



First Aid, Medical and Intimate Care Policy

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| SCOPE: | Academy Policy |
| AUTHOR/ORIGINATOR: | Bayside Academy |
| NAME OF RESPONSIBLE DIRECTOR/PRINCIPAL: | Matt Vernon, Principal Alex Prout, Sector Director |
| APPROVING COMMITTEE: | Sector Director |
| STATUTORY BASIS: | Statutory Policy |
| REQUIREMENT TO PUBLISH ON WEBSITE: | Yes |
| DATE RATIFIED: | February 2024 |
| DATE DISTRIBUTED TO STAFF: | February 2024 |

Outstanding Achievement for All

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1. Introduction

This policy outlines Bayside Academy's responsibility to provide adequate and appropriate first-aid to pupils, staff, parents and visitors and the procedures in place to meet that responsibility. This policy applies to all young people in the Academy.

2. Aims

To identify the first-aid needs in line with the Management of Health and Safety at Work Regulations 1992 and 1999.

To ensure that first aid provision is available at all times while pupils and staff are on academy premises, and also off the academy premises whilst on academy visits.

We aim to ensure that our policy is in line with the DFE Guidance on First Aid for Schools – <https://www.gov.uk/government/publications/first-aid-in-schools/first-aid-in-schools-early-years-and-further-education>

3. Objectives

To appoint the appropriate number of suitably trained people as Appointed Persons and First Aiders to meet the needs of the Academy.

To provide relevant training and ensure monitoring of the training needs.

To provide sufficient and appropriate resources and facilities.

To make the Academy's first-aid arrangements available for staff and parents on request.

To keep accident records and to report to the HSE as required under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995.

All relevant staff will be made aware of the pupil's condition where medical needs require additional measures to be taken.

Risk assessments for school visits, holidays and other school activities outside of the normal timetable will be completed prior to the event.

Healthcare plans to be kept and updated to reflect specific needs of individual pupils.

Parents/Carers are requested to inform the Academy should any aspects of the pupils Healthcare plan change. Whilst the Academy wishes to support your child effectively, there may be occasions The Academy are unable to do this; however, consultations with Parents/Carers and/or any relevant agencies will be available.

4. Provision

The Academy is a low-risk environment, but will consider the needs of all staff and pupils at all times, within different places in the Academy and during different activities in deciding on the appropriate provision. Consideration will be made during all school activities, including:

Off-site trips

Off-site Physical Educational

School trips

Design and Technology, Food Technology and Art rooms

Out-of-hours provision, for example clubs/events

Arrangements will be made to ensure that the required level of cover of both first aiders and appointed persons is available at all times when people are on academy premises.

5. First Aiders

The recommended number of certified first-aiders is one per 100 young people/staff. There are first-aiders based in each year group as well as PE staff (including external sports coaches).

3 members of staff are qualified as Paediatric First Aiders, one of whom is based permanently within the EYFS base. A Paediatric First Aider is always on site at all times of the school day when pupils from EYFS are on site, including for wrap around care (Breakfast Club and After School Club).

6. Qualifications & Training

First aiders hold a valid certificate of competence, issued by an approved organisation. These are either 3 year 'First Aid at Work' qualifications, or 1 day 'Emergency First Aid' qualifications. First aiders undertake appropriate refresher training.

The academy also has 3 members of staff trained as Paediatric First Aiders, with each member of staff being based within the Lower School.

Specific training is provided based on medical needs to those who are supporting any children with specific medical conditions. For example, to support pupils who have severe allergies and carry an epipen, all first aiders are trained in the administration of epipens meaning that a trained member of staff is always available to administer this medication.

7. First Aid Materials, Equipment and Facilities

The lead person must ensure that the appropriate amount of first-aid containers according to the risk assessment of the site is available. All first aid containers must be marked with a white cross on a green background and are generally kept near to hand-washing facilities. If a first aid box is running low on stock the first aiders, who use this box, will inform the Lead First Aider as soon as possible so it can be re-stocked. Responsibility for checking and re-stocking the first-aid containers is that of the Lead First Aider.

The school mini-buses must carry a first-aid container and these first aid containers must accompany teachers off-site with pupils. Spare stock is kept by the Lead First Aider.

First aid kits are found at the following locations:

- EYFS
- Staffroom
- First Aid Room
- Cookery Room
- Kitchen

8. Identification and Treatment of pupils with particular medical conditions

Pupils with long-term medical needs

Pupils with medical needs entering the Academy from local primary schools will usually be identified through discussions with the Reception teacher through the Academy transition processes. Such information will be checked with the parent by the Inclusion team, to ensure appropriate records are kept and appropriate provision can be made.

Parents are requested to approach the Academy with any information that they feel the Academy will need to care for individual pupils. The parent will be required to complete a Medical Statement form to identify any medical needs. This may require endorsement from the pupil's General Practitioner. Where appropriate, a written health care plan will be devised, involving parents and relevant healthcare professionals.

Parents are responsible for informing the Academy of medical issues that arise during the pupil's time in the Academy. The Academy would like to have any relevant healthcare information if possible, before the start of any term or at the earliest time possible; this will ensure a smooth transition into the Academy.

The Academy requires the following healthcare information:

- The medical condition, its triggers, signs, symptoms, treatments including medication (dose, side-effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues e.g. crowded corridors and travel time between lessons.
- Specific support for the pupil's educational, social and emotional needs – for example, how absences will be managed, requirements for extra time to complete tests, use of rest periods or additional support in catching up with lessons and counselling sessions.
- The level of support needed, (some pupils will be able to take responsibility for their own health needs), including in emergencies. If a pupil is self-managing their medication, this should be clearly stated with appropriate arrangements for monitoring.
- Written permission from parents for medication to be administered by a member of staff, or self-administered by the pupil during school hours. This will be supported by medical information from a healthcare professional qualified to prescribe the medication.
- What to do in an emergency, including whom to contact, and contingency arrangements.

9. Medicines in the Academy

Any medication brought into the Academy at any time must be accompanied by a complete medical declaration for the administering of medication form (see appendix 2) which has been fully completed by the pupil's parent or legal guardian. These declarations are kept in a file in the main office as well as within the school's First Aid room to enable administration. The pupil's class teacher, Phase Leader, office staff and other staff working with the child (for example a class teaching assistant) will then be informed of the medication and its administration. A copy of medical declaration for the administering of medication form (see appendix 2) will be made available to the staff, if applicable. All information regarding medication will be dealt with in the strictest confidence.

No pupils will be given medicine without parental / guardian's consent. The only medication we can administer in school is medication prescribed by a doctor, hospital or pharmacy and should have the corresponding label included. All other medicine must be administered by the parent/carer or nominated person who will need to come in to school to administer to the pupil. Ideally, this should be during break or lunchtime so as not to disrupt learning. In the event of any special form of administration of medication being required, the parent

must contact the Academy so that arrangements can be made for this to occur. In terms of antibiotics that need to be taken three times a day; consideration should be given that these can all be taken at home.

However, in exceptional cases, the Academy can administer the case of Paracetamol or Ibuprofen to individual pupils with direct, written permission from the child's parent / guardian. Decisions as to whether or not to administer Paracetamol or Ibuprofen must be made by the Academy Principal or Vice Principal only.

Only first aid trained staff are permitted to administer medicines. When administering medicines staff should check the pupil's name, prescribed dose, expiry date and any further instructions. Each dosage / treatment is recorded on the reverse of the administering of medication form with a date and time. If in any doubt, staff will not administer the medicines, will contact parents / carers and will record this on the form. If staff have any concerns, they will raise them with the Principal or Vice Principal who in turn will bring them to the attention of the parent and/or health professional attached to the school.

If a pupil refuses their medicine staff will not force them, but will inform parents immediately, and note this in the records. Parents may be requested to attend the Academy to give the medicine. If refusal to take the medicine results in an emergency the Academy will put emergency procedures into practice.

The trained first aider will liaise regularly with the SEN Lead to discuss any short/long term medical needs of children, and to assess any training needs which may be

required. The First Aider will cascade this information to appropriate staff.

Storage of medicines

All medication is stored in a locked cupboard within the First Aid Room with the exception of antibiotics which are stored in the fridge within the school office (where children are not permitted and there is a constant staff presence).

For young people with asthma, inhalers/spare inhalers are kept in classrooms within staff cupboards. Inhalers will be sent home to be cleaned (responsibility of the parent) when appropriate.

Pupils who require an EpiPen due to the risk of anaphylactic reaction will also have their EpiPen kept in the classroom within staff cupboards.

EpiPen's and inhalers will be carried by a nominated first aider during every school trip / visit.

10. Accident records

Statutory accident records: The Principal or designated lead must ensure that readily accessible accident records, written or electronic, are kept for a minimum of three years.

The designated person must ensure that a record is kept of any first aid treatment given by first-aiders or appointed persons. This should include:

The date, time and place of accident / incident.

The name, year and school of the injured or ill person.

Details of their injury/illness and what first aid was given.

What happened to the person immediately afterwards.

Name and signature of the first aider or person dealing with the incident.

The designated person must have in place procedures for ensuring that parents are informed of significant incidents.

Monitoring

Accident records can be used to help the Principal, Site Lead and Inclusion Lead identify trends and areas for improvement. They also could help to identify training or other needs and may be useful for insurance or investigative purposes.

The Principal / designated person should establish a regular review and analysis of accident records.

11. Medical records

Any sick young people will be seen in the first instance by a first aider in the medical room for assessment. The Lead first aider is available to support should a first aider require support. If they feel it is necessary to send a pupil home, the parent or primary carer will be contacted and the pupil collected by a responsible person. In ALL instances where a physical injury has occurred, an incident form will be filled in and put into the pupil's file (see appendix 1).

Written permission will be obtained for each and every medicine to be given to our young people. Parents/carers will be informed of every incident/accident where any first aid has been applied, either via a phone call or a slip given to the young person to take home (appendix 1). A copy of the incident form will also be taken and saved within a file in the First Aid Room.

12. Illness in the academy

If a pupil becomes ill in a lesson and the teacher feels that medical treatment is required, the pupil should be sent to medical room or main office, accompanied by an adult or another pupil.

The Academy has a strict policy that no medication will be given orally or externally unless written permission has been given by the parent. Parents will be contacted depending upon the nature of the medical problem.

If the teacher feels that the pupil is too ill or injured to be moved, then a designated First Aid member of staff should be called via the main office to attend immediately. First aid should be administered, as appropriate. If it is thought that follow-up treatment is required, the parent will be contacted or a letter sent home with the pupil. In all instances of general first aid a pupil takes home an incident form outlining the first aid that has taken place so that parents/carers are informed and aware.

In more serious cases, where hospital attention is deemed necessary, the Academy will contact parents, who will be expected to take their child to hospital.

In an emergency, an ambulance must be called and the parent contacted by the Academy. In the absence of a parent, a member of staff must accompany the pupil to the hospital and remain there until the parent arrives.

If a parent cannot be contacted, the Academy will act in loco parentis and give permission for any emergency treatment.

13. Hygiene/Infection Control

Basic hygiene procedures must be followed by staff. Single-use disposable gloves must be worn when treatment involves blood or other body fluids. Care should be taken when disposing of dressings or equipment. ALL items with body fluids on them (for example gloves, aprons, wipes, tissues, etc.) are to be disposed of in the large yellow bin in the medical room. These are never to be placed in other waste bins.

In relation to hygiene procedures for spillage of body fluids, every first-aid box has a bio-hazard pack for the disposal of body fluids.

14. Risk Assessment

A risk assessment (see appendix 3) is completed when a pupil arrives in school with a broken limb that is in a plaster/sling, or the pupil is using crutches. Strategies are put in place to ensure appropriate levels of physical activity are undertaken in line with medical advice and risk assessments. Staff are made aware of these planned controls and the action plan. The pupil is also informed of what to do and where to go in the event of the fire alarm being activated.

15. Off-premises visits

The Academy believes that all pupils are entitled to participate fully in activities associated with the Academy and will attempt at all times to accommodate pupils with medical needs. However, consideration must be given to the level of responsibility that staff can be expected to accept.

A risk assessment will be completed prior to any event to mitigate for any potential medical and health and safety issues that could occur on the visit.

Policy on specific medical issues

The Academy welcomes all pupils and encourages them to participate fully in all activities.

The Academy will advise staff on the practical aspects of management of:

- i Asthma attacks
- ii Diabetes
- iii Epilepsy
- iv An Anaphylactic Reaction
- v Any additional healthcare information will be shared if the Academy feel appropriate.

The Academy will keep a record of pupils who may require such treatment.

The Academy expects all parents, whose children may require such treatment, to ensure that appropriate medication has been logged with the Academy together with clear guidance on the usage of the medication. The failure to follow procedures or have the correct signed forms may result in the child being unable to receive the required medication.

16. Reporting Accidents

Statutory requirements: under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR), some extreme accidents must be reported to the HSE. The Health and Safety Officer must keep a record of any reportable injury, disease or dangerous occurrence. This must include: the date and method of reporting; the date, time and place of the event; personal details of those involved and a brief description of the nature of the event or disease. This record can be combined with other accident records. If deemed necessary by the first aider, parents will be informed of an accident either by telephone or via an incident slip sent home with the pupil.

The following accidents must be reported to the HSE:

Involving employees or self-employed people working on the premises:

- Accidents resulting in death or major injury (including as a result of physical violence).

For definitions, see HSC/E guidance on RIDDOR 1995, and information on reporting school accidents.

Accidents involving pupils and visitors:

- Accidents resulting in the person being killed, or being taken from the site of the accident to hospital and the accident arises out of or in connection with work. i.e. if it relates to
 - any academy activity, both on or off the premises
 - the way the academy activity has been organised and managed
 - equipment, machinery or substances
 - the design or condition of the premises

HSE must be notified of fatal and major injuries and dangerous occurrences without delay via their online form. The Principal is responsible for ensuring this happens. The Principal or designated person must complete the RIDDOR form online.

17. Re-assessment of first aid provision

As part of the School's monitoring and evaluation procedures:

- The Academy shall review the first aid needs following any changes to staff, building/site, activities, off-site facilities, etc.
- The Admin Lead monitors the number of trained first aiders, alerts them to the need for refresher courses and organizes their training sessions.
- The Lead First Aider checks the contents of the first-aid boxes monthly and re-stocks as appropriate for that department.

18. Intimate Care

Principles

Bayside Academy is committed to ensuring that all staff responsible for the intimate care of pupils will undertake their duties in a professional manner at all times. It is acknowledged that these adults are in a position of great trust.

All pupils at Bayside Academy have the right to be safe and be treated with dignity, respect and privacy at all times so as to enable them to access all aspects of the school.

This policy sets out clear principles and guidelines on supporting intimate care with specific reference to toileting. It should be considered in line with our Safeguarding Policy, Health and Safety Policies and Supporting Pupils with Medical Conditions policy.

This policy supports the safeguarding and welfare requirements of the Disability Discrimination Act 2005: Bayside Academy will ensure that:

- No pupil's physical, mental or sensory impairment will have an adverse effect on their ability to take part in day to day activities.
- No pupil who is delayed in achieving continence will be refused admission.
- No pupil with a named condition that affects personal development will be discriminated against.
- No pupil will be sent home or have to wait for their parents/carer due to incontinence.
- Adjustments will be made for any pupil who has delayed incontinence.

Definition

Intimate care can be defined as an activity which meets the personal care needs of a pupil. Intimate personal care includes hands-on physical care in personal hygiene, and physical presence or observation during such activities. Intimate personal care tasks can include:

- Body bathing other than to arms, face and legs below the knee.
- Toileting, wiping and care in the genital and anal areas.
- Dressing and undressing.
- Application of medical treatment, other than to arms, face and legs below the knee
- Supporting with the changing of sanitary protection

19. Toileting and Intimate Care Policy

Intimate Care Tasks

This refers to any tasks that involve the dressing and undressing, washing including intimate parts, helping someone use the toilet, changing pads / nappies or carrying out a procedure that requires direct or indirect contact to an intimate personal area.

The pupil's identified significant member of staff at Bayside Academy works in partnership with parents/carers to provide care appropriate to the needs of the individual pupil and together will produce a care plan. The care plan will set out:

- What care is required

Number of staff needed to carry out the task (if more than one person is required, reason will be documented)

- Communication

Pupil's preferred means of communication (e.g. visual, verbal). Agree terminology for parts of the body and bodily functions

- Levels and details of support required

Pupil's level of ability i.e. what tasks they are able to do by themselves

- Acknowledgement and respect for any cultural or religious sensitivities related to aspects of intimate care
- Specific equipment / resources

Parents/Carers are asked to supply any specific items in relation to the intimate care required, for example: spare pad / nappies; wipes, creams, etc.; spare clothes and spare underwear

All intimate care plans are regularly monitored and reviewed in accordance with the pupil's development.

Best Practice

When intimate care is given, the member of staff explains fully each task that is carried out and the reason for it. Staff encourage pupils to do as much independently as they can, lots of praise and encouragement will be given to the pupil when they achieve this.

All staff in the Academy must follow the procedures and advice outlined when carrying out intimate care of pupils.

All staff ensure that they are aware of the Safeguarding Policy and Procedures in place within the Academy. If concerned about a pupil's actions or comments whilst carrying out intimate care, this should be discussed with a Designated Safeguarding Lead from the academy.

Use the nature of the incident / care required, and knowledge of the pupil to make a judgement on how many adults should be involved in intimate care. In some cases it may be advisable to have two adults in attendance, particularly depending on the gender of the pupil. This could also be in cases where the pupil is vulnerable or where knowledge of the pupil or family indicates there could be difficulties / allegations made. Where one adult is supporting with intimate care, this should be in an area that can be accessed by another adult for safeguarding reasons.

If possible a pupil should be assisted / supervised in a disabled toilet to allow for privacy / supervision.

Pupils should always be encouraged to carry out intimate care as independently as possible.

The dignity of the pupil will always be considered and they will be involved in decision making in relation to how they would like to be assisted, for example through specific questioning such as:

- Would you like some help?
- Would you like me to help you?
- What would you like me to help you with?
- Would you like me to come with you and wait outside the door in case you need any help?

If the pupil requires assistance with intimate care regularly, a care plan should be in place which is agreed and signed by their parent. Two or three members of staff should be identified who will carry out this care.

When unplanned intimate care is required, a second member of staff (e.g. class teacher or teaching assistant) should be informed of what is happening and if necessary assist. The parent should be kept informed throughout via telephone.

All equipment needed for use during unplanned intimate care will be kept in the Medical room or within the staff cupboard in the EYFS base. This will contain gloves, wipes, bags for putting soiled clothing in and sanitary pads. If any of these items are used or are at risk of expiration it is the responsibility of the Lead First Aider to replenish these resources. Spare underwear and clothing will also be kept in the Medical room. The supplies in the medical room will be monitored and replenished as needed by the Lead First Aider.

All bodily fluids or bodily waste is placed within the yellow bins within the medical room or disabled toilet outside of the Year 1 classroom.

If it is suspected that the pupil has soiled themselves and it is denied by the pupil, the matter should be referred to the parent for advice. They should either come into the Academy to assist the pupil or take them home and return them to school once the pupil has been able to change.

If a pupil has been assisted with intimate care which is not planned, a parent must be contacted as soon as possible to inform them of what has happened and how the pupil was assisted. This should be recorded on MyConcern by each member of staff carrying out the care.

Routine intimate care will be outlined and evidenced in the care plan.

Confidentiality should be maintained at all times between pupil, the Academy and parent/ carer.

20. Safeguarding

Staff are trained on the signs and symptoms of pupil abuse in line with Dorset Safeguarding Pupil's Board guidelines and are aware of the DFES booklet 'What to do if you think a pupil is being abused' and will follow the guidance given. If a member of staff is concerned about any physical or emotional changes, such as marks, bruises, soreness, distress etc. they will inform the Academy's Designated Safeguarding Lead immediately. The Safeguarding Policy will then be implemented.

Should a pupil become unhappy about being cared for by a particular member of staff, the Academy's Designated Safeguarding Lead will look into the situation and record any findings. These will be discussed with the pupil's parents/carers in order to resolve the problem. If necessary the Academy's Designated Safeguarding Lead will seek advice from other agencies, including the Local Authority Designated Officer. Parental permission will be obtained in order to discuss a child with any agency. If a pupil makes an allegation against a member of staff, the procedure set out in the Safeguarding Policy will be followed.

21. Dealing with body fluids

Urine, faeces, blood and vomit will be cleaned up immediately and disposed of safely by use of our Medical waste bin in the medical room and disposed of by PHS Clinical Waste Company. When dealing with body fluids, site staff wear protective clothing (disposal plastic gloves and aprons) wash themselves thoroughly afterward. Soiled pupil's clothing will be bagged to go home or placed in our medical waste bin in the medical room and disposed of by PHS Clinical Waste Company – staff will not rinse it. Pupils will be kept away from the affected area until the incident has been completely dealt with.

All staff maintain high standards of personal hygiene, and will take all practicable steps to prevent and control the spread of infection.

This policy aims to manage risks associated with toileting and intimate care needs and ensures that employees do not work outside the remit of their responsibilities set out in this policy.

22. Policy Review

This policy will be reviewed by the Academy Leadership team as part of the Academy annual review process.

This policy will be actively promoted and implemented throughout the Academy.

23. Appendix 1 – Incident form (double sided)

INCIDENT FORM

Dear Parent/Carer of Class:

Date:/...../.....

Your child was seen by a first aider in school today.

! IMPORTANT !

If the injury involves your child's head and there seems to be no symptoms of concussion, you should monitor and observe your child for any possible delayed reaction for the next 24 hours. You must seek medical advice if any of the following symptoms appear:

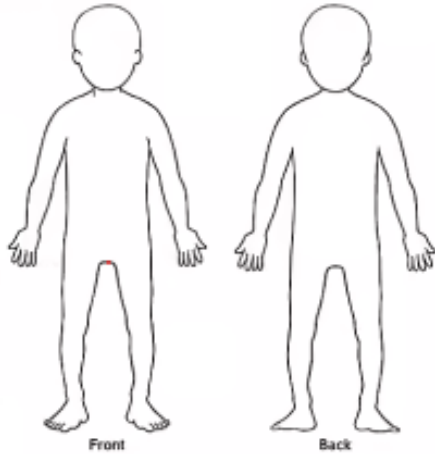
| | | |
|------------------|----------------|---------------------------------|
| Blurred Vision | Drowsiness | Nausea or vomiting |
| Severe headache | Confusion | Bleeding from ears / nose |
| Unresponsiveness | Slurred speech | Clumsy, staggering or dizziness |

Dear Parent/Carer of

Class:

Date:/...../.....

Your Child has sustained an injury to his/her:



| Head | Face | Arm |
|-------|----------|-------|
| Right | Forehead | Right |
| Left | Lip/Chin | Left |
| Back | Eye Area | Upper |
| Front | | Lower |

| Body | Leg | Foot |
|-------|-------|-------|
| Right | Right | Right |
| Left | Left | Left |
| Upper | Upper | |
| Lower | Lower | |

This Happened during:

| | | | | |
|---------------|-----------|-----------------|----|-------|
| Morning Break | Lunchtime | Afternoon Break | PE | Class |
|---------------|-----------|-----------------|----|-------|

Breakfast Club

Afterschool Club

Any other details:

We have treated your child's injury BUT should you become concerned about their condition, please seek medical advice.

Yours faithfully

..... (FIRST AIDER)

24. Appendix 2 – Medical declaration for the administering of medication

To: Principal

My child has been diagnosed as suffering from

They considered fit for school but requires the following prescription medication to be administered during school hours.

DETAILS OF PUPIL

Surname

Forname(s)

D.O.B. Class

MEDICATION

Name/Type of Medication (as described on container)

Date dispensed Expiry date

For how long will your child take this medication?

FULL DIRECTIONS FOR USE

Dosage and method

Timing (eg lunch time)

Special precautions (if any)

Side Effects (if any)

Self Administration

Procedures to take in an Emergency

CONTACT DETAILS

Name Relationship to Pupil

Daytime Tel No

Address

I understand that I must deliver the medicine personally to the school office and accept that this is a service that the school is not obliged to undertake.

Date Signature(s)

25. Appendix 3 – Example Risk Assessment Form

| Location | Assessor | Date Completed |
|-----------------|------------------------------------|----------------|
| Bayside Academy | | |
| Name & Class | Injury/hazard/risk (if applicable) | |
| | | |

| Hazard <i>(What have you identified?)</i> | Risk <i>(What could happen? Who can be affected?)</i> | Description | Control Measures | Risk L/M/H | Further Actions |
|----------------------------------------------|-----------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-----------------|
| Moving around the building/ classroom | Further injuries by being knocked by other pupils Tripping over furniture- chairs etc. | Extra vigilance in maintaining that furniture and objects remain in the same place. | Children made aware of the injury. Adults in the classroom/ area to ensure that all furniture/ equipment is kept in correct place. [NAME] will need adult supervision whilst moving around the school during busy periods including corridors and school hall and should be at the front or back of the line with a member of staff. | L | |
| Using the stairs | Tripping up the stairs Falling down the stairs Not being able to hold onto the railings | There are stairs leading to Year 3 & 4 and some steps leading to the hall. There are some steps leading to KS1 including the toilet at lunchtime. | Avoid stairs at busy times and go up and down with an adult. For the hall, if ever unsure, use the outside entrance. | L | |

| Hazard <i>(What have you identified?)</i> | Risk <i>(What could happen? Who can be affected?)</i> | Description | Control Measures | Risk L/M/H | Further Actions |
|-----------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|------------------------|
| Break times on playground | Further injuries by being knocked by other pupils. Tripping over equipment. Slipping on the wet/icy playground. | This applies to both KS1 and KS2 playground, the MUGA and the field. | [NAME] is able to go outside at break and lunch. There should be no running around or participating in sports/high activity games. | L | |
| P.E / exercise / After School Clubs | Further injuries by physical activity/being knocked by another child or adult, tripping over equipment/overexerting self. | Bayside has a number of sport related clubs after school as well as P.E. We also take the children off-site swimming and children may partake in exercise related activities within the classroom. | [NAME] is not to take part in P.E. at all until injury has healed. This applies to any sport related clubs and exercise on or off-site that are organised by Bayside Academy. | L | |
| Toilet use | Slipping on the floor | There are a number of child allocated toilets around the school but generally [NAME] would use [location} | [NAME] to ensure that he/she tells an adult when he/she is using the toilet. | L | |

Additional Measures:

E.g. School Trips

KEY:

| LOW | MEDIUM | HIGH |
|-----------------|----------------------------|-----------------------------------------------------------------------|
| Acceptable risk | Further Controls necessary | Unacceptable Risk, the task requires further assessments and changes. |

Assessor Signature Date

SLT Signature Date

Parent/Carer Signature Date

Comments (if any)

26. References

Supporting Pupils with Medical Needs: a good practice guide. Department for Education, (2014)

[Supporting pupils at school with medical conditions \(publishing.service.gov.uk\)](https://publishing.service.gov.uk)

SEND code of practice: 0 to 25 years. Department for Education, (2014)

Related Documents

DfES unpriced documents can be ordered from DfES Publications. Tel: 0845 6022260. Email: dfes@prolog.uk.com. Please quote the publication reference when ordering.

Code of Practice for Schools – Disability Discrimination Act 1995: Part 4 (Disability Rights Commission, 2002). Ref: COPSH. <http://www.drc-gb.org/thelaw/practice.asp>
Order: Disability Rights Commission Tel: 08457 622 633.

Drugs: Guidance for Schools (DfE / ACPO, 2012) Ref - DFE-00001-2012
<http://www.teachernet.gov.uk/drugs/>

Guidance on First Aid for Schools: a good practice guide (DfES, 2022)
<https://www.gov.uk/government/publications/first-aid-in-schools/first-aid-in-schools-early-years-and-further-education>

Health and Safety: Responsibilities and Duties for Schools (2022)

<https://www.gov.uk/government/publications/health-and-safety-advice-for-schools/responsibilities-and-duties-for-schools>

Health and Safety on Education Visits (2018)

<https://www.gov.uk/government/publications/health-and-safety-on-educational-visits/health-and-safety-on-educational-visits>

Travel to school for children of compulsory school age (June 2023)

https://assets.publishing.service.gov.uk/media/649af81eb4d6ef000c038fbf/Travel_to_school_for_children_of_compulsory_school_age.pdf

School suspensions and permanent exclusions

<https://www.gov.uk/government/publications/school-exclusion>

Insurance – Information for schools

<https://buyingforschools.blog.gov.uk/2023/11/08/looking-to-review-your-schools-insurance-check-out-the-benefits-of-rpa-dfes-alternative-to-commercial-insurance/>

School Admissions Code (2021)

Ref: ISBN 978-1-5286-2575-3

<https://www.gov.uk/government/publications/school-admissions-code--2>

Special Educational Needs Code of Practice

<https://www.gov.uk/government/publications/send-code-of-practice-0-to-25>

Standards for School Premises

<https://www.gov.uk/government/publications/standards-for-school-premises>

Department of Health (including joint publications)

Health protection in children and young people settings, including education (managing cases of infectious diseases)

<https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities>

National Service Framework for Children, Young People and Maternity Services: Medicines for Children and Young People

<https://www.gov.uk/government/publications/national-service-framework-children-young-people-and-maternity-services>

Ofsted

Inspecting schools – Handbook for inspecting nursery and primary schools Ref: HMI 1359; *Inspecting schools – Handbook for inspecting secondary schools* Ref: HMI 1360; *Inspecting schools – Handbook for inspecting special schools and pupil referral units* Ref: HMI 1361. All Ofsted 2003. Priced documents. Order: The Stationery Office, tel: 0870 600 5522. Or view online at:

<https://www.gov.uk/government/publications/school-inspection-handbook-eif>