of administration, the time of administration, any side effects and the expiry date.
- 9.4 Where a child needs two or more prescribed medicines, each will be in a separate container.
- 9.5 Non-healthcare staff will **never** transfer medicines from their original containers.
- 9.6 Children will be informed where their own medicines are stored and who holds the key.
- 9.7 All emergency medicines, such as asthma inhalers and adrenaline pens, will be readily available to children and will not be locked away.
- 9.8 This school will allow children to carry their own inhalers.

- 9.9 Other non-emergency medicines will be kept in a secure place not accessible to children.
- 9.10 A few medicines need to be refrigerated. They *can* be kept in a refrigerator containing food but *must* be in an airtight container and clearly labelled. There will be restricted access to a refrigerator holding medicines. It is acceptable for a staff room fridge to be used for storage, as long as medical items are clearly labelled.
- 9.11 Children need to have immediate access to their medicines when required. The school will make special access arrangements for emergency medicines that it keeps. However, it is also important to make sure that medicines are kept securely and only accessible to those for whom they are prescribed.

10. DISPOSAL OF MEDICINES

- 10.1 Staff should not dispose of medicines. Parents/carers are responsible for ensuring that date-expired medicines are returned to a pharmacy for safe disposal. Return of such medicines to parents should be documented.
- 10.2 Parents/carers should also collect medicines held at the end of each term. If parents/carers do not collect all medicines, they will be taken to a local pharmacy for safe disposal. This process should be documented.
- 10.3 Sharps boxes will always be used for the disposal of needles. Collection and disposal of the boxes will be arranged with the Local Authority.

11. HYGIENE AND INFECTION CONTROL

- 11.1 All staff should be familiar with normal precautions for avoiding infection and follow basic hygiene procedures.
- 11.2 Staff will have access to protective disposable gloves, a supply of these are kept in the staff room and are in the first aid boxes, and will take care when dealing with spillages of blood or other body fluids. Soiled dressings and equipment should be disposed of safely by using a sealed plastic bag. Supplies of these are in each first aid box.

L Stevenson
Oct 2014

APPENDIX: 5

Copies enclosed of:-

- **Form 2:** Health Care Plan
- **Form 3A:** Parental agreement for school to administer medicine (short-term)
- **Form 3B:** Parental agreement for school to administer medicine (long-term)
- **Form 4:** Headteacher agreement to administer medicine
- **Form 5:** Record of medicine administered to an individual child

- **Form 6:** Record of medicines administered to all children
- **Form 7:** Request for child to carry his/her own medicine
- **Form 8:** Staff training record – administration of medicines.

FORM 2 - Health Care Plan (this should be regularly reviewed)

Name of school/setting	
Child's name	
Group/class/form	
Date of birth	/ /
Child's address	
Medical diagnosis or condition	
Date	/ /
Review date	/ /

Family Contact Information

Name	
Phone no. (work)	
(home)	
(mobile)	
Name	
Phone no. (work)	
(home)	
(mobile)	

Clinic/Hospital Contact

Name	
Phone no.	

G.P.

Name	
------	--

Phone no.

Describe medical needs and give details of child's symptoms

Daily care requirements (*e.g. before sport/at lunchtime*)

Describe what constitutes an emergency for the child, and the action to take if this occurs

Follow up care

Who is responsible in an emergency (*state if different for off-site activities*)

Form copied to

FORM 3A - Parental agreement for school to administer medicine (short-term)

The school will not give your child medicine unless you complete and sign this form, and the school has a policy that the staff can administer medicine. You are also agreeing to other appropriate employees of the Local Authority (such as Home-School transport staff) to administer medicine if authorised to do so by the school/setting.

Name of school/setting	
Name of child	
Date of birth	/ /
Group/class/form	
Medical condition or illness	

Medicine

Name/type of medicine <i>(as described on the container)</i>	
Date dispensed	/ /
Expiry date	/ /
Agreed review date to be initiated by	[name of member of staff]
Dosage and method	
Timing	
Special precautions	
Are there any side effects that the school/setting needs to know about?	
Self administration	Yes/No
Procedures to take in an emergency	

Contact Details

Name	
Daytime telephone no.	
Relationship to child	
Address	
I understand that I must deliver the medicine personally to	[agreed member of staff]

I accept that this is a service that the school/setting is not obliged to undertake.

I understand that I must notify the school/setting of any changes in writing.

I understand that a non-medical professional will administer my child's medication, as defined by the prescribing professional only.

Date Signature(s)

FORM 3B - Parental agreement for school/setting to administer medicine (long-term)

The school will not give your child medicine unless you complete and sign this form, and the school has a policy that the staff can administer medicine. You are also agreeing to other appropriate employees of the Local Authority (such as Home-School transport staff) to administer medicine if authorised to do so by the school/setting.

Name of school/setting	
Date	/ /
Child's name	
Group/class/form	
Name and strength of medicine	
Expiry date	/ /
How much to give (<i>i.e. dose to be given</i>)	
When to be given	
Any other instructions	
Number of tablets/quantity to be given to school/setting	

Note: Medicines must be in the original container as dispensed by the pharmacy

Daytime phone no. of parent/carer or adult contact	
Name and phone no. of GP	
Agreed review date to be initiated by	[name of member of staff]

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school/setting and other authorised staff administering medicine in accordance with the school/setting policy. I will inform the school/setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

I understand that a non-medical professional will administer my child's medication, as defined by the prescribing professional only

Parent/carer's signature _____

Print name _____

Date _____

If more than one medicine is to be given a separate form should be completed for each

FORM 4 - Head teacher agreement to administer medicine

Name of school/setting

It is agreed that [name of child] will receive [quantity and name of medicine] every day at [time medicine to be administered e.g. lunchtime or afternoon break].

[Name of child] will be given/supervised whilst he/she takes their medication by [name of member of staff].

This arrangement will continue until [either end date of course of medicine or until instructed by parent/carers].

Date _____

Signed _____

(The Head teacher/named member of staff)

FORM 5 - Record of medicine administered to an individual child

Name of school/setting	
Name of child	
Date medicine provided by parent/carer	/ /
Group/class/form	
Quantity received	
Name and strength of medicine	
Expiry date	/ /
Quantity returned	
Dose and frequency of medicine	

Staff signature _____

Signature of parent/carer _____

Date	/ /	/ /	/ /
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date	/ /	/ /	/ /
Time given			
Dose given			
Name of member of staff			
Staff initials			

FORM 6 - Record of medicines administered to all children

Name of school/setting

Date Any reactions	Child's name Signature	Time Print name	Name of medicine	Dose given
/ /				
/ /				
/ /				
/ /				
/ /				
/ /				
/ /				
/ /				
/ /				
/ /				
/ /				
/ /				
/ /				
/ /				
/ /				
/ /				

FORM 7 - Request for child to carry own medicine

This form must be completed by parent/carers/guardian

This form must be completed by parent/carers/guardian

If staff have any concerns discuss this request with healthcare professionals

Name of school/setting	
Child's name	
Group/class/form	
Address	
Name of medicine	
Procedures to be taken in an Emergency	

Contact Information

Name	
Daytime phone no.	
Relationship to child	

I would like my son/daughter to keep his/her medicine on him/her for use as necessary.

Signed _____

Date _____

If more than one medicine is to be given a separate form should be completed for each one.

FORM 8

Staff training record – administration of medicines

Name of school/setting	
Name	
Type of training received	
Date of training completed	/ /
Training provided by	
Profession and title	

I confirm that [name of member of staff] has received the training detailed above and is competent to carry out any necessary treatment. I recommend that the training is updated [please state how often].

Trainer's signature _____

Date _____

I confirm that I have received the training detailed above.

Staff signature _____

Date _____

Suggested review date

Whiteways Primary School

Health & Safety Policy Guidelines
Educational Visits

Rationale

Safely managed educational visits, with a clear purpose, are an indispensable part of a broad and balanced curriculum and a vibrant part of Whiteways as a successful school. They represent an opportunity to extend pupils' learning and enrich their appreciation and understanding of themselves, others and the wider world. They can be the catalyst for improved academic performance, a life-long interest or, in some cases, professional development.

As such, it is the policy of the school to promote and enable the use of visits at all ages and to all children, regardless of gender, religion or (dis)ability.

Purpose

1. To ensure that every child has the opportunity to benefit from educational visits.
2. To ensure that all visits are safe, purposeful and appropriate to meet the educational needs of pupils taking part.
3. To enable the school to identify appropriate functions, responsibilities, training, support and monitoring for all Governors, staff, helpers, pupils, the Headteacher and any additional providers involved in educational visits.
4. To comply with, and react promptly to alterations the LA's guidelines as laid out in the current practices and procedures, ensuring that the 'EVOLVE' system of educational visit management is utilised for every excursion out of the school grounds.
5. Through adherence to the guidance of the LA, to meet DfE guidelines.
6. To ensure, where appropriate, that further advice is sought from the LA and other technically competent personnel where deemed necessary.

Broad Guidelines

- PLAN – choosing the most appropriate venue, mode of transport, risk assessments, support, approval, first aid, etc. The pre-trip check list should be completed prior to seeking approval from the Headteacher.
- DO – working to your plan and known hazards / contingencies from leaving the school premises to getting every participant back, safely.
- REVIEW – reflect on the trip, both positives and areas for improvement. This should include 'near misses', to allow thorough preparation for next time and the possible avoidance of future problems.
- RECORD – anything pertinent should be written and passed to the Educational Visits Coordinator (EVC) and/or the Headteacher.

Approval

- Where possible, all visits are planned and approved well in advance, with evidence of risk assessments and logistical arrangements.

- Governors and the LA will delegate the approval of 'low risk' and 'routine' visits to the Headteacher.
- In the case of 'higher risk' visits, such as residential trips or where 'adventurous' activities will be taking place, the Headteacher will submit details to the Governors for approval, prior to submission to the LA.
- Where any doubt exists, the LA will be contacted for information and guidance.
- The Headteacher retains the final decision on the go-ahead of any trip or visit, and the inclusion of children, therein.

Risk Assessments

- The LA's on-line recording system expects staff to have completed the pre-trip check list, which covers most generic areas of risk.
- Where these do not exist, or do not cover every aspect of the trip, then the LA should be contacted through the EVC or Headteacher.
- The EVC or Headteacher must be satisfied that consideration has been given risk assessment prior to the approval of a trip.

Roles & Responsibilities

- A named EVC will act as a resource for the preparation and monitoring of visits.
- The EVC will offer guidance to the Group Leader of any visit during the preparation and planning stage.
- The EVC will approve the group leadership, planning checklist, risk assessment, management and evaluation of all visits.
- A suitably qualified Group Leader will be identified on all visits.
- The Group Leader will ensure that sufficient staff and helpers, of suitable experience, are checked (DBS) and briefed throughout the visit.
- It is the Group Leader's responsibility to ensure that risk assessments, generic or site specific, have taken been undertaken and recorded.
- The Group leader will ensure that 'Best Value' principals are used when selecting providers and that, where necessary, appropriate licences and insurances are held, before confirming any visit.
- Group Leaders will ensure that a named person, emergency procedures and systems for recording and sharing information on accidents (and 'near misses'), are in place, before briefing parents and children.
- Group Leaders will, where possible, undertake exploratory visits, or seek references from other schools, prior to using new venues, transport firms, etc.
- While on the visit, where any doubt exists about the safety of an activity, or the safety and security of the children, it is the responsibility of the teacher in charge of that group of children to stop the activity as quickly and safely as possible and report the situation to the Group Leader at the earliest opportunity.

Always remember that it is better to have safe, disappointed children, than putting them at risk.

Parents

- The School Prospectus gives details to parents, regarding educational visits.
- Consent will be sought from parents, at the start of each academic year, with regard to the participation of their child(ren) in 'low risk', local activities.
- In the case of visits which are of a 'higher' risk, or involve the use of transport and the request of a voluntary financial contribution a specific consent form will be issued.
- In the case of residential visits, a parental meeting will be convened.

The school will endeavour to gain the consent for every child who is due to participate, but where this is not achieved, the child will not be allowed leave the school premises.

Pupils

- Pupils will be briefed about the aims, expectations and codes of conduct for all visits. On-going briefings are an important part of learning and safety.
- Where possible pupils will be involved in the preparation for the visit, eg developing codes of conduct, assessing/managing risk and evaluating their own performance and development.

Review

This policy will be reviewed at the same time as the school's Health & Safety Policy, or earlier in the event of an incident, or evidence of issues raised by 'near misses'.

Date approved by staff

Date approved by Governors

Signed by Chair of Governors

Expected renewal date