Health and Safety and Administering Medicines

INTRODUCTION

At St. Mary's Primary School the health and safety of all pupils and staff is paramount. The procedures adopted in this policy have been taken from CCMS Health and Safety Handbook available on line at http://www.ccmsschools.com Health and Safety, DENI and DHSSPS Publications – 'Supporting Pupils with Medication Needs" and Management of Anaphylaxis in Educational Establishments (Feb 2010).

AIM

The aim of the policy is to ensure that the school has in place formal guidelines that will allow staff and pupils to carry out their duties and tasks in an environment which will protect and provide for their health and safety.

OBJECTIVE

The Health and Safety Policy outlines the procedures that will be followed in relation to each of the areas below.

1. Accident Prevention
2. Accident Reporting
3. Administering Medication
4. Fire Precautions
5. First Aid
6. Educational Visits
7. Violence in Schools

This policy document also includes guidance on:

1. Glazing
2. Display Screen Equipment
3. COSHH
4. Emergency Planning

This guidance has been adopted as part of the overall Health and Safety Policy and will be followed when the situation arises.

1. ACCIDENT PREVENTION

In order to prevent accidents the school has in place the following:

- A health and safety committee – all staff.

The staff:

- Ensure routine checks of the school are made – Responsibility of Building Supervisor in the first instance.
- Encourage all of the school community to be involved in reporting dangers.
- All accidents will be reported as outlined in the next section.

2. ACCIDENT REPORTING

In order to assist in the reporting procedure we will ensure that all accidents/incidents of staff and pupils are reported to the appropriate authorities.

Categories of incidents to be reported

- Death or major injury
- Injuries resulting in an absence in excess of 3 days
- All other injuries
- Dangerous occurrences
- Occupational diseases

Procedures to be followed on receiving a report of an accident:

Incident resulting in:

Death or major injury – Pupils and Staff

- Report the incident immediately by telephone to the EA's Health and Safety Adviser and CCMS's Health and Safety Adviser, in the case of Catholic Maintained Schools (teaching staff only).
- Record all the relevant details on an accident report form (name, address, occupation, details of accident, etc.)
- Send the completed report form to the appropriate officer as indicated on the report form, within 24 hours of the accident date.
- Keep a copy of the completed form for record purposes.

More than 3-day injury (not a major injury) – Pupils and Staff

- Record all the relevant details on an accident report form (name, address, occupation, details of accident, etc.)
- Send the completed form to the appropriate officer as indicated on the report form within 72 hours of the accident date, with a copy to the CCMS Health and Safety Adviser (teaching staff only).
- Keep a copy of the completed form for record purposes.

Other injuries – Pupils and Staff

- Record all the relevant details on an accident report form (name, address, occupation, details of accident, etc.)

- Send the completed report form to the appropriate officer as indicated on the report form as soon as possible.
- Keep a copy of the completed form for record purposes.

Accidents - Staff

- Record all the relevant details on an accident report form (name, address, occupation, details of accident, etc.)
- Send the completed report form to the appropriate officer as indicated on the report form as soon as possible, with a copy to the CCMS Health and Safety Adviser (teaching staff only).
- Keep a copy of the completed form for record purposes.
- Accidents of pupils i.e. grazes, cuts etc are recorded in the pupil accident book.

Occupational disease

- Seek advice in the first instance from the Board's Health and Safety Adviser.

3. ADMINISTERING MEDICATION

From time to time it may be necessary for a child to receive medication. Where it is not possible or practical for a parent/guardian to come into the school, staff will supervise the child administering the medication. This will only be through agreement with the principal and when written consent on the proper pro forma has been received. The guidelines below will be followed at all times.

The Employer will ensure that all staff acting within the scope of the Pupil's Health Care Plan as well as within their terms and conditions of employment will be indemnified for all actions taken that are associated with the administration of medicines.

Short term medication

School staff **will not supervise the administration of medication** until written consent **(correct pro forma used)** from the parent and approval by the principal has been given.

Two members of staff will supervise the taking of the medication and notify the parent in writing on the day the medication is taken.

Long term medical needs

Some pupils may have medical conditions which will require regular administration of medication in order to maintain their access to education. These pupils are regarded as having medical needs.
Most children with medical needs are able to attend school regularly and with support from the school can take part in most normal school activities.

In some cases pupils with medical needs may be more at risk than their classmates. The school may need to take additional steps to safeguard the health and safety of such pupils.

Pupil's health care plan – Form AM1

When a parent requests medication to be administered to a pupil at school, the school will discuss the pupil's condition with the parent and implications of the pupil's medical condition with the appropriate staff and where necessary draw up a Health Care Plan.

A written request together with a statement of the pupil's condition and requirements must be made available to the school **(Form AM2 Request by Parent for School to Administer Medication**);

The school will then decide on the way in which the school will meet the pupil's requirements **(Form M1 School's Agreement to Administer Medication**);

The school will ensure appropriate training is available from medically qualified persons, i.e. Pupil's GP, Specialised Nurse, School Clinical Medical Officer.

The school will ensure that a sufficient number of staff are trained in order to cover absences **(Form AM6 Staff Training Record**);

Two members of staff are always present when administering medication in line with the school's normal child protection procedures and a record will be kept of all medicine administered. **(Form AM4)**

Emergency procedures

All staff will be made aware how to call the emergency services.

All staff will know who is responsible for carrying out emergency procedures in the event of need.

Guidance on calling an ambulance **(Form M2 Emergency Planning).**

Storage of Medication

The school will ensure that:

- The medicine container is labeled with the name of the pupil, dose and frequency of administration and any expiry date;
- Where a pupil requires two or more medicines, these should be kept in their original container and never transferred to another container;

- Medicines are kept in a secure cupboard in the office
- The staff and the pupil know where the medicines are stored and who holds the key;
- A record is kept of all medication administered (Form 6);
- It is the parent's duty to check the expiry date of EpiPens.

Inhalers

Some medicines, such as inhalers for asthma, must be readily available to pupils and will not be locked away. The inhaler will be kept in the child's school bag so that the child has easy access to it and also to ensure that they have the inhaler for their journey to and from school. It is the parent's responsibility to ensure that the inhaler is in the school bag. A spare inhaler should be sent to school in case the child forgets his/her inhaler. It is the parents' responsibility to check the expiry date of Inhalers.

Hygiene

All staff should be familiar with normal precautions for avoiding infection and must follow basic hygiene procedures. Staff should have access to protective disposable gloves and take care when dealing with spillages of blood or other body fluids and disposing of dressings or equipment.

Training

Staff will be trained when necessary to assist in administering medication.

School Trips

Sometimes the school may need to take additional safety measures for outside visits. Arrangements for taking any necessary medication will also need to be taken into consideration.

4.PUPILS WITH SPECIFIC MEDICAL CONDITIONS

Pupils should be as safe in school as in the home. It is therefore important that a range of training relevant to pupils with short term and long term medication needs is made available. For pupils with significant medication needs an individual programme of training will be devised, e.g. those pupils with an allergy. All training will be reviewed annually and will be child specific.

5. ALLERGIES AND ANAPHYLAXIS

What is Anaphylaxis? Anaphylaxis is an acute, severe allergic reaction requiring immediate medical attention. It usually occurs within seconds or minutes of exposure to a certain food or substance, but on rare occasions may happen after a few hours. Common triggers include peanuts, tree nuts, sesame, eggs, cow's milk, fish, certain fruits such as kiwifruit, and also penicillin, latex and the venom of stinging insects (such as bees, wasps or hornets). The most severe form of allergic reaction is anaphylactic shock, when the blood pressure falls dramatically and the patient loses consciousness. Fortunately this is rare among young children below teenage years. More commonly among children there may be swelling in the throat,

which can restrict the air supply, or severe asthma. Any symptoms affecting the breathing are serious.

The treatment for a severe allergic reaction is an injection of adrenaline (also known as epinephrine). Pre-loaded injection devices containing one measured dose of adrenaline are available on prescription.

Antihistamine should be given at the first sign of an allergic reaction and the child closely observed. Antihistamine dose may need to be repeated if the patient vomits. For a child who has asthma, if there is any sign of breathing difficulty then their reliever inhaler (usually blue) should be administered.

If the reaction continues to progress despite antihistamine and any of the following symptoms/signs are seen, then the EpiPen®/Anapen® should be administered into the muscle of the upper outer thigh and an ambulance called immediately.

All staff, including class teachers, classroom assistants, secretary and caretaker, will complete allergy training in the form of the 'Recognition and Treatment of Anaphylaxis' presentation provided by EA. This will be completed annually by all staff.

For pupils with severe allergies, Individual Care Plans will be drawn up in consultation with all stakeholders. Our school is a dedicated "Nut Aware" zone and parents are continually reminded that foods containing nuts should not be sent to school as part of a packed lunch or on school trips. A specific medical box will be taken on all school trips for such pupils which contains their Individual Care Plan and associated medicines.

6. FIRE PRECAUTIONS

We will reduce the chance of a fire or minimise its effects by ensuring:

- Adequate provision of equipment;
- Management of fire safety issues;
- Appropriate training and instruction to staff and pupils;
- Provision of sufficient number of emergency exits and routes;
- Clear indication of emergency exits by signage;
- Keeping of emergency exits and routes clear from obstructions.
- A school is legally required to have a means of fire evacuation to be followed in case of a fire.

Action to be taken upon discovering a fire

Any person discovering a fire will:

- Activate the fire alarm;
- Evacuate the building;
- Ring 999.

To enable staff and pupils to become familiar with the building, a fire action notice is displayed in every occupied room. The fire action notice is printed on A4 laminated card.

On hearing the alarm, all pupils and staff must stop their activity and evacuate the building in an orderly manner. All staff should ensure that windows and doors are closed to prevent the spread of fire and smoke to other parts of the school. All cloakrooms, stores and toilets should be checked to ensure that no one is left inside.

Emergency routes and exits

There are a sufficient number of emergency exits for use in our school. The routes to emergency exits are kept clear at all times and where necessary open in the direction of travel. Emergency doors are indicated by signage and will not be locked or fastened in such a way that they could not be opened in the case of an emergency.

Evacuation of pupils and staff

Each room has a pre-determined point where both staff and pupils will assemble immediately after evacuating the building.

The assembly point for all is in the playground. Staff and pupils must remain there until they receive further instruction. Teachers should check that all pupils are present at the assembly and report to the Principal that all have been accounted for or that some are missing.

Pupils and staff should evacuate in an orderly manner.

Fire alarm systems

We have an alarm, which is currently piggybacked onto our intruder alarm system, for alerting occupants of the occurrence of a fire. This alarm is the continuous ringing of the school bell.

Training

The principal will ensure that staff and pupils have received training in the following areas:

- Fire Prevention;
- Action to be taken on discovering a fire;
- How to raise an alarm and location of call points;
- Action to be taken on hearing the Fire Alarm;
- The location of escape routes;
- Assembly point;
- Evacuation and roll call.

In addition members of staff will receive instruction in:

- The operation of the Fire Alarm ;
- How to call the Fire Brigade;
- The location of fire fighting equipment and selection of fire extinguishers;
- The evacuation of visitors and disabled persons.
- Certain members of staff will have specific duties in the event of a fire. It is important that these are communicated clearly to staff and that everyone understands their responsibilities.

Signage

All escape routes are signed with appropriate signage.

Fire drills

A fire drill is held once per term and a record kept of the details. Information such as the date, time taken to evacuate and number evacuated is recorded. The building should be evacuated in 2 ½ minutes.

7. FIRST AID

At St. Mary's PS the following procedures are in place to ensure that we comply with First Aid Guidelines.

1. A suitable stocked first-aid box.
2. Appointed persons to take charge of first-aid arrangements.
3. Provision of information to employees on first-aid arrangements.

Duties of First Aid Appointees

- Takes charge when someone is injured or becomes ill, including calling an ambulance if required; and
- Looks after the first-aid equipment, e.g. restocking the first-aid box.
- Appointed persons should not attempt to give first-aid for which they have not been trained.

Where possible an appointed person will be available at times that people are on school premises, and also off the premises whilst on school trips.

Both members of staff with first aid duties have a current first-aid at work certificate. This certificate is valid for a period of three years and it is a requirement that a two-day refresher course must be successfully completed within the three years.

The First Aid Box will have:

First-aid boxes will contain only those items which a first-aider has been trained to use.

- One guidance card;
- Twenty individually wrapped sterile adhesive dressings (assorted sizes) appropriate to the work environment;
- Two sterile eye pads, with attachment;
- Six individually wrapped triangular bandages;
- Six safety pins;
- Six medium individually wrapped sterile unmedicated wound dressings (approx 10cm x 8cm);
- Two large sterile individually wrapped unmedicated wound dressings (approx 13cm x 9cm); and
- Three extra large sterile individually wrapped unmedicated wound dressings (approx 28cm x 17.5cm).
- Where mains tap water is not readily available for eye irrigation, sterile water or sterile normalsaline (0.9%) in sealed disposable containers should be provided. Each container should hold at [1]least 300ml and should not be reused once the sterile seal is broken. At least 900ml should be provided. Eye baths/eye cups/refillable containers should not be used for eye irrigation.
- You should not keep tablets or medicines in the first aid box.

Travelling first-aid containers

Before undertaking any off site activities an assessment should be made of what level of first-aid provision is needed. The recommended minimum contents of travelling first-aid containers is:

- A leaflet giving general advice on first aid;
- Six individually wrapped sterile adhesive dressings;
- One large sterile unmedicated wound dressing (approx 18cm x 18cm);
- Two triangular bandages;
- Two safety pins;
- Individually wrapped moist cleansing wipes; and
- One pair of disposable gloves.
- Additional items may be necessary for specialised activities.

First-aid boxes are checked on a regular basis and restocked as required..

Personal liability

The Board will legally indemnify their staff in the event of a claim arising due to alleged negligence in the administration of first-aid in the course of their duties.

8. EDUCATIONAL TRIPS

Definition of educational visit

"All academic, sporting, cultural, creative and personal development activities, which take place away from school and make a significant contribution to learning and the development of those participating."

Legal perspective

Under the common law duty of care, children, like all other citizens, are legally entitled to receive due care and attention in terms of their welfare and safety, by those in whose charge they are placed.
The safety and welfare of children in the charge of others is specifically addressed through a number of statutes, the basic requirements of which are set out below.

The common law "duty of care" is one, which is discharged daily by teaching staff and others who have a supervisory role concerning young people.

While the consequences of not adequately discharging any corresponding criminal duty cannot be insured against, this civil duty is however insurable under employee liability and public liability insurance provisions.

It is incumbent upon staff who are supervising young people to act reasonably in all circumstances, so that the personal safety and well being of those in their care is not jeopardised during the visit.
Employers have a legal obligation, both to their employees, and young persons in their care, to ensure that their health and safety is safeguarded while they are in any way affected by such Employers undertakings.

Educational visits at St. Mary's Primary School fall into Category 1 and Category 2 as outlined in EA 2017 Interim Guidance – Educational Visits – Policy, Practice and Procedure.

Category 1
Visits which take place on a regular basis within school hours.

Category 2
Visits which take place for a full day and after school hours e.g. annual school trips, field trips, etc

When an educational visit is being undertaken at St. Mary's Primary School the procedures as detailed in the above name circular will be followed. These are summarized below.

- Ensure a proper code of conduct for leaders and participants – refer to Child Protection Policy

- Group leader has been appointed and group leader given all assistants their roles for the duration of the trip
- Group leader has prepared an educational visit pack
- **Ratio** of leaders to pupils is appropriate

  Key Stage 1 (4-7) one adult up at a maximum of six young people where possible
  Key Stage 2 (7-11) one adult up to a maximum of fifteen young people where possible

- Ensure adequate first aid provision is available
- Child protection procedures have been followed
- Risk assessment of the visit has been carried out
- Insurance cover is adequate
- Telephone number of venue, school and of all parents are with the group leader
- Medical details of all pupils have been highlighted and procedures of what to do in emergency cases are understood
- Group leader understands emergency plans
- A photo pack of each class is brought on the trip

Each group leader will prepare an educational visit pack prior to and after each visit.

Before each visit careful consideration will be given to an emergency plan.

EMERGENCY PLAN – ACTIONS TO BE FOLLOWED

Child Missing:

1. Alert management of centre
2. Alert group leader
3. Assembly all other children together
4. Organise search – contact police/parents
5. Let police take control
6. Inform school/principal

Child Seriously Injured:

1. Alert First Aider
2. Alert management of centre
3. Alert group leader
4. Contact Emergency Services – let them take control
5. Contact parents
6. Inform school/principal

It is our intention to ensure that all due consideration be given to all possible issues arising out of an educational visit. The staff of St. Mary's will endeavour to act in the interests of the children at all times.

9. VIOLENCE IN SCHOOLS

The Education Service Advisory Committee (ESAC) of the Health and Safety Commission (HSC) defines violence as:

"Any incident in which an employee is abused, threatened or assaulted by a student, pupil, or member of the public in circumstances arising out of the course of his/her employment" (ESAC 1990).

The government has made it clear that any form of violence within educational establishments, and in particular when perpetrated against teachers, is entirely unacceptable. Education and Library Boards and CCMS as Employers in the education sector within Northern Ireland, fully endorse this view.

The Health and Safety at Work (NI) Order 1978 requires that Employers protect employees from risks to their health and safety whilst at work. Employees have a corresponding duty under the same statute not to put themselves or colleagues at risk as a consequence of their own behaviour. As far as pupils are concerned, schools require from them behaviour and conduct which conforms with the school's discipline policy.
This policy and the school's health and safety policy are linked in as much as the policy on discipline should be formally deployed in relation to acts of violence perpetrated by any pupil upon teaching staff, in order that the school can demonstrate that it is pro-actively discharging both its common law duty of care in protecting employees and others, as well as ensuring their future safety as required by occupational safety law.
In relation to visitors, including parents, it is the case that such persons are guests of the school and as such do not have any automatic legal right of entry thereto. In circumstances where their behaviour becomes violent, they should be requested to leave the school grounds, with the assistance of the Police if this becomes necessary.

The incident should be reported to the Board of Governors as soon as possible and they will thus decide on follow up action as required.

Conclusion

All procedures in this policy document will be reviewed annually to ensure that we continue to comply with policy and procedure as detailed in DENI, EA and CCMS Circulars.

Adopted on: November 2024 ***Next Review: November 2028***

Signed: _____ (Chair of Governors)