RIKKYO SCHOOL

FIRST AID, ADMINISTRATION OF MEDICATION INCLUSIVE OF MEDICAL PROTOCOLS & CARE OF BOARDERS WHO ARE UNWELL

Lead Person for Policy: Mr. Rob Preddy (Director of Operations)

This policy applies to the whole school

The Policy is available to the school staff via TEAMS and Staff Share

We have a whole school approach to safeguarding, which is the golden thread that runs throughout every aspect of the school. All our school policies support our approach to safeguarding (child protection). Our fundamental priority is our children and their wellbeing; this is first and foremost.

This policy also encompasses the care of those with chronic conditions and disabilities, dealing with medical emergencies and the use of prescribed and non-prescribed medication.

Scope: All who work, volunteer or supply services to our School have an equal responsibility to understand and implement this policy and its procedures both within and outside of normal School hours, including activities away from School. All new employees and volunteers are required to state that they have read, understood and will abide by this policy and its procedural documents and confirm this by signing the Policies Register.

Legal Status: Complies with The Education (Independent School Standards) (England) Regulations, along with the National Minimum Standards (NMS) for boarding schools, DfE: May 2026 as cited in Appendix A: List of policies and documents.

Related documents:

- Safeguarding (Child Protection) Policy:
- Positive Mental Health and Well-being Policy:
- Boarding Students & Parents Handbooks

Monitoring and Review: The text of this policy is necessary and proportionate to meet the needs of Rikkyo School, supporting the staff who work with our students, making clearer the responsibilities of school staff, volunteers, proprietor and the Board of Governors.These arrangements are subject to continuous monitoring, refinement, and audit by the Co- Chair of Governors, who will undertake a full annual review, inclusive of its implementation and the efficiency with which the related duties have been implemented. This review will be formally documented in writing. Any deficiencies or weaknesses recognised in arrangements or procedures will be remedied immediately and without delay. All staff will be informed of the updated/reviewed arrangements and it will be made available to them in writing or electronically.

Signed:

Date Published: October 2026
Next Review: October 2027

岡野　透	*J N Pratten*
Dr T Okano	Mr J N Pratten
Headmaster	Chairman of GAB

Policy Statement: Rikkyo School will undertake to ensure compliance with all the relevant legislation with regard to the provision of First Aid for students, staff, parents and visitors alongside supporting students with medical conditions. We will ensure that procedures are in place to meet that responsibility. This policy should be read in conjunction with Rikkyo School's Health and Safety policy, Safeguarding children Policy, Boarders' Health and Wellbeing Policy and our Mental Health Policy. It will be reviewed at least

once per year. The School complies with the Guidance on First Aid for School Best Practice Document published by the DfE, along with the NHS First Aid and Health A-Z https://www.nhs.uk/conditions/. We have a full time Head of Health and Wellbeing who is trained Emergency Medical Technician, along with two Health Centre Matrons who are qualified nurses in Japan. Please refer to 'Appendix 4: Medical Care' for further details on the Health Centre within our school and our on-call staff.

Care of Boarders:

Health & Wellbeing Centre: Procedures Student Attendance: If a student is feeling ill in the morning, he/she should report immediately to the Health Centre, the duty staff will then make an assessment and decision about whether the student should remain in the sick bay, or the boarding house to convalesce in their own room.

If a student is unwell during lesson time, then a teacher will refer them to the Health Centre, and the duty staff will assess the student and take appropriate action.

Doctor, Dentist and Optician

On arrival into the UK, students will be registered with the local GP at Rudgwick Health Centre and a dentist who they may be referred to if appropriate. Rikkyo School also has local opticians who students can go to if required. There may be charges for students who are non-EU nationals to use NHS services. Please refer to the 'Health & Wellbeing *Centre: Policies and Procedures* documents on the school website for more detailed information about these procedures.

Routine dental treatment should ideally be carried during school holiday time. If a student develops an emergency dental problem during boarding, the Nurse will make an appointment for the student to see a dentist. It is likely that expenses will not be covered by the National Health Service (NHS) so any expenses incurred will be payable by parents.

For those students who wear prescription glasses should bring two pairs with them. It is very important that a student's medical history is made clear to the school and exactly what type of medical condition or illness they currently suffer from or are prone to, and what medications they are currently on, including dosage. This should all be conveyed through the application process and completing the relevant forms. Failure to disclose a serious medical or mental health condition could put a child at significant risk.

Part A – First Aid

First Aid can save lives and prevent minor injuries becoming major ones. All Staff's conditions of employment do not include giving first aid, although any member of staff may volunteer to undertake these tasks. Teachers and other staff in charge of students are expected to always use their best endeavours, particularly in emergencies, to secure the welfare of the students at the school in the same way that parents might be expected to act towards their children. At Rikkyo School we provide the necessary training, equipment and facilities to ensure that adequate first aid cover is available to all staff, students and visitors. This provision is always available while people are on the school premises, and off the premises whilst on School visits. This provision is supplemented with a risk assessment to determine any additional provision that may be necessary. It is mandatory for boarding staff and Health Centre day and night staff to be first aiders. All other first aiders at the school are voluntary. It is our responsibility to ensure that adequate first aid provision and sufficient trained personnel and equipment are on the premises or available during school visits or events. All staff have a duty of care towards students and should respond when a situation arise. All new staff know where first aid resources can be located and who the first aiders are. We have nurses trained in first aid onsite during the school day.

Through this policy and according to The Health and Safety (First Aid) Regulations 1981 and the Diseases and Dangerous Occurrences Regulations 2013, the school is committed to:

- recording all incidents where first aid is administered;
- providing the necessary training and resources to staff to administer first aid;
- reviewing the arrangements (annually) for training and resources;
- establishing a procedure for managing accidents; and
- undertaking risk assessments of first aid requirements in the school.

Introduction: This policy is designed to ensure that all children can attend School regularly and participate in activities. This policy outlines the school's statutory responsibility to provide adequate and appropriate first aid to students, staff, parents and visitors and the procedures in place to meet that responsibility.

To comply with this best practice document, the school has a requirement for a minimum of three trained First Aiders who have satisfied the requirements of the 'First Aid at Work' course. However, staff are aware they should NEVER perform any First Aid Procedures that they have not been adequately trained to do. All schools are required by The Health and Safety (First Aid) Regulations 1981 (amended 1997) to provide trained first aid treatment for our staff in the event of injury or ill health at work. Although the regulations only require the employer to provide cover for staff, it is the school's policy to extend this cover to children and visitors.

The School will provide:

- practical arrangements at the point of need;
- the names of those qualified in first aid and the requirement for updated training every three years;
- at least one qualified person on site when children are present;
- how accidents are to be recorded, and parents informed;
- access to first aid kits;
- arrangements for students with medical conditions (for example asthma, epilepsy, diabetes);
- hygiene procedures for dealing with the spillage of body fluids;
- guidance on when to call an ambulance;
- reference to RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations,2013), under which School is required to report to the Health and Safety Executive

Methodology - This First Aid Needs Assessment will consider the following topics inclusive of:

- the nature and distribution of the workforce, work undertaken, the hazards and the risks;
- the current classification of first aiders;
- the school's history of accidents and illness;
- excursions/sports fixtures/lone workers;
- the remoteness of activities from emergency medical services;
- the assessment of the number of first aiders required.

Aims are to:

- ensure arrangements are in place for the provision of first aid;
- that all staff are aware of their roles and responsibilities in relation to the provision of first aid treatment;
- ensure employees know where first aid kits are located and the names of trained first aiders/appointed persons and to keep employees and volunteers informed of any change;
- ensure that first aid facilities should be clearly identified, e.g. in the staff room, office and Health Centre notice board; ensure that first aid provision is always available while people are on school premises, and off the premises whilst on school visits;
- provide First Aid treatment where appropriate for all users of the school (with reference to students and staff);
- provide or seek secondary First Aid where necessary and appropriate;
- treat a casualty, relatives and others involved with care, compassion and courtesy.

Objectives are to:

- appoint the appropriate number of suitably trained people as Appointed Persons and First Aiders to meet the needs of the School;
- provide relevant training and ensure monitoring of training needs;
- provide sufficient and appropriate resources and facilities; and to
- inform staff and parents of the School's First Aid arrangements.

The School will ensure that:

- adequate resources are available for the implementation of this policy;
- this policy and procedure are effectively communicated;

- an assessment is made to ensure that suitable first aid facilities are provided;
- arrangements are made for the provision suitable first aid facilities;
- an assessment is made to ensure that suitable first aid facilities are provided;
- employees with first aid responsibilities receive adequate training; and that
- arrangements are made for the periodic monitoring of performance against these standards.

Definitions:

- **First Aid:** The arrangements in place are to initially manage any injury or illness suffered at work. It does not matter if the injury or illness was caused by the work being carried out. It does not include giving of any tablets or medicine to treat illness.
- **Full First Aider:** A person who has completed a full (3-day FAAW) course of first aid training with an approved training establishment and holds a current certificate.
- **Full Paediatric First Aider:** A person who has completed a full (2-day) course of first aid training with an approved training establishment and holds a current certificate.
- **First Aider:** A person who has completed a full (1-day) course of first aid training with an approved training establishment and holds a current certificate.
- **Appointed Person:** A person who oversees the first aid arrangements, which in our School is the Head of Health and Wellbeing.
- **Medical Conditions:** Students' medical needs may be broadly but not limited as being two types:
  - Short-Term: for example, an ear infection, a short course of medication.
  - Long-Term: potentially limiting their access to education and requiring extra care and support (deemed special medical needs) e.g. severe allergies, asthma, epilepsy. generally, an individual health care plan (IHCP) is required.

Health Centre: The School provides a dedicated building where treatment can be administered, managed by the Head of Health and Wellbeing. This designated building is located near South House and is equipped with:

- 2 dormitories allocated for nursing sick students
- 2 isolation rooms equipped with their own en-suite facilities
- a sink with hot and cold running water;
- drinking water and disposable cups;
- disposable vomit pulp bowls;
- toilet and showering facilities for students;
- a store for first-aid materials;
- foot-operated refuse containers, lined with yellow, disposable clinical waste bags.
- an examination/medical couch with waterproof protection and clean pillows and blankets;
- a chair;
- bio-hazard first aid kit;
- a record book for recording incidents attended by a first-aider or appointed person;
- A controlled, lockable drugs cabinet

The **key for the lockable drugs cabinet** is securely held by the Head of Health with a copy kept in a key safe within the Health Centre for added security and accountability. This controlled environment ensures that all medical treatments and medications are managed carefully and responsibly.

First Aid Kits: The Head of Health and Wellbeing must ensure that the appropriate number of first-aid containers are available according to the risk assessment of the site are available. See Health and Safety Executive (HSE) guidelines on recommended and mandatory contents.

- All first-aid containers must be marked with a white cross on a green background;
- First aid container always accompanies the children when using any specialist facilities and during any offsite activity/education visit. First aid containers must accompany Physical Education (PE) teachers off-site;
- All vehicles carry a first aid kit;
- First aid containers should be kept near to hand by washing facilities;
- Spare stock should be kept in the Health Centre;
- Responsibility for checking and restocking the first-aid containers is that of the Head of Health and Wellbeing. The First Aiders

must notify to the offices or the Head of Health and Wellbeing any necessity of restocking of the First Aid boxes.

- Staff should notify the Health Centre of any school trips with at least 72 hours' notice to ensure that they are able to check the trip list and identify any students with medical concerns. The Health Centre will forward all relevant documentation such as IHCPs to the trip lead so they are aware of the student and their condition.
- The Health Centre will also make sure that the school trip first aid pack is ready and available to use.

Training: The School will:

- Ensure that there is an appropriate number of suitably trained first aiders available at all times, taking account of the number and needs of students, the activities taking place, the nature of the site and the requirements of the School's boarding provision.
- Ensure an up-to-date register of trained first aiders is maintained separately by the School. The register records the member of staff, qualification held, date of training and certificate expiry date.
- The Head of Health and Wellbeing will monitor the register and ensure that refresher or requalification training is arranged within the required timescales.
- Details of currently qualified first aiders are made readily available to staff and students through the School's internal information systems and at appropriate locations around the School.
- Staff undertaking boarding responsibilities will receive appropriate information and training to enable them to respond effectively to the health and first aid needs of students.

Role of the Head of Health and Wellbeing:

- ensure that sufficient and suitable school personnel are trained in first aid with valid certificates and receive refresher training every three years.
- manage the Health Centre, ensuring it meets HSE guidelines with essential equipment like a sink, drinking water, first aid supplies, a medical couch, and a fridge for medication.
- ensures first aid kits comply with HSE standards and are located throughout the school, with sufficient stock and replenishment.
- coordinate first aid provisions for breaktimes, off-site activities, and ensure medical resources for students with specific health needs are available.
- oversees hygiene procedures, accident reporting, and staff awareness of first aid protocols.

The Role of School Nurses:

- have an up-to-date file of consent forms for every student in each year and ensure that these are readily available for staff responsible for school outings.
- ensure that First Aid cover is available throughout the school week;
- be aware of first aid arrangements;
- be trained in First Aid
- be suitably trained in identifying students with expected medical problems
- At the start of each academic year, provide staff with details of any students who are known to be asthmatic, anaphylactic, diabetic, epileptic, have any allergies or any other serious illness.
- report any concerns they have on the medical welfare of any student;
- undertake training in first aid, administration of medicines and awareness of medical problems in students; (Updated to include Paediatric First Aid training)
- report and record all accidents and first aid treatment administered.

The role of the Appointed Person: The Appointed Person at Rikkyo School is the Head of Health and Wellbeing and in their absence, a designated School Nurse. All medical matters and first aid issues should be directed to them. The Appointed Person will take charge when someone is injured or becomes ill. They are also responsible for the first aid equipment and for restocking the first aid containers. They will ensure that an ambulance or other medical help is summoned when appropriate. Record keeping is also an important role of the Appointed Person. Records are kept in the School Accident book, in the First Aid Log and where relevant on iSams. When needed reports are produced on specific incidents/ accidents.

Trained First-Aiders:

- Ensure that employees are aware that they can only give first aid if they hold a current first aid certificate. This treatment can be

provided to employees, individuals, visitors and any other people who are within The School's control;

- Provide sufficient First Aiders on the site, to take account of shifts and absences.
- Ensure that each first-aider holds a current Certificate of Competence in First Aid Work issued by an HSE approved organisation. Re-training is required every 3 years, i.e. before the expiry date.

First Aiders' Responsibilities:

- To give first response treatment and to summon an ambulance through the most appropriate means, when necessary;
- To inform the Health Centre if they suspect a student is too unwell to stay in class or boarding. The Health Centre will carry out their assessment where appropriate and act accordingly. Once referred to the Health Centre, it is then the Health Centre's responsibility to notify the School Office and Boarding House of the students location.

Responsibilities of the Employer: Under the Health and Safety Act 1974 the employer has a series of specific responsibilities relating to Health and Safety in the workplace. Insurance cover must be in place in order to cover possible claims against the School, which should be covered under Employers' Liability and Public Liability. The employer must also arrange for adequate training to cover the number of staff and students at the School, as well as coverage off-site and on educational visits.

Contacting First Aid Personnel: The Appointed Persons can be contacted in Reception or on their mobile. These numbers are displayed near every phone. First aiders can be contacted through the School Office or directly by phone.

Policy on First Aid in the School: All staff, both teaching and non-teaching are responsible for dealing with minor incidents requiring first aid. During the school day first aid is administered by the Nurse, Nurse assistant, or Surgery assistant; or one of the trained First Aiders if an accident occurs in the School grounds and first aid is required, then one of the staff on duty can assist if they are qualified, or if they are not qualified, they should come to Health Centre and request the assistance of the designated first aider. The First Aiders are authorised to apply dressings and compresses and take reasonable steps to facilitate symptom relief. Fully stocked First Aid kits are available in the Health Centre, and elsewhere in the school. Any action taken must be recorded on ISAMS which is, and parents should be informed by email of any accidents which occur. Any first aid or medical assistance given must be reported to a Head of Health and Nurse on duty. All injuries, accidents and illnesses, however minor, must be recorded on ISAMS and Accident Book, which are available in the Teacher's Room. If an injury or illness involves spillage of body fluids gloves should be worn. If there is any concern about the first aid which should be administered, then the Duty Nurse or a qualified first aider must be consulted.

The arrangements for first-aid provision will be adequate to cope with all foreseeable incidents. The number of designated first-aiders will not, at any time, be less than the number required by law. This is determined by risk assessment (Local Authority guidance). Designated staff will be given such training in first-aid techniques as is required to give them an appropriate level of competence. The Health Centre is responsible for ensuring that a sufficient back-up stock is held on site. Notices will be displayed in prominent locations throughout the establishment identifying how to summon first aid in an emergency, who the first aiders are and their contact and location details. A written record will be kept of all first aid administered either on the school premises or as a part of a school related activity.

We believe it is essential that this policy clearly identifies and outlines the roles and responsibilities of all those involved in the procedures and arrangements that relate to this policy. To ensure adequate First Aid provision:

- There will be sufficient numbers of trained staff and appropriate equipment available to ensure a rapid response when the school is occupied.
- All House Parents, Deputy House Parents, Health Centre staff, and night duty staff must take a first aid course, which includes AAI and AED training will be updated every three years.
- First aid training will be delivered to us in-house by qualified staff or by an external professional provider determined by the Director of Operations.
- A First Aider is always available during school hours or when Students are in house.
- Teachers and all staff have had Child Protection training.

Administering First Aid:

- First aid will only be administered by a trained first aider and copies of first aid certificates will be systematically filed.
- For minor injuries which are within the first aider's capability, appropriate treatment should be provided. Otherwise, the injured person should be made comfortable until the emergency services arrive.

- Ensure that contaminated waste is safely disposed of and any blood or body fluid spillages are safely removed.
- Record any first aid treatment in the Treatment Book/ Boarding House Treatment books.

The First Aiders' procedure for dealing with sick or injured students:

- Ascertain by inspection and discussion with child or staff member the nature of the child's injury or illness;
- Comfort or advise as necessary. This may be sufficient and child can return to class or break. Inform staff member of nature of any concerns if appropriate. Treat injury or illness if required. Clean wound with antiseptic wipe or running water and dress appropriately;
- Record action taken on iSAMS. If student is then well enough, he/she will return to class;
- If a severe illness or injury is suspected then the most appropriate member of staff will take the student to hospital or the emergency services will be called and administrative staff will contact a parent/guardian to inform them. No student will travel in an ambulance unaccompanied;
- If any issue arises during treatment or discussion with the student that the School Nurse or First Aider feels should be taken further, she/he will telephone or speak to the parents and/or the Designated Safeguarding Lead or most appropriate member of staff. First Aiders will have up to date Emergency First Aid training and some will have a full and current First Aid at Work Certificate. They are not, however, medically qualified and hence cannot give medical advice.

Personal Accident Insurance: All students and staff are covered by adequate personal accident insurance, the premium of which is paid for centrally by the School, Leaflets with details of the policy can be provided upon request.

Hygiene/Infection Control/HIV Protection: Staff take precautions to avoid infection and will follow basic hygiene procedures. Single-use disposable gloves are to be found in all first aid containers. Staff have access to single-use disposable gloves and hand-washing facilities/hand sanitiser, which are used when dealing with any blood or other bodily fluids. Staff will take care when dealing with such fluids, and when disposing of dressings or equipment, along with making sure any waste (wipes, pads, paper towels etc) are placed in a disposable bag and fastened securely. Any children's clothes should be placed in a plastic bag and fastened securely ready to be sufficiently cleaned: *Source: 'Guidance on First Aid for School: A Good Practice Guide' (adapted).* All School staff take appropriate precautions to avoid infection and must understand and follow basic hygiene procedures. The School has a bio-control kit for spills, which are available in the Health Centre, and Housekeeping department.

Supporting Sick or Injured Children: Any students unwell during the day can be cared for in the Health Centre, until feeling better and able to return to classes or their boarding house. Only trained staff will administer first aid and first aiders will not administer medication unless medication training has been completed. Parents are welcome to contact the Health Centre at any time if they have concerns about their child, and they will liaise if they or other staff have their own concerns. Initial medical information is gathered via the Medical Questionnaire form which must be completed for all children before their start date. Important information e.g. about allergies is disseminated to all staff on a need-to-know basis.

With reference to sick children and medicine we:

- make every effort to keep abreast of new information relating to infectious, notifiable and communicable diseases and local health issues via Public Health England (www.gov.uk);
- contact the School health professional for advice if we are unsure about a health problem;
- isolate a child if we feel that other children or staff are at risk;
- ring emergency contact numbers if the student cannot be sufficiently cared for by the Matron, Nurse, or Assistant Matrons.
- make every effort to care for the child in a sympathetic, caring and sensitive manner;
- keep other parents informed about any infectious diseases that occur;
- expect parents to inform the office if their child is suffering from any illness or disease that may put others at risk.

Confidentiality: Information given by parents regarding their child's health will be treated in confidence and only shared with other staff when necessary or appropriate. Further information regarding confidentiality of medical and nursing records can be found below in Part B of this policy.

Monitoring: Accident report forms can be used to help the Head of Health and Wellbeing, Bursar, and the Health and Safety Manager

to 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 Head of Health and Wellbeing regularly reviews the accident records.

Reporting to HSE: statutory requirements: The School is legally required under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (**RIDDOR**) to report the following to the HSE (most easily done by calling the Incident Contact Centre (ICC) on 0845 300 99 23). The Health and Safety Manager will keep a record of any reportable injury, disease or dangerous occurrence, as well as any first aid treatment given by first aiders. This should be on the official HSE form which can be found in the Health Centre This will include:

- the date and method of reporting;
- the date, time and place of the event;
- personal details of those involved;
- a brief description of the nature of the event or disease and the first aid given;
- what happened to the person immediately afterwards;
- the name and signature of the first aider or person dealing with the incident.

This record can be combined with other accident records. Copies should be given to the Head of Health and Wellbeing.

The following accidents will 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);
- accidents which prevent the injured person from doing their normal work for more than seven consecutive days;
- 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 School activity, both on or off the premises;
- the way the School activity has been organised and managed;
- equipment, machinery or substances, the design or condition of the premises.

HSE will be notified of fatal and major injuries and dangerous occurrences without delay. The Governing Advisory Board is responsible for ensuring this happens but may delegate the duty to the Health and Safety Officer. The Bursar will report the incident to HSE and also to our insurers.

Record keeping & Statutory accident records: The Director of Operations will ensure that readily accessible accident records, written or electronic, are kept for up to the student's 21st birthday or 3 years whichever is soonest
. The Director of Operations will also ensure that a record is kept of any first aid treatment given by first aiders or appointed persons. This will include:

- the date, time and place of incident and the name (and class) of the injured or ill person;
- details of their injury/illness and what first aid was given and what happened to the person immediately afterwards along with the name and signature of the first aider or person dealing with the incident.

Reporting: All injuries, accidents and illnesses, however minor, are recorded on iSAMS and Accident Report Forms. An Accident Report Form will be completed on the same day or as soon as possible for all accidents and all serious accidents will be reported in the Accident Report Book. All entries in the Accident Book, kept in the reception area, are given to the Director of Operations. The Head of Health and Wellbeing is responsible for ensuring that the accident procedures are recorded correctly and that parents and HSE are kept informed as necessary. Records held in the first aid and accident book will be retained up to the students 21st birthday.

Reporting to Parents: In the event of accident or injury parents must be informed as soon as practicable. The member of staff in charge at the time will decide how and when this information should be communicated, in consultation with the Headmaster if necessary. This may be by telephone, and followed in writing via email. Parents are always informed if there is a head injury, no matter how apparently minor.

Accidents involving Staff: Work-related deaths and specified injuries will be reported to the Health and Safety Executive where required under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR). Work-related accidents resulting in an employee or self-employed person being unable to undertake their normal work duties for more than seven consecutive days, excluding the day of the accident, will be reported in accordance with current HSE requirements. Accidents resulting in incapacity for more than three consecutive days will be recorded as required. The School will determine reportability by reference to current HSE guidance.

Accidents Involving Students or Visitors: Accidents where the person is killed or is taken from the site of the accident to hospital and where the accident arises out of or in connection with:

- any School activity (on or off the premises) and the way a School activity has been organised or managed (e.g. the supervision of a field trip);
- equipment, machinery or substances and the design or condition of the premises;

Need to be reported without delay to HSE, followed by Form F2508. For more information on how and what to report to the HSE, please see https://www.hse.gov.uk/riddor/index.htm It is also possible to report online via this link.

Off-site Activities and Trips: The member of staff in charge of the activity or trip should obtain a first aid container from the Health Centre. He/she should ensure that he/she has any specialist equipment that may be required as detailed in the activity risk assessment. It will be ensured that one member of staff has a current first aid qualification. It is the responsibility of the person organising the activity or trip to ensure there is adequate cover. Mobile first-aid kits are available for staff and will be taken on trips.

Accompanying staff will also carry and/or be aware of details for relevant students, including:

- contact details for parents/guardians;
- details of any medical conditions;
- details of any medications being currently taken or relevant equipment;
- details of allergies;
- dietary requirements;
- any other relevant information - including anxiety and other mental health/psychological issues.

Head Injury: Head injury as defined by NICE 2023 is defined as any trauma sustained to the head. All students who sustain a head injury will be seen by the Nurse immediately, who will assess the injury, complete an accident form, and inform the parents/guardians/carers.

Out of School Hours: During out of School hours, staff/students on trips or activities will have access to first aid equipment. Those on trips have a dedicated telephone to ensure that they can be contacted or make calls, but all trip and activity organisers will have a mobile first aid kit with them. Should a more serious incident occur that requires medical attention, our staff are instructed to seek professional medical help from the relevant authorities (ambulance, paramedic, doctor, etc.).

Risk Assessment and Hazards: It is important that Rikkyo School is aware of general and specific hazards on its premises. For example, the science laboratories and art room represent a higher risk environment potentially than other parts of the building owing to nature of task and activities that take place within them. Our School's risk assessment takes hazards and perils posed on these sites very seriously and take appropriate steps. For example, an eye wash is available in the laboratories as well as provision to deal with burns or scalding from apparatus or general accidents. Cuts from accidents with sharp instruments are a specific concern in the art room and appropriate first-aid provision will be made available.
An annual risk assessment is made and the chair of governors hazards and perils currently are considered:

- **Art room**: cuts from knives, inhalation of sprays, eye contamination from materials, slippage;
- **Science laboratories**: cuts and lacerations from broken glassware, eye injuries from glass or chemicals, burns from flames, strong acids, alkalis, other chemicals. inhalation of fumes, eye injuries and slippage;
- **Stair case**: falling and slippage;
- **Dining hall** – choking, slippage, allergic responses;
- **Sports hall** – physical strain injury, slippage, dehydration, infection control/hygiene;
- **General** – student (or staff member) who currently has an underlying health issue and may be on medication, may need quick access to medicines on their person or securely held for them at the school;
- **Showers**- infection control, slippage;
- **All restricted areas.**

Risk Assessment: This will be reviewed annually or at any time after an injury has occurred. The Bursar and Director of Operations

should carry out the first aid risk assessment in association with the Head of Health and Wellbeing.

Care of Unwell Boarders: Where a boarder is unwell or injured and it is considered necessary for them to remain in the Health Centre an isolation room or other designated accommodation overnight:

- An individual assessment will be made of the student's medical and welfare needs.
- Appropriate arrangements will be made to ensure that the student is adequately supervised and monitored throughout the period of illness. The student will remain under the responsibility of an identified member of staff and will be able to obtain assistance promptly at any time during the night.
- The level and frequency of observation will be determined according to the student's condition and individual needs and will be reviewed if their condition changes.
- Appropriate handover information will be provided to the member of staff assuming responsibility for the student. This will include any medication requirements, observations required, signs or symptoms requiring escalation and appropriate emergency contact arrangements.
- Where necessary to care appropriately for the student or to reduce the risk of infection to others, the student will be accommodated separately from other students. Suitable toilet and washing facilities will be available, and the student's privacy, dignity, age, sex and any additional needs will be taken into account.
- If the student's condition deteriorates or cannot appropriately be managed within the School, medical advice or emergency assistance will be sought without delay and parents or guardians will be informed as appropriate.

Night Duty: Night duty responsibilities are undertaken by teachers, and boarding staff on a rota system, with male teachers on duty in the boys' boarding house and female teachers / night duty staff in the girls' boarding house. There is always a member of staff on call throughout the night for visits and verbal consultations. A first aid kit and two spare EPIPENs are kept in each of the Boarding Houses. Any student who requires overnight care will stay in the Health Centre.

Chaperone: If at any point the students requires a Chaperone for medical reviews, one will be arranged via the School to ensure the student is comfortable and well looked after.

Initial Medical Assessment of Boarders: An online interview with the school nurse takes place with the parent and the student before the student starts school, to clarify any medical history and medication currently being taken. This medication is then checked by the nursing team when the student arrived and if required labelled in English.

General Practice (GP): It is important that all our students have access to healthcare. The nursing team will register them at a local GP.

Access to Male/Female Doctor Although the School Medical Officer is male, all students have access to a female doctor should they prefer to be seen by one. Female students are routinely made aware of this option, and Health Centre staff may also offer a consultation with a female doctor where they consider this appropriate, particularly in relation to a sensitive or personal health matter. Students do not need to explain the nature of their concern to Health Centre or boarding staff in order to request an appointment with a male or female doctor. Their preference will be respected wherever reasonably practicable. Male students are similarly able to request to see a male doctor if they would feel more comfortable doing so. The School aims to ensure that all students can access medical advice and treatment in a way that respects their privacy, dignity and individual needs

student wish to take advantage of this. All female students are offered this alternative and if Health Centre staff feels the girl's problem is of a sensitive nature, they would then request a consultation with a female doctor. No student has to explain to Health Centre staff or boarding staff why they wish to see the doctor. Male students are able to request a male doctor as all Health Centre staff are female.

Access to Specialist Health Services Where appropriate, the School will:

- Facilitate timely access or referral to specialist health services according to the individual needs of the student. These may include NHS mental health services and CAMHS, sexual health services and specialist services supporting children who may have experienced abuse or other significant harm.
- Work effectively with local health services and other appropriate agencies to ensure that students receive timely assessment, treatment and support.
- Where a student's health needs give rise to a safeguarding concern, information will be shared and action taken in accordance

with the School's Safeguarding and Child Protection Policy and applicable statutory guidance.

- Access to specialist services will be managed sensitively, with appropriate regard to the student's age, understanding, confidentiality, consent, privacy and dignity.

Arranging Healthcare Appointments

The Head of Health and Wellbeing, or a suitably delegated member of the Health Centre team, is responsible for arranging routine healthcare appointments for boarders where these are required during term time. This includes, as appropriate, GP, dental, optometric and other healthcare appointments.

Where a student requires urgent or emergency medical treatment, appropriate healthcare will be arranged without delay. This may include contacting NHS 111, requesting emergency assistance by calling 112 or 999, arranging an urgent GP appointment or taking the student to an appropriate NHS treatment facility.

Parents or guardians will be consulted or informed as appropriate, taking account of the urgency and nature of the treatment, the student's age and capacity to consent, the student's right to confidentiality and the School's safeguarding responsibilities.

The Health Centre will maintain an appropriate record of healthcare appointments, treatment and any necessary follow-up action.

Medical Needs: Students with extra medical needs at school may require an Individual Health Care Plan (IHCP) or Japanese equivalent this ensures that we can meet the medical needs of individual student and staff are able to take appropriate action should an emergency occur. The Health Care Plan (IHCP) can be found on the students individual iSams record. Conditions which might require a care plan include allergies, Diabetes, Asthma, and Epilepsy. It is the parent's responsibility to notify the School of any changes to their children's health as it could alter the care pathways. Care plans are developed in collaboration with the student, parents (if student is under 16), carers, health care professionals, School nursing service and appropriate school staff such as the SENCO or the Mental Health Lead.

Supervision and Ratios: Currently the School has maximum number of 206 boarders. The School Nurse can successfully manage up to 10 sick boarders in any one day in the Health Centre; above this, then a House Parent or the Head of Boarding needs to work alongside the School Nurse to help out in the supervision and checking. Ultimately, it will be the School Nurses role to judge and assess each student's progression with the feedback from others. If there was serious outbreak of illness in the boarding house, then all House Parents would be required to work, irrespective of their boarding rotas until a steady state could be achieved.

Taking a Boarder to A&E: Should a student be injured as a result of an accident; initial treatment would be carried out by Health Centre staff or first aiders. However, In the event where a student requires urgent care that cannot be facilitated at the School, arrangements will be made for the student to go A&E. During the day 08:00-20:00, if a Nurse or Matron is available and there are no other sick boarders, they will accompany the student during the hospital visit. However, if this cannot be facilitated, another member of staff will accompany them instead. After school hours 20:00-08:00, the house parent will accompany the student to A&E and cover will be arranged by Head of Boarding at the Boarding facility. The Head of Health and Wellbeing or Head of Boarding will notify the parents / guardians about their children's condition and care plan. All emergency treatment, i.e. bone fractures, bad sprains or open wounds, are treated under the NHS, at the Royal Surrey County Hospital, Guildford, which is the nearest 24-hour Accident and Emergency Centre. If the injury is potentially serious, the parents would be informed and consulted on treatment. For minor injuries, patients can be taken to the Horsham Minor Injury Unit or Hazlemere Minor Injury Unit. The School also has an AED machine (Automated External Defibrillation) which is situated outside the main administration building, which can be used by anyone on site.

COVID 19: The School will manage COVID-19 and other respiratory infections in accordance with current UKHSA/NHS public-health guidance, taking account of the individual student's condition and the need to minimise transmission within the boarding community.

Diarrhoea & Vomiting: As per NHS guidance, if a child have an episode of diarrhoea or vomiting they will remain in the boarding facilities until 48 hours after the last episode to prevent spreading any infection to other. They will be moved to an isolation room or separated in the Health Centre is no isolation room is available The nursing team will assess students on individual basis to establish the best care going forward.

Sanitary Products: Sanitary products are freely available from the Health Centre to students. We support ending period poverty at this School.

Students with Special Medical Needs: Students at Rikkyo School with medical conditions must be properly supported and where a

student has a specific health care plan, sufficient arrangements and coordination are in place so that teachers, the boarding team and other staff are aware of a child's condition and what should be done to help them if they are in distress or ill. It is important that in this process, issues such as SEND and language barriers are factored in. Any educational health care plan should be reviewed annually.

The Appointed Person with the help of the School Admissions Officer should draw up an individual health care plan for students with medical needs. The Head of Health and Wellbeing will give specialist training where required to staff willing to administer medication or take responsibility for other aspects of support. Parents are responsible for supplying information about medicines that their son or daughter needs to take while at School, and for making the School aware of any changes in the prescription or the support needed. The parent or doctor is aware they must provide written details including:

- name of medication;
- dose;
- method of administration;
- time and frequency of administration;
- other treatment required;
- any side effects; and the
- temperature at which medication is kept.

In addition, parents must provide written consent for the treatment and administration of medication by a member of staff. During admissions, it is the responsibility of the School to ask questions about the medical history of any prospective student and if they are on any medication. Parents and Guardians also have a duty to inform the School of the medical situation of their child or ward. The School will make arrangements for the following information:

- triggers, sign and treatment of any condition;
- arrangements on whether a child can self-administer medicine;
- what to do in an emergency, who to contact, etc.

Dental Care: Parents are encouraged to take their child to regular dental check-ups during school holidays. Any necessary treatment (including orthodontics) can be carried out at the local practice (Rudgwick Dental Practice), or the student can choose for treatment to be done at home during the holidays. All dental treatment is private (including orthodontics) if carried out during term time.

Emergency Dental Treatment: dental accident and emergency cover is provided by Rudgwick Dental Practice and any charges are payable by the child's parents.

Parent Contact: We will contact the Parents/Guardians when a student is admitted to the Health Centre (isolation room) and when the student has recovered enough to return to their dormitory and back to their lessons. If the student stays in the sick room for an extended period of time we will email/phone regular updates to their parents/Guardians (The schools policy is to isolate a student when they have high temperature.) We will contact Parents/Guardians when there is concern about the student's condition (i.e. skin condition weight loss, resting in dormitory more often than before) emails are sent after hospital appointments. We write reports to the parents at the end of term to report all the visits to the Health Centre during the term. The Health Centre welcomes calls/emails from Parents/ Guardians and will endeavour to respond to emails as quickly as possible.

Further Considerations:

- No child under 16 should be given prescription or non-prescription medicines without their parent's written consent, except in exceptional circumstances.
- All medication brought into school for a student must be **licensed and approved for use in the UK** Medication obtained in Japan or another country that is **not licensed or approved for use in the UK** must not be administered by the Health Centre until it has been reviewed and specifically approved by the School's Medical Officer.
- Once the drug is no longer required it must be returned to the parents and safely disposed of.
- A child who has legally been prescribed a drug may have it in their possession, if they are competent to do so, but passing it to another child is a serious offence.
- Careful consideration and arrangements should be made for those students who have medical concerns (and who may also have SEND issues) and who go on School trips and activities. It is crucial that during a risk- assessment stage, proper checks are made on the need of any students, what medicines they may, take, dosage, frequency, nature of conditions and symptoms, etc

Bio Control and Hygiene/Infection Control: All staff should take precautions to avoid infection and must follow basic hygiene procedures. Single-use disposable gloves are to be found in all first aid containers. All staff should take great care to avoid infection and cross infection and must follow basic hygiene rules. Staff should have access to single-use disposable gloves and should take care when dealing with blood or other body fluids. All School staff should take appropriate precautions to avoid infection and must understand and follow basic hygiene procedures. Some basic hygiene procedures are:

• ensuring all staff have access to single-use disposable gloves;

• making sure all staff can easily access hand washing facilities or hand sanitiser in all areas of the College and off-site

• safe disposal of clinical waste, blood and other body fluids; The School has a bio-control kit for spills, which is available from the Health Centre and the Housekeeping dept.

Appendix 1 - Location of First Aid Boxes

Location	No of boxes	Type
Health Centre	N/A	N/A
Reception	1	General
Kitchen	2	General + Eye wash
Science	3	General + Eye wash
Maintenance	1	General + Eye wash
Sports Hall	2	General
Oak House	1	General
Maple House	1	General
Garden House	1	General
Sycamore House	1	General
Minibuses	1 per bus (5)	General
Laundry	1	General + Eye wash

PLEASE NOTE: **The following is information about certain conditions, but any actions based on the information below that is taken should be done so by a trained person, ideally a nurse that is employed by the School.**

Annex A:

Basic First Aid: Knowing what to do in an emergency is vitally important. Consider getting some first aid training and a first aid kit and familiarise yourself with how to deal with some of the more common situations opposite. If someone is injured, the following steps will keep them as safe as possible until professional help arrives:

- keep calm. if people are seriously injured call 999 / 112 immediately; contact the school nurse or a first aider.
- make sure you and the injured person are not in danger and assess the injured person carefully and act on your findings using the basic first aid steps below. Keep an eye on the injured person's condition until the emergency services arrive.

Embedded Objects and Splinters: An object embedded in a wound (other than a small splinter) should not be removed as it may be removed as it may stemming bleeding, or further damage may result- If bleeding create pressure either side of object with bandages. In principle leave splinter in place, carefully clean the area with warm soapy water; use sterile dressing to cover it, Report to parents, if the child is particularly uncomfortable contact parents.

Unconsciousness/Non-responsive	**Bleeding (If nothing is embedded)**
If the person is unconscious with no obvious sign of life, call 999 / 112 and ask for an ambulance. If you or any bystander has the necessary skills, Commence CPR while you wait for the emergency services.	Control severe bleeding by applying firm pressure to the wound using a clean, dry dressing, if continues apply another dressing pad firmly bandage **do not remove the original pad**. Lay the person down, reassure them, keep them warm and loosen tight clothing.
Burns	**Broken bones**
For all burns, cool with water for at least 20 minutes. Do not apply dry dressings, use cling film loosely if available- keep the patient warm and call an ambulance.	Try to avoid as much movement as possible.

Annex B: Anaphylaxis

What is anaphylaxis?

Anaphylaxis is a severe allergic reaction requiring urgent medical attention. It can be triggered by a variety of allergies, the most common of which are contained in food (e.g. dairy products, nuts, peanuts, shellfish), certain drugs and the venom of stinging insects (e.g. bees, wasps, hornets). An adverse reaction can be very fast and life-threatening. Symptoms of anaphylaxis usually occur after exposure to the causative agent and may include itching, swelling of the throat and tongue, difficulty in swallowing, rashes appearing anywhere on the body, abdominal cramps and nausea, increased heart rate, difficulty in breathing, collapse and unconsciousness. No one would necessarily experience all of these symptoms at the same time.

Medication and control

While "allergy" medicines such as antihistamines can be used for mild allergic reactions, they are ineffective in severe reactions – only adrenaline is recommended for severe reactions (anaphylaxis). The adrenaline treats both the symptoms of the reaction, and also stops the reaction and the further release of chemicals causing anaphylaxis. However, severe reactions may require more than one dose of adrenaline, and children can initially improve but then deteriorate later. It is therefore essential to always call for an ambulance to provide further medical attention, whenever anaphylaxis occurs. The use of adrenaline as an injection into the muscle is safe and can be life-saving. ***It is vital that key staff in our School are aware of the Student's condition and of where the student's medication is kept, as it is likely to be needed urgently.***

It is not possible to overdose using an Auto Adrenaline Injector (AAI) as it only contains a single dose. In cases of doubt, it is better to give a student experiencing an allergic reaction an injection rather than hold back. All students who have anaphylaxis will require an Allergy Action Plan which parents or guardians should complete prior to starting at Rikkyo School.

Any student or staff member that is prescribed an Epi-Pen should carry **TWO Epi-Pens with them AT ALL TIMES**, e.g. to all lessons, to PE, to all meals, to after-school activities, to school outings. Students prescribed Epi-Pens are not stored in the Health Centre they are held by the student.

Additional AAIs are held in the Dining Room, each Boarding House, the Admin building and the Health Centre

Guidance on the use of adrenaline auto-injectors in School
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/645476/Adrenaline_auto_injectors_in_School.pdf

Following discussion with the student and his/her parents, individual decisions should be made as to whether to provide basic information on the student's condition to his/her peer group so that they are aware of their classmate's needs and of the requirement for urgent action should an allergic reaction occur. Fellow students should also be advised not to share food or drink with a student who is likely to experience an anaphylactic reaction.

Managing students with anaphylaxis

- All staff are aware of those students under their supervision who have a severe allergy resulting in anaphylaxis. Staff will ensure that all students who have an AAI prescribed to them, have their medication on them at all times. A list is available of all students with Allergies.
- Staff will ensure that they attended the Anaphylaxis training held on training (INSET) days. (Staff to seek advice from the Nursing Team or a First Aider). If a student feels unwell, the Health Centre or a First Aider will be contacted for advice.
- A student should not be moved, the Health Centre or additional staff should be summoned to assist

Away trips:

- A member of staff trained in the administration of medication will accompany the trip, taking responsibility for the safe storage of student's medication, if the students cannot carry it themselves (See Health Care Plan.)
- Staff supervising the trip are aware they must be alert to the student's condition and of any relevant emergency procedures.

Issues which may affect learning: Students with anaphylaxis are encouraged to participate as fully as possible in all aspects of School life. It is not possible to ensure that a student will not come into contact with an allergen during the School day but Rikkyo School bears in mind the potential risk to such students in the following circumstances and seek to minimize risk whenever possible.

What are the main symptoms? Itching or presence of a rash, swelling of the throat, difficulty in swallowing, difficulty in breathing, increased heart rate and unconsciousness.

What to do if a student has an anaphylactic reaction: Always give an adrenaline auto-injector if there are ANY signs of anaphylaxis present. You should administer the student's own AAI if available, if not use the spare AAI. The AAI can be administered through clothes and should be injected into the upper outer thigh in line with the instructions issued for each brand of injector. **IF IN DOUBT, GIVE ADRENALINE.** After giving adrenaline do NOT move the student. Do not allow them to stand or walk, even if they say they feel better. Ideally, they should lie flat with their legs raised. If breathing is difficult, they may sit with their legs outstretched, but they must not stand or walk. Administer salbutamol if someone appears to be having a severe allergic reaction, it is vital to call the emergency services without delay – even if they have already self-administered their own adrenaline injection and this has made them better. A person receiving an adrenaline injection should always be taken to hospital for monitoring afterwards. **ALWAYS DIAL 112 or 999 AND REQUEST AN AMBULANCE IF AN AAI IS USED.**

Annex C: Asthma

What is Asthma? Asthma is a very common long-term lung condition. It affects the airways that carry air in and out of your lungs. It affect 1 in 11 children. People with asthma often have sensitive, inflamed airways. They can get symptoms like coughing, wheezing, feeling breathless or a tight chest. Asthma symptoms can come and go. Sometimes people may not have symptoms for weeks or months at a time. Asthma can be life threatening.

Medication and control: Medication to treat the symptoms of asthma usually comes in the form of inhalers which in most cases are colour coded. Instructions will be given on the medication as to which colour coding is relevant to inhaler use in different circumstances. Most students with asthma will take charge of and use their inhaler from an early age and it is good practice to allow students to carry their inhalers with them at all times, particularly during PE lessons. If a student is too young or immature to take responsibility for the inhaler, staff will ensure that the inhaler is kept in a safe but readily accessible place and is clearly marked with the

student's name. Spare inhalers are located in the Health Centre but can only be given to those who have a diagnosis of Asthma and a signed consent form.

Students with asthma must have immediate access to their inhalers when they need them: It would be helpful for parents to provide the School with a spare inhaler for use in case the original inhaler is left at home or runs out. Spare inhalers are clearly labelled with the student's name and stored in the Health Centre in accordance with the School's health and safety policy. It is the parents' responsibility to ensure that any medication retained at the School is within its expiry date. All asthmatic students will require a 'Health Care Plan' which parents or guardians should complete prior to starting at Rikkyo School. The Health Care Plan provides the basic details and indicates whether in some circumstances the student should be allowed to carry medication on his/her person around the School.

This will be kept with the student's medical file in the Health Centre. Following discussion with the student and his/her parents' individual decisions will be made as to whether to provide basic information on the student's condition to his/her peer group so that they are made aware of their classmate's needs.

Managing students with asthma

- Staff are aware of those students under their supervision who have asthma. Games staff ensure that all students with asthma have their salbutamol inhaler prior to commencement of a session. A list is available of all students with Asthma and where the medication is kept.
- Staff will ensure that they have some knowledge of what to do if a student has an asthma attack. (Staff to seek advice from the School Nurse).
- If a student feels unwell, the School Nurse or a First Aider will be contacted for advice. A student will always be accompanied to the Health Centre if sent by a member of staff.

Issues which may affect learning: Students with asthma should be encouraged to participate as fully as possible in all aspects of School life, although special considerations may be needed before undertaking some activities. Students **MUST** take their inhaler with them on all off-site activities.

Physical activity will benefit students with asthma in the same way as other students. They may need to take precautionary measures and use their inhaler before any physical exertion. As with all students, those with asthma are encouraged to undertake warm- up exercises before rushing into sudden activity, especially when the weather is cold. ***However, they are not forced to take part if they feel unwell.***

What are the main symptoms?

- coughing, wheezing, tight chest, inability to speak properly and difficulty in breathing out.
- what to do if a student has an asthmatic attack.
- keep calm and reassure the child.
- encourage the child to sit up and slightly forward.
- use the child's own inhaler – if not available, use the emergency inhaler.
- remain with the child while the inhaler and spacer are brought to them.
- immediately help the child to take two separate puffs of salbutamol via the spacer.
- if there is no immediate improvement, continue to give two puffs at a time every two minutes, up to a maximum of 10 puffs.
- stay calm and reassure the child. stay with the child until they feel better. the child can return to school activities when they feel better.
- if the child does not feel better or you are worried at anytime before you have reached 10 puffs, call 112 or 999 for an ambulance.
- if an ambulance does not arrive in 10 minutes give another 10 puffs in the same way.
- liaise with the school nurse and office staff about contacting the student's parents/guardians.

Annex D: Diabetes

What is diabetes? Diabetes is a condition in which the amount of glucose (sugar) in the blood is too high due to the body being unable to use it properly. This is because of a faulty glucose transport mechanism due to lack of insulin. Normally, the amount glucose in the bloodstream is carefully controlled by a hormone called insulin. Insulin plays a vital role in regulating the level of blood glucose and, in particular, in stopping the blood glucose level from rising too high. Students with diabetes have lost the ability to produce insulin and therefore their systems are unable to control their blood glucose levels. If the blood glucose level is too high, a student may show symptoms of thirst, frequent trips to the toilet, weight loss and tiredness. Conversely, if the blood glucose level is too low a student may display symptoms which include hunger, drowsiness, glazed eyes, shaking, disorientation and lack of concentration.

Medication and control Diabetes can be treated effectively by injections of insulin/tablets and by following an appropriate diet. The aim of the treatment is to keep the blood glucose level close to the normal range so that it is neither too high (hyperglycaemia) nor too low (hypoglycaemia). All students with diabetes will require a Health Care Plan. In most cases students will have their insulin injections before and after School but some students may require an injection at lunchtime. If a student needs to inject whilst at School he/she will know how to undertake the procedure without adult supervision. However the student may require privacy in which to administer the injection. Some students may also need to monitor their blood glucose levels on a regular basis and again privacy may be required for this procedure.

An essential part of the treatment of diabetes is an appropriate diet whereby regular meals and good food choices help to keep the blood glucose level near normal. A student with diabetes will have been given guidance on food choices which should be reduced in sugar and fat but high in starch. Most students with diabetes will also need to eat snacks between meals and occasionally during class time. Our staff are aware they must allow student with diabetes to eat snacks without hindrance or fuss and to ensure that the lunchtime meal is taken at a regular time. Rikkyo School will always establish with the student and his/her parents where supplies of fast acting sugar can be kept in case of a hypoglycaemic episode.

The issue of close communication between parents and the School is fundamental to the care of students with diabetes, as many aspects of growth and development will have an impact on their diabetes control. It is the parents' responsibility to ensure that any medication retained at the School is within its expiry date. All diabetic students will require a Health Care Plan which parents or guardians should complete prior to starting at Rikkyo School. This will be kept with the student's file in the Health Centre. Following discussion with the student and his/her parents' individual decisions should be made as to whether to provide basic information on a student's condition to his/her peer group so that they are aware of their classmate's needs.

Managing students with diabetes

- All staff at Rikkyo School are aware of those students under their supervision who have diabetes. A list with all diabetic students and where the medication is available **is shared with relevant staff**
- Games staff will ensure that all students with diabetes have dextrose tablets with them (and their emergency medication and blood glucose monitoring kit) prior to commencement of a session.
- All of our staff will ensure that they have some knowledge of what to do if a student has a hypoglycaemic episode or a hyperglycaemic episode. (Staff to seek advice from the School Health Professional for training).
- If a student feels unwell, the School Nurse or First Aider will be contacted for advice.
- A student will always be accompanied to the Health Centre if sent by a member of staff.

Away trips: A member of staff trained in the administration of medication will always accompany the trip, taking responsibility for the safe storage of students' medication, if the students cannot carry it themselves (See Health Care Plan). Staff supervising the trip will be aware of the student's condition and of any relevant emergency procedures.

Issues which may affect learning: Students with diabetes should have no difficulties in accessing all areas of the curriculum including sporting activities which are energetic. However, as all forms of strenuous activity use up glucose there are some simple precautions to follow in order to assist a student with diabetes in maintaining an adequate blood glucose level: Encourage the student to eat or drink some extra sugary food before the activity, have glucose tablets or a sugary drink readily available in case the student displays symptoms of hypoglycaemia, after the activity is concluded, encourage the student to eat some more food and take extra fluid - these additional snacks should not affect normal dietary intake.

What do in an emergency if a student has a hypoglycaemic (low blood sugar) episode

Common causes:

A missed or delayed meal or snack, extra exercise, too much insulin during unstable periods, the student is unwell or the student has experienced an episode of vomiting.

Common symptoms are:

- Hunger, drowsiness, glazed eyes, shaking, disorientation, lack of concentration, sweating

i. Get someone to stay with the student - call for the School Nurse / First Aider/ambulance (if they are hypo, do not send them out of class on their own, their blood sugar may drop further and they may collapse.

ii. Give fast acting sugar immediately (the student should have this), e.g.:
Lucozade, fresh orange juice, sugary drink, e.g. Coke, Fanta, glucose tablets, honey or jam, 'Hypo Stop/Glucogel' (discuss with parents / houseparent's whether this should be taken on trips off site)

iii. Recovery usually takes ten to fifteen minutes.

iv. Upon recovery give the student some starchy food, e.g. couple of biscuits, a sandwich.

v. Inform the School Nurse and parents of the hypoglycaemic episode.

NB. In the unlikely event of a student losing consciousness, call an ambulance (112 or 999) and the School Nurse / First Aider.

A hyperglycaemic episode (high blood sugar)

Hyperglycaemic episodes occur when the blood glucose level is too high. Students may display the following symptoms:

- Excessive thirst, passing urine frequently, vomiting, abdominal pain
- A change of behaviour

Care of students in a hyperglycaemic episode:

- Do not restrict fluid intake or access to the toilet
- Contact the School Nurse and/or parents if concerned.

In both episodes, liaise with the School Nurse / First Aider about contacting the student's parents/guardians.

Annex E: Stroke

What is a Stroke? A stroke is a life-threatening emergency. It happens when the blood supply to part of the brain is cut off, this in turn kills brain cells and can cause brain damage. This damage to the brain can affect how the body moves, your emotions and how you think. The effects of a stroke depend on where it takes place in the brain, and how widespread the damaged area is. There are three types of stoke ; Ischaemic stroke, Haemorrhagic stroke and Transient ischaemic attack or TIA.
Strokes can occur across all ages

What are the Symptoms of Stroke?

If stroke is suspected think FAST:

- **F**acial weakness**:** Can the person smile? Has their mouth or eye drooped?
- **A**rm weakness**:** Can the person raise both arms?
- **S**peech problems**:** Can the person speak clearly and understand what you say?
- **T**ime to call 112 or 999**:** if you see any of these signs.

Hemiplegia: Hemiplegia is a condition caused by brain damage or spinal cord injury that leads to paralysis on one side of the body. Children with hemiplegia may also take longer to reach developmental milestones than their peers. They may also use only one hand when playing or keep one hand in a fist.
If any children with Hemiplegia are admitted into the School, it will be ensured they have a Healthcare Plan

Annex F: Cleaning up body fluids from floor surfaces

Spillage kits are located in the Health Centre. After approximately ½ an hour sweep up the Sanitaire and dispose of in a yellow waste

bag. Take to the Health Centre for disposal. The area will be disinfected with diluted Distal (made up freshly as required- 1-part Distal to 9 parts water). All surfaces in the area must be treated with Distal to reduce the risk of spread of infection by droplets. Soiled clothing/ bedding to be put into a plastic bag, sealed and sent to be thoroughly washed and returned to the boarding house. Inform a member of the Cleaning staff of the spillage is on a carpet so they can be steam cleaned and all areas cleaned with a disinfectant solution.

All staff managing any spillages will ensure that:

- all cuts and lesions are covered with a waterproof dressing;
- personal protective equipment (PPE) e.g. disposable gloves and apron and wear eye/face protection is donned if there is a risk of splash;
- the most appropriate product is used for the spillage;
- all products are in date and replenished after use;
- hands are decontaminated using soap and water/hand wipes or hand rub if not visibly contaminated.

Bleeding and blood spillages: Anyone dealing with a student who is bleeding will:

- wears gloves at all times that there is a risk of contact from blood;
- avoid blood coming in contact with any cuts or open abrasions of the skin;
- avoid contact with oral and mucus membranes and eyes. - if there is any contact then these will be flushed immediately with water and the gp contacted if there is any risk of transfer of infection.
- blood injury during sport- student to be taken off and treated and wound covered prior to be allowed to continue if appropriate.
- any wounds/cuts/abrasions should be covered at all times when dealing with students to avoid infection being transferred.

Annex G: RIDDOR

(Reporting of Injuries, Diseases and Dangerous Occurrences Regulations, 2013)

The School will report work-related deaths, specified injuries, occupational diseases and dangerous occurrences to the Health and Safety Executive where required under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR). The School will determine reportability by reference to current HSE guidance https://www.hse.gov.uk/riddor/index.htm

The nature of the work, the hazards and the risks: The following table, compiled using information from the Health & Safety Executive, identifies some common workplace risks and the possible injuries that could occur:

Risk	**Possible injuries requiring first aid**	**Assessed risk to employees, students and visitors/contractors**	**Remarks**
Manual Handling	Fractures, lacerations, sprains and strains (mainly pertains to kitchen/cleaning and maintenance staff).	Low	Never perform MH unless trained to
Slip and trip hazards	Fractures, sprains and strains, lacerations. (mainly students)	Low	Always assess environment for risk
Machinery	Crush injuries, amputations, fractures, lacerations, eye injuries – there are very few machines within the School which are capable of causing amputations and fractures.	Low	

Work at height	Head injury, loss of consciousness, spinal injury, fractures, sprains and strains – working at heights is restricted to adults, below one metre an adult can work alone; over one metre a full-size ladder or scaffold tower is used with 2 or more people present at all times.	Low	
Risk	**Possible injuries requiring first aid**	**Assessed risk to employees, students and visitors/contractors**	**Remarks**
Workplace transport	Crush injuries, fractures, sprains and strains, spinal injuries – it is unlikely that workplace transport injuries will occur as the minibus is only used for people carrying.	Low	
Electricity	Electric shock, burns – all hardwiring is tested every 5 years and PA 100% every 3 years, there is also an annual visual H&S self-audit which should identify any shortcomings and these would then be rectified, couple to this is the appointment of H&S reps who are responsible for monitoring all H&S maters within their area of responsibility.	Low	Ensure all testing is compliant do not use any equipment within School that has not been tested.
Chemicals	Poisoning, loss of consciousness, burns, eye injuries – all chemicals are kept under lock and key and their issue and use is supervised by qualified adults/personnel.	Low	Refer to COSHH

Part B - Administration of Medications: Protocol and Practice

COVID-19: Please refer to the Management of General Health and (Suspected) Cases of COVID-19 Procedure along with our risk assessments. Please note that this policy is subject to adaptation under COVID-19 measures, where government guidance is applicable to the situation and there is a risk to staff or students. At all times, the safety of students and staff is paramount. Details will be issued in line with the current situation as it changes. As COVID-19 presents a low risk to children and young people, combined with high vaccination rates in the population, there are no longer specific rules relating to it in schools, colleges, childcare and other education settings. There are now no COVID restrictions implemented by the UK government.

Provisions: There is a designated Health Centre in the School (that mirrors the provision in the boarding house). The Health Centre is open when a School Nurse or Matron is on-site from 8:00-20:00. The AED is kept in the entrance to the Admin building, the Allergy response kits, Asthma inhaler kits and Acid attack response Kit are held in the Admin Building in the event of an emergency.

A stock of over the counter (OTC) medications is kept in the Health Centre along with dressings, plasters. The controlled drug cabinet and record book are also kept in the Health Centre. First Aid Kits are available around the School site, a plan of which is available from the School office or see First aid policy.

Guidance: Most students and young people will at some time have a medical condition that may affect their participation in School activities. For many, this will be short term; perhaps finishing a course of medication. Other students have medical conditions that, if not properly managed, could limit their access to education. Such students are regarded as having long term medical needs. The majority of students with medical needs can attend School regularly and, with some support from Rikkyo School staff, can take part in most normal School activities. However, School staff may need to take extra care in supervising/making adaptations to some activities to make sure that these students, and others, are not put at risk.

Students with medical conditions are encouraged to take an active role in managing their condition and to feel confident with the support they receive from School staff to help them do this. Rikkyo School aims to be an inclusive environment for all students including those with a medical condition for all School activities, wherever possible. Parents of students with medical conditions should feel secure with the care their children receive at Rikkyo School. The School ensures all staff understand their duty of care to students and are confident in knowing what to do in an emergency.

Rikkyo School understands that certain medical conditions are serious and can be potentially life-threatening, particularly if poorly managed or misunderstood. Staff receive regular training on the impact and management of medical conditions and the effect this can have on students psychologically. The Medical Protocol and Practice Policy is understood and supported by the whole School community. An Individual Health Care Plan (IHCP) if required, helps to identify the necessary safety measures to support students with significant medical needs and ensure that they and others are not put at risk. These will be drawn up in consultation and partnership with the Parent/Guardian/Carer.

Roles and Responsibilities: Parents/carers have prime responsibility for their child's health and should provide Rikkyo School with appropriate, relevant information to allow the School to act in their child's best interests. Information will be provided at enrolment on the medical questionnaire, but any changes must be notified to the School as soon as possible. Rikkyo School aims to work together with appropriate bodies to ensure students with medical needs are supported, as well as to provide appropriate support to School staff. Where it is felt that a formal referral (other than on Child Protection grounds) should take place, the School will seek Parent/Guardian/Carer consent and this will be coordinated by the Head of Health and Wellbeing.

Our School's Anglo Japanese Executive Committee **fulfil their responsibility to:**

- ensure the health and safety of their employees and anyone else, on the premises or taking part in school activities (this includes all students). this responsibility extends to those staff and others leading activities taking place off-site, such as visits, outings or field trips;
- ensure health and safety policies and risk assessments are inclusive of the needs of students with medical conditions;
- make sure the medical protocol and practice policy is effectively monitored and evaluated, and regularly updated;
- report to parents, students and school staff about the successes and areas for improvement of Rikkyo school's medical protocol and practice policy
- ensure the school has a robust system for dealing with medical emergencies and critical incidents any time students are off-site or on field trips; and

- adhere to the children's and families act 2014 while making arrangements for supporting students with medical conditions.

The Chair of the UK Board of Governors and the Senior Management Team will:

- ensure the school is inclusive and welcoming and that the medical protocol and practice policy is in line with local and national guidance and policy frameworks.
- liaise between interested parties including students, school staff, pastoral support/welfare, teachers, school nurses, parents, and local emergency care services.
- ensure the policy is put into action, with good communication of the policy to all.
- ensure every aspect of the policy is maintained.
- ensure that information held by the school is accurate and up to date and that there are good information sharing systems in place.
- ensure students confidentiality (see note below).
- assess the training and development needs of staff and arrange for them to be met.
- ensure all supply teachers and new staff know the Medical Protocol and Practice policy.
- monitor and review the policy at least once a year, with input from the Governors, students, parents and staff, and in accordance with review recommendations and recent local and national guidance and legislation.
- ensure records are maintained in accordance with the regulations and standards.

All Rikkyo School staff **have a responsibility to:**

- hold, and renew as appropriate, a current First Aid Certificate including medical emergencies.
- be aware of the potential triggers, signs and symptoms of common medical conditions and know what to do in an emergency.
- understand the School's medical protocols.
- know which students in their care have a medical condition and if necessary be familiar with the content of the student's Individual Health Care Plan (IHCP).
- allow all students to have immediate access to their emergency medication.
- maintain effective communication with parents including informing them if their child has been unwell at School.
- ensure students who carry their medication with them have it when they go on a School visit or out of the classroom.
- know the telephone numbers of the School senior leadership team and School nurse if there is a need to seek assistance in the event of an emergency.
- be aware of students with medical conditions who may be experiencing bullying or need extra social support.
- understand the common medical conditions and the impact they can have on students (students should not be forced to take part in any activity if they feel unwell).
- ensure all students with medical conditions are not excluded unnecessarily from activities they wish to take part in.
- ensure students have the appropriate medication or food with them during any exercise and are allowed to take it when needed.
- follow universal hygiene procedures if handling bodily fluids.

Teaching staff **also have a responsibility to:**

- ensure students who have missed School due to medical reasons are given every opportunity to catch up on missed School work;
- be aware that medical conditions can affect a student's learning and provide extra help when students need it in liaison with the SENCO;
- liaise with parents and/or the student's Health Care professionals if a child is falling behind with their work because of their condition;
- use opportunities such as PSHEE and PE to raise awareness to students about the impact of medical conditions and health.

The School Nurse has a responsibility to**:**

- help update the School's Medical Protocol and Practice and First Aid policies;
- help provide regular training for School staff in managing the most common medical conditions at School;
- generate, update and circulate IHCPs for students, as appropriate, (to include signs and symptoms and emergency medical procedures for those with known conditions);
- oversee the day-to-day health care of students when in the School's care;

- ensure School staff are informed about any student with a condition or disability that might lead to their being placed at risk in certain activities, e.g. defects of vision or hearing, epileptics, diabetics, asthmatics, etc;
- ensure teaching, pastoral and kitchen staff are notified of significant allergies, e.g. nut allergy;
- ensure that students' medication is within expiry dates;
- provide information about where the School can access specialist training;
- complete update training as required in order to maintain RCN/NMC registration.

First aiders at Rikkyo School have a responsibility to:

- **be aware of the location of first aid kits;**
- give immediate help to casualties with common injuries or illnesses and those arising from specific hazards with the school;
- when necessary ensure that an ambulance or other professional medical help is called;
- ensure their training is updated as appropriate;
- be aware and adhere to the First Aid policy.

Pastoral support/welfare staff at Rikkyo School **has the responsibility to:**

- know which students have a medical condition and which have special educational needs because of their condition;
- ensure all students with medical conditions are not excluded unnecessarily from activities they wish to take part in.

Please note, there is no legal duty that requires teaching staff to administer medication; this **is a voluntary role.** Teachers' conditions of employment do not include giving medication or supervision of a student taking it, although staff may volunteer to administer medication in exceptional/emergency circumstances where the School nurse is unavailable or whilst on a School trip, after receiving appropriate training.

If staff follow the Schools' procedures, there is an indemnity for them should there be unforeseen complications as a result of undertaking an agreed procedure. First Aiders supervise students taking medication and record it. They do not administer it unless they have been trained to do so e.g. AAI's. Health Care Plans (IHCPs) are drawn up by the Nurse for students with significant medical needs (e.g. AAI users). Training is given to teaching and support staff and is updated annually, along with the IHCP, with Parent/Guardian/Carer consent. IHCPs are on students iSams record and available to review.

The students at Rikkyo School have a responsibility to**:**

- treat other students with and without a medical condition equally
- tell their parents, teacher or nearest staff member when they are not feeling well
- let a member of staff know if another student is feeling unwell
- let any student take their medication when they need it, and ensure a member of staff is called
- treat all medication with respect.
- never share or swap medicines.
- know how to gain access to their medication in an emergency.
- ensure a member of staff is called in an emergency situation.

The parents have a responsibility to ensure**:**

- that on enrolment, the school has a complete and up-to-date medical questionnaire for their child, including details of medical conditions, allergies, vaccinations, medications etc;
- that the school is promptly made aware of any changes to their child's health, medical condition or medications;
- the school is provided with in date prescription medication in its original packaging and labelled accordingly along with a doctor's letter explaining why it is required, how it is administered and in what dose;
- that an appropriate future supply of prescription medication is made available or that the school are advised how to obtain it in consultation with the student's GP;
- to ensure that day and boarding students do not bring non-prescription or over-the-counter medicines into the school or acquire them without strict prior approval from and arrangement with the school nurse. where these medicines are required they will be dispensed by the school nurse;
- regular dental checks are carried out during the holidays with the family dentist;

- a parent/guardian/carer is available to be contacted in the event of a medical emergency.

Administration of Medication: The School has clear guidance on the administration of medication at School. A Student's emergency medication is readily available to those who require it at all times during the School day or at off-site activities. Staff administering medication are appropriately trained and certified to do so and have completed Opus online training (Medical Awareness course for school).. No student under 16 will be given any medication without written Parent/Guardian/Carer consent.

Prior to administration, the following will be checked:

- the student's name,
- the student's date of birth
- the written instructions provided by parents/guardian or doctor
- the prescribed dose
- the last time the student had the medication
- the frequency of the medication
- the route of administration
- any allergies or existing medical conditions that may contradict the medication
- the expiry date of the drug
- the circumstances in which the drug is to be administered
- their own ability/training needs to administer the drug
- the possible side effects of the drug and what to do if they occur.

Drug Errors/Incorrect Administration of Medicine: In the event of a mistake being made when administering medication, the School's Medical Officer should be informed. A record of the error, the circumstances and any actions taken should be documented in the individual's care notes and incident book. If the individual becomes unwell or is unconscious the emergency services should be called.

Consent to Administer Medicines: Parental consent for the School to administer both prescribed and non-prescribed medications is requested on the Medical Questionnaire and Permission Form completed at enrolment; please see the section below on 'Record Keeping' for further details. Medicines will only be accepted for administration if they are:

- prescribed (see also section below regards non-prescribed medications);
- in-date;
- labelled (with the student's name);
- provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage. (the exception to this is insulin which must be in date but will generally be available inside an insulin pen or pump, rather than in its original container);
- accompanied by a letter from a doctor.
- **licensed and approved for use in the UK** Medication obtained in Japan or another country that is **not licensed or approved for use in the UK** can not be administered by the Health Centre until it has been reviewed and specifically approved by the School's Medical Officer.

Self-Administration of Medication: When students who are over 16 request to self-administer medicines, they are encouraged to do so. Students under 16 years of age need parents' permission to self-administer medicine. The student is required to sign a self-administer form wherein they agree to keep all medications (except emergency medicine: i.e. salbutamol, AAI) in a locked drawer in their room. Failure to comply with self-administration of medicine rules will result in their right to self-administer medicine being withdrawn. Risk assessments and the 'Gillick Competence method' will be used by Health Centre staff to check students' competency when required.

If a Student wishes to bring medication from overseas: Any medication brought into the School from overseas should be accompanied by the original doctor's prescription in English and a follow-up letter from the Parent/Guardian/Carer permitting for their child to take this in the UK. Most importantly, the drug must be licensed in the UK. If not, a UK equivalent should be sourced which must be verified by a UK doctor. Any medicines from overseas must be brought into the UK in their original packaging and must name the recipient. Where medication does not fulfil these criteria, it will be retained by the School Nurse and returned to the Parent/Guardian at the end of term. The School Nurse will collect and manage the administration of all such medication.

Drug Storage and Administration:

Controlled Drugs: Some prescription medicines are controlled under the Misuse of Drugs legislation in the UK (and subsequent amendments). These medicines are called controlled medicines or controlled drugs. The Misuse of Drugs Regulations 2001 has a full list of controlled medicines, see: http://www.legislation.gov.uk/uksi/2001/3998/schedule/1/made. Medications within this category commonly used in Schools include drugs used in the treatment of Attention Deficit Disorder ADHD. If a student is prescribed a drug which is a controlled drug, a Controlled Medications Form should be completed, supported where possible by a doctor's letter detailing diagnosis, medications, frequency, dose, route and when to administer. The name and address of the prescribing physician must appear on the students' Controlled Medications form. If there is any doubt about the nature of the medication, the GP is consulted about the appropriate action to take. Any controlled drug which needs to be administered will be stored in a locked cabinet within the main locked cabinet in Health Centre. The key to this must be held in a secure key safe. When administering, two members of staff, who have received training in 'Over the counter medicine training' must witness and also sign in the 'Controlled Drug Register' to record the dosage, time and other details necessary such as how much of this drug remains. In the instance that any controlled medication must be chilled, this will be locked in the Health Centre fridge. Additionally, each week two members of staff (one of whom will be the School Nurse), who have received training in 'Over the counter medicine training' (see below), must carry out a weekly stock check of how much of each controlled drug remains, which should match the records in the controlled drug book. This check should be signed and dated by both members of staff. If any discrepancies are found, these should be reported to the Nurse and escalated to the Bursar, who will safeguard the incident, along with contacting the police. When new medicines come into the School, they must be checked, counted (if controlled) by two people and added into the Controlled Drug Register detailing the student's name, medication name, dosage, lot number, expiry date, quantity. If controlled drugs leave the premises, these must be counted out and signed out of the book to show that the School no longer has responsibility for this drug. Parents are urged to collect all unused controlled drugs for their child when no longer needed. It is recommended that the School only store 30 days' worth of medication. All students' own medication is recorded on iSams under the student's record.

Prescription Only Medication (POM): All prescription medication which is bought onto the School premises will be stored in the locked cabinet within the Health Centre. They must come in the original packaging, in the student's name, with clear instructions as to the dosage and instructions for administration. A Medication Consent form must be filled in by parents/guardians/carers before administration. Medication will be recorded in the Health Centre room as per the type, amount and expiry date. Any POM will be administered to students only by the Registered Nurse on-site. If the nurse is unavailable it can be given by the advanced first aiders who have undertaken the medication training. In the instance that any prescription medication must be chilled (for example insulin), this will be locked in the Health Centre fridge.

Non-Prescription or Over-the-Counter Medicines (OTC) inclusive of those issued as first aid: Any OTC medication which is bought onto the School premises will be stored in the Health Centre. They must come in the original packaging, in the student's name, with clear instructions as to the dosage and instructions for administration. A Medication Consent form must be filled in by parents/guardians/carers before administration. Medication will be recorded in the Health Centre as per the type, amount and expiry date. OTC administered to students will be given only by the Registered Nurse on-site; if unavailable it can be given by the advanced first aiders who have undertaken the medication training.

Adequate supplies of non-prescription or over-the-counter medication are kept in the **Health Centre** to be administered to students by the School Nurse as required. Appropriately trained boarding staff will administer this medication if the Nurse is unavailable at any time. If a Boarder urgently requires any medicine we do not have on site we can speak with a Doctor Health Centre or pharmacy to source this. Therefore we request that Boarders do not arrive at the School in possession of any of this medication (e.g. paracetamol, ibuprofen, antihistamine).

Alternative Remedies and Supplements: Alternative, homeopathic medicines and supplements are allowed as long as they are accompanied by instructions for dosage in English. These remedies and supplements will be treated the same as any other medication. They must be declared to the School Nurse who will review and approve as appropriate. If approved, they must be stored in the lockable space in boarder's rooms. The School reserves the right to refuse permission for any Boarder to keep remedies and supplements.

Refrigerated medicines:

- all refrigerated medication is stored in an airtight container and is clearly labelled;
- refrigerators used for the storage of medication are in the Health Centre, inaccessible to unsupervised students;
- the drug fridge must be kept locked and regular checks of its temperature recorded. if the temperature is outside the normal

limit (2-8°c) this will be reported to the school nurse.

Asthma, Anaphylaxis, Epilepsy, and Diabetes Medication: In the cases where students require specific medicines for epilepsy, diabetes, anaphylaxis or asthma, this medication will be kept on the student at all times, who will self-administer if deemed Gillick Competence, or will be supported by a Nurse/first aider. Medication for students who are non-competent is kept in the Health Centre. Spare AAI and inhalers can be found **at Reception**.

- **Asthma:** All children with Asthma will have an IHCP. These students are encouraged to carry and take responsibility for their own Salbutamol inhaler; if this is not appropriate the Health Centre will hold one for them. The School holds spare Salbutamol Inhalers for emergency situations such as in the event of a student forgetting an inhaler and to take on fixtures, however, these can only be used on students with a diagnosis of Asthma and written consent from parents/guardian/carer. The emergency inhalers should only be administered by the School Nurse/ Advanced first aiders.
- **Anaphylaxis**: All children with Anaphylaxis will have an IHCP. All students will carry their own medication at all times. The School holds spare AAI for emergency situations such as in the event of a student forgetting an AAI, however, these can only be used on students with a diagnosis of Allergy and written consent from parents/guardian/carer. AAI can be administered by anybody, but the patient should be encouraged to administer it themselves if they are able.
- **Epilepsy:** All children with Epilepsy will have an IHCP. These students are encouraged to carry and take responsibility for their own rescue medication; if this is not appropriate the Health Centre will hold one for them. All staff working with students with Epilepsy will be trained on dealing with seizures and the administration of rescue medication.
- **Diabetes:** All children with Diabetes will have an IHCP. These students are encouraged to carry and take responsibility for their own diabetic medication including Glucose I; if this is not appropriate and Health Centre will hold one for them. All staff working with students with Diabetes will be trained on dealing with and recognising diabetic emergencies and the administration of rescue medication.

Safe disposal:

- if students do not pick up their medication at the end of the term, parents/guardians/carers are to be contacted via email;
- any expired medication is to be taken to a pharmacy for disposal by the nurse and iSams updated;
- the nurse is responsible for checking the dates of medication and arranging for the disposal of any that have expired;
- sharps boxes are used for the disposal of needles. All sharps boxes in Rikkyo school are stored in a locked cupboard unless alternative safe and secure arrangements are put in place on a case-by-case basis;
- if a sharps box is needed on an off-site or residential visit, a named member of staff is responsible for its safe storage and return to a local pharmacy or the school or the student's parent/guardian/carer;
- collection and disposal of sharps boxes are arranged with the local authority's environmental services.

Medical Procedure for Student injured in the Sports Hall during Physical Education: If a student is injured playing sports in the Sports Hall or on the playing field, the PE teacher will decide if the student is fit to return to the sporting activity or further assessment is required from the nurse. If the injury requires checking by the nurse, the PE teacher can either:

- release a member of staff to escort the student to the Health Centre or
- call the Health Centre and ask for the nurse to come to the scene

If the nurse is not available and the PE teacher cannot release a staff member, the SMT should be called to look after the injured student. Under no circumstances should an injured student be left to make their own way (without a member of staff) to the Health Centre, even if accompanied by other students. The PE teacher will complete an accident form.

Emergency Procedures: In the case of a severe accident or incident, the School Nurse or First Aider will be called. The situation will be assessed. The School office will also be made aware of the problem and if not already carried out at the incident, an ambulance called from there. The School's responsibility ceases as the student is entrusted to the care of the NHS ambulance personnel, however, should the casualty be taken to hospital, they will be accompanied by one member of staff and take the student medical file. At the hospital, the doctor must be asked for notes on the hospital visit form and also a printout of the prognosis if possible. A member of the School staff cannot permit any treatment at A&E; the hospital staff will decide on questions like blood transfusions, haemophilia etc. In all cases, parents/guardians/carers will be contacted as soon as possible.

Student Consent to Treatment: A student's ability to consent to, or refuse, medical treatment is acknowledged by the School. This is judged on "Gillick competency" and not age. If a student is not deemed 'competent', parental consent or the consent of a person with parental responsibility is required, unless it is an emergency. Children under 16 years of age are not automatically assumed to be legally competent to make decisions about their health care but will be deemed competent to give valid consent to a particular intervention if they have "sufficient understanding and intelligence to enable them to understand fully what is proposed". Consent is a patient's agreement for a Health Care professional to provide treatment or care and may be indicated non-verbally, orally or in a written format.

Prevention of Spread of Illness/Medical Exclusion: Rikkyo School follows the guidelines in 'The Spotty Book (notes on Infectious Diseases in Schools)' published by NHS England when recommending exclusion from School. If a student has suffered vomiting and/or diarrhoea they should be kept off School. Students with these conditions should only return 48hours after their symptoms disappear. Most cases of vomiting or diarrhoea get better without treatment, but if symptoms persist, parents are advised to consult their GP. Parents are advised that if a child has a raised temperature they should remain off School until their temperature has returned to normal for 24hours and they are feeling fully improved. Further information about preventing the spread of disease or illness can be found above in 'Hygiene/Infection Control/HIV Control' in Part A of this Policy.

Notifiable Diseases: Where School staff are made aware of a notifiable disease amongst either staff or students or where there is an outbreak of infectious disease the Chair of Governors will contact the local Health Protection Team as appropriate. The HPT can advise on the circumstances in which students with infectious diseases or illness should not be in School, and the action to be taken following an outbreak of an infectious disease or illness. (See Appendix 2 for full list).

Allergic Reactions: Severe allergic reactions are relatively rare and most commonly caused by only a handful of foods. The following food allergens have been identified as public health concerns in the UK:

- Peanuts
- Lupin
- Fish/Shellfish/Crustaceans
- Molluscs
- Sesame
- Eggs
- Milk
- Tree Nuts
- Gluten
- Soya
- Celery
- Mustard
- Sulphites

Symptoms of allergic reactions may vary. There can be an itching or swelling in the mouth, or an itchy rash all over the body. The person affected may feel sick and may actually be sick, although remember that other conditions can also cause vomiting. The initial symptoms may not be serious in themselves, but the students should be watched very carefully in case the situation becomes worse. Symptoms usually occur after seconds or minutes and may progress rapidly. Occasionally they are a few hours after contact with the allergenic food or substance. Serious symptoms include a severe drop in blood pressure, where the person affected goes weak and floppy; severe asthma; or swelling that causes the throat to close. This is a medical emergency. Details on anaphylaxis (a severe allergic reaction) can be found above in the Annex of Part A of this Policy.

Student Return after Illness: Children vomiting and/or with Diarrhoea should only return 24-48hours after their symptoms disappear, at the nurse's recommendation. If a child has a raised temperature they should remain off School until their temperature has returned to normal for 24hours and they are feeling fully improved.

Weekly Stock checks: Stock taking as is appropriate will take place in the Health Centre and as medication is given A weekly stocktake will be done by the Nurse and a trained witness in the Health Centre, of Controlled Drugs, Prescription medicines and over the counter medicines.

Record-Keeping: The School has clear guidance about record-keeping**:** Records are kept of any medication or treatment administered to a student or member of staff, whilst under the care of the School and the Headmaster is aware of the system. Records are kept of all accidents and are recorded on an accident form. For each visit, a log is kept on iSAMS including any medication that is administered. RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013) reported as necessary. The School has written protocols for the administration of medication and policies for asthma, diabetes, epilepsy and anaphylaxis. The School records contemporaneous non-NHS medical records for all students, which are liable for inspection and monitoring.

Medical Records are kept up to date and are stored in a locked filing cabinet. At present all the School's medical records are handwritten. Day to day medication given to students is recorded on the iSAMS Medical system which is linked to each individual student. These items are kept locked away at night and during the day. The Health Centre is locked when it is left unattended. The students' NHS records are kept at Rudgwick Health Centre on a computer, but there is no electronic link. At present those records are not available to the School, but can be made available should the need arise. Significant accidents, especially those that might have been preventable, will be documented in an Accident Report. An accident form will be completed by the first aider on the same day or as soon as possible after an incident resulting in an injury. As much detail as possible should be supplied when reporting an accident. The staff accident book is kept in the reception area and all staff are aware of its location. The student accident records are held in the Health Centre. The purpose of this is to identify avoidable risks so that appropriate action can be taken by the schools' Health and Safety committee, which meets termly. Records held in the first aid and accident book will be retained by the school up to the student's 21st birthday or 3 years which ever is soonest.

Enrolment forms/Medical Questionnaire/Parental consent records: Parents/guardians/carers of students wishing to attend the School are required to complete a Medical Questionnaire and Permission Form as part of the enrolment form. This questionnaire asks about past medical history, existing medical conditions and known allergies. Parents should update the School as necessary with any changes, including any Health Centre, injuries or current medications being taken.

If a student requires regular prescribed or non-prescribed medication at the School, parents are asked to provide consent on their child's Permission Form giving the student or staff permission to administer medication on a regular/daily basis, and in an emergency, if required. The medical questionnaire also asks parents to confirm whether their child can manage, carry and administer their own emergency medication and for permission to share student details with medical professionals or third parties, if appropriate.

Health Plans – Information: If students have specific long-term conditions, such as Asthma or an allergy, these conditions will be recorded on the student's health plan and will be issued to the relevant school departments so that staff are aware of students' needs. Additionally, if a student is suffering from mental health problems, a mental health plan will be drawn up to support the student with appropriate provision. These plans will remain in iSams, where staff can view if required.

Individual Health Care Plans (IHCPs): The School will generate a Health Care Plan for students identified as having a long-term medical condition. The IHCP will record important details about individual student medical needs at School; their triggers, signs, symptoms, medication, other treatments and emergency actions. Further documentation can be attached to the Individual Health Care Plan is required. If students have specific long-term chronic conditions, such as asthma or an allergy (see above), these conditions will be recorded on the student's Individual Health Care Plan and will be issued to the relevant School departments so that staff are aware of students' needs. This IHCP is written with advice from the student's Health Care professionals, such as consultants, ad/or specialist nurses. Additionally, if a student is suffering from mental health problems, a Mental Health Plan will be drawn up to support the student with appropriate provision. These plans will remain in the First Aid Health Centre, where staff can view if required.

When generated, a copy of the student's Individual Health Care Plan, accompanied by an explanation of why and how it is used, is sent to the student's parents. This is sent:

- at enrolment;
- at the start of the term;
- when a diagnosis is first communicated to the School.

Ongoing communication and review of Individual Health Care Plans: Parents are regularly reminded to update their child's Indivudal Health Care Plan. The School will inform parents if a student has a medical emergency or if there have been changes to their symptoms (getting better or worse), or their medication and treatments change. Every student with a Health Care Plan has their plan discussed and reviewed.

Use of Individual Health Care Plans: Individual Health Care Plans are used by the School to:

- Inform the appropriate staff about the individual needs of a student with a medical condition in their care
- Remind students with medical conditions to take their medication when they need to and, if appropriate, remind them to keep their emergency medication with them at all times
- Identify common or important individual triggers for students with medical conditions at School that bring on symptoms and can cause emergencies. This information is used to help reduce the impact of common triggers

- Ensure that all medication stored at the School is within the expiry date
- Ensure the School's local emergency care services have a timely and accurate summary of a student's current medical management and Health Care in the event of an emergency
- Remind parents of students with medical conditions to ensure that any medication kept at the School for their child is within its expiry dates. This includes spare medication.
- Aid staff in an emergency of medical processes

Other record-keeping: the School keeps an accurate record of each occasion an individual student is given or supervised taking medication. Details of the supervising staff member, student, dose, date and time are recorded. If a student refuses to have medication administered, this is also recorded, and parents are informed as soon as possible. All of our staff who volunteer to administer medication are provided with training. The School keeps a register of staff that have completed the relevant training. An up-to-date list is kept of members of staff who have agreed to administer medication and have received the relevant training. The School ensures that the whole School environment is inclusive and favourable to students with medical conditions. This includes the physical environment, as well as social, sporting and educational activities.

Confidentiality: In accordance with the School Medical Officer's professional obligations, medical information about students, regardless of their age, will remain confidential. Students should be aware that they can discuss any matter with School Nurses in complete confidence. Medical information about students, regardless of their age, will remain confidential. However, in providing medical care for a student, it is recognised that, on occasions, the School Nurse or First Aiders will need to liaise with the Headmaster, Chair of Governors, other staff, parents, carers or guardians, or medical professionals, and that some information will need to be passed on as necessary; ideally with the student or parent's prior consent. However, in the rare event that the School Nurse/staff consider that it is in the students' best interests or necessary for the protection of the wider School community, a staff member may breach confidence and pass information without a student or parent's consent. Any breach of confidence would be discussed with the student first to explain why it is judged that the health of other students was at risk or why it was in the student's own interest to share the information.

Retention and Monitoring of Medical and First Aid Records

Records relating to first aid, medical treatment, medication administration, significant illnesses, accidents and injuries, parental permissions and individual healthcare plans will be maintained securely and confidentially.

Such records will be retained up to the student's 21st birthday or 3 years whichever is soonest and any applicable legal, regulatory, insurance and safeguarding requirements.

Medical and first aid records will be accessible only to those persons who require access for legitimate professional purposes, subject to the School's data protection obligations.

Relevant records will be regularly monitored by the Head of Health and Wellbeing and/or an appropriate senior member of staff to identify patterns, recurring concerns or circumstances in which changes to the School's welfare, health and safety or medical arrangements may be required.

Parent Contact: information regarding contact to parents/guardians of students who have been admitted to the sick room can be found above under this named section in Part A of this policy.

Vaccinations: Parents are asked to fill in immunisation records in the admission form. Health Centre staff will check students' vaccination records and encourage parents to up to date immunisation as advised by both the English and Japanese government prior to admission to the school. This is for the student's own protection and for that of other students. The School will make arrangements with the GP Surgery to provide the routine schedule of flu, HPV, Tetanus and MENACWY vaccines. Any requests outside of the primary schedule for students will be signposted to the appropriate professionals.

Health Promotion and Education: This is provided both informally by the School Nurse and via the School's Personal, Social, Health, Economic Education (PSHEE) and Citizenship programme. The minimum age for smoking and drinking in Japan is 20 years, and students are discouraged from breaking this law. We also operate a no smoking/ vaping policy on site. Where a member of staff suspects that a student is consuming alcohol, smoking, vaping, or taking illegal substances the Headmaster must be informed immediately He, or his Deputy, would then interview the student with the assistance of another member of staff, preferably one of the School's Health Centre staff, and a course of action would be agreed after consultation with the student's parents. Serious

transgression will result in at least temporary suspension from the School and, in the extreme, total exclusion. Sexual activity between students is forbidden, and would result in expulsion of both parties. The School's Independent Person is Mr Oiwa, whose telephone number is displayed prominently in each boarding house and is printed in the Student's Handbook. The School Matron gives advice on dental care and hygiene, and any questions asked on a one to one basis are answered clearly and honestly. Students are also given counselling if experiencing difficulties with School work, studies or friendships, or any other problems.

Promoting Healthy Lifestyles and Understanding Health Needs

The School will support students to understand their individual physical and mental health needs and to develop the knowledge and skills necessary to maintain healthy lifestyles.

Students will be encouraged, having regard to their age, maturity, individual needs and understanding, to participate in decisions concerning their healthcare and to develop increasing responsibility for managing their own health.

Through the Health Centre, PSHEE programme and wider pastoral provision, students will be provided with appropriate information and education to enable them to make informed decisions about their physical health, mental health and emotional wellbeing.

Students with long-term medical conditions will be supported to understand their condition, recognise relevant symptoms and participate appropriately in the management of their condition, including the safe use of medication where applicable.

Social Interactions: Rikkyo School ensures that the needs of students with medical conditions are adequately considered to ensure their involvement in structured and unstructured social activities, including during breaks and before and after School. The School ensures the needs of students with medical conditions are adequately considered to ensure they have full access to extended School activities such as School discos, School productions, after School clubs and visits. All staff are made aware of the potential social problems that students with medical conditions may experience. Staff use this knowledge to try to prevent and deal with problems in accordance with the School's anti-bullying and behaviour policies. Opportunities such as personal, social and health education lessons are used to raise awareness of medical conditions amongst students and to help create a positive social environment.

Education and Learning: The School ensures that students with medical conditions can participate fully in all aspects of the curriculum and ensures that appropriate adjustments and extra support are provided. If a student is missing a lot of the time whilst at School, they have limited concentration, or they are frequently tired, all teachers understand that this may be due to their medical condition. Students are briefed as to what to do in the event of a medical emergency.

Exercise and Physical Activity: The School understands the importance of all students taking part in sports, games and activities for their social, mental and physical well-being. Most students with medical conditions can participate in extra-curricular sport or in the PE curriculum that is sufficiently flexible for all students to follow in ways appropriate to their own abilities. For many, physical activity can benefit their overall social, mental and physical health and well-being. Any restrictions on a student's ability to participate in PE should be included in their Individual Health Care Plan (IHCP). Some students may need to take precautionary measures before or during exercise and/or need to be allowed immediate access to their medication if necessary.

The School ensures that:

- all classroom teachers and pe teachers make appropriate adjustments to sports, games and other activities to make physical activity accessible to all students;
- all classroom teachers and pe teachers understand that students should not be forced to take part in an activity if they feel unwell;
- pe teachers are aware of the relevant medical conditions of students in their care and/or who have been advised to avoid or to take special precautions in particular activities;
- all PE and classroom teachers are aware of the potential triggers for students' medical conditions when exercising and how to minimise these triggers and action appropriate emergency plans (as detailed in the IHCP);
- all students have the appropriate medication or food with them during physical activity and take them when needed;
- all students with medical conditions are actively encouraged to take part in out-of- school clubs and team sports;

Hospital/Home Tuition: If a student is unable to attend School for a lengthy period due to a medical reason, the Headmaster will provide work for them to help ensure they do not fall behind.

Educational Visits: If appropriate, the School encourages children and young people with medical needs to participate in educational visits, whenever safety permits. Short-term medical needs can occur, in a situation where students are taking part in an educational

visit. On any educational visit, except those in the immediate vicinity e.g. inter-school matches etc, the Nurse will need to be asked to give their approval for the visit and indicate any special considerations, which will include medical needs. Sometimes the School may need to take additional safety measures for outside visits. Staff supervising excursions must always be aware of any medical needs and relevant emergency procedures. If staff are concerned about whether they can provide for a student's safety or the safety of other students on an educational visit, they should seek medical advice from the nurse. First Aid Kits and Traveling First Aid Kits are maintained and checked by the Nurse. Staff in charge of relevant departmental visits should check that they have the correct and sufficient First Aid materials.

Unacceptable Practice: As recommended by DFE 2015, and good standards of practice; although School staff should use their discretion and judge each case on its merits with reference to the student's IHCP it is not generally acceptable practice to:

- prevent students from easily accessing their inhalers and medication and administering their medication when and where necessary;
- assume that every student with the same condition requires the same treatment;
- ignore the views of the student or their parents; or ignore medical evidence or opinion (although this may be challenged);
- send students with medical conditions home frequently for reasons associated with their medical condition or prevent them from staying for normal School activities, including lunch, unless this is specified in their individual Health Care plan;
- if a student becomes ill, send them to the School office or Health Centre unaccompanied or with someone unsuitable;
- penalise students for their attendance record if their absences are related to their medical condition, e.g. hospital appointments;
- prevent students from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively;
- require parents, or otherwise make them feel obliged, to attend School to administer medication or provide medical support to their child, including with toileting issues. No parent should have to give up working because the School is failing to support their child's medical needs; or
- prevent students from participating or create unnecessary barriers to students participating in any aspect of School life, including School trips, e.g. by requiring parents to accompany their child.

Complaints: Any individual wishing to make a complaint about the School's actions in supporting a student with medical conditions should discuss this with the School in the first instance. If the issue is not resolved, then a formal complaint may be made, following the complaints procedure for the School.

Staff Medications and Medical Conditions: Any member of staff who is taking regular medications requiring administration during the School day must take individual responsibility to keep these medications secure and away from students. If a member of staff has any concerns about their medication they must seek advice from their own GP and inform the School Nurse (or Head). If the medication or the medical condition is likely to affect the staff members ability to fulfil their job role, the staff member should not come to School and must seek guidance from their doctor. It is recommended that any staff member undergoing invasive medical treatment such as chemotherapy notify the nursing team for support and guidance. If a female member of staff becomes pregnant during the course of her employment, it is suggested that they inform the School Nurse so they can be supported in the workplace and notified of any health concerns around the School that could affect them or their unborn child.

Staff can be provided with over-the-counter medications (OTCs) by the School Nurse. Staff are encouraged to complete details of medical issues and next of kin contact details, via an information form completed on arrival, and updated annually. These are stored securely and confidentially by the HR Officer for use in an emergencies

Appendix 1 – Daily and Weekly Routines

Stock Checks: There is a weekly stock check of all medicines (inclusive of controlled drugs, prescription medication and over the counter medicines) undertaken by the nurse and witnessed by a responsible adult.

Controlled Drugs:

- Controlled drugs are administered by the School nurse and one responsible witness;
- They are stored in the Health Centre in the locked controlled drugs cabinet, inside the main locked medicines cabinet;
- Their administration is recorded in the controlled drugs book.

Prescription medication:

- Prescription medication is administered in the Health Centre;
- They are stored in a locked medicine cabinet in the Health Centre;
- Their administration is recorded in the student's medical record notes on the medicine audit sheet.

Over the counter medicines:

- Over the counter medicines are kept in a locked medicine cabinet in the Health Centre;
- They are administered in the Health Centre;
- Their administration is recorded in the student's individual card and medicine audit sheet

Appendix 2: Medical Care

The Health Centre is open during the following hours:-

Monday- Friday 08:00-20:00
Saturday 08:00-16:00 & 17:00-20:00
Sunday 09:00-14:00 & 16:00-20:00

Outside of these times 'on call' staff can be contacted on the appropriate mobile number indicated outside the Health Centre.

Head of Health and Wellbeing		Melanie Brown – IHCD ambulance technician & In house first aid trainer
Designated Safeguarding Lead	-	Jennifer Overton
Assistant Health Centre Matron	-	Momoko Bandoh, Suzue Baba
Evening Duty staff	-	Samantha Munday, Jeanette Pearce, Donna Newby
Day Matrons (Boarding Houses)	-	Stephanie Croft, Jo Andrews, Wendy Wooldridge, Marie Marshall

School Medical Officer: Dr Mckenzie

The School is registered with Rudgwick Health Centre and the School's designated School Medical Officer is Dr McKenzie, who is a General Practitioner and has spent time in Japan, The School has readily available access to other practice doctors for consultation, which is part of the School's Agreement with Rudgwick Health Centre. If Dr McKenzie is not available, the Health Centre staff can speak to another doctor. All Japanese staff are registered with a local GP at Cranleigh Health Centre or Rudgwick Health Centre, and English staff with their own local practice, but the School Health Centre is open to them for day-to-day advice on minor ailments.

Doctors: Rudgwick Health Centre, Station Rd, Rudgwick, Horsham RH12 3HB
Tel: 01403 822103
111 (out of hours)

Dentist: Rudgwick Dental Practice, housed within Rudgwick Health Centre, Station Rd, Rudgwick, Horsham, RH12 3HB
Tel: 01403 822103
111 (out of hours)

Appendix 3: List of Notifiable Disease

EXCLUSION TABLE:

Infection	Exclusion period	Comments
Athlete's foot	None	Athletes' foot is not a serious condition. Treatment is recommended
Chickenpox	Five days from onset of rash and all the lesions have crusted over	
Cold sores (herpes simplex)	None	Avoid kissing and contact with the sores. Cold sores are generally mild and heal without treatment
Conjunctivitis	None	If an outbreak/cluster occurs, consult your local HPT
Diarrhoea and vomiting	Whilst symptomatic and 48 hours after the last symptoms.	Diarrhoea is defined as 3 or more liquid or semi-liquid stools in 24 hours
Diphtheria *	Exclusion is essential. Always consult with your local HPT	Preventable by vaccination. Family contacts must be excluded until cleared to return by your local HPT
Flu (influenza)	Until recovered	Report outbreaks to your local HPT
Glandular fever	None	
Hand foot and mouth	None	Contact your local HPT if a large number of students are affected. Exclusion may be considered in some circumstances
Head lice	None	Treatment recommended only when live lice seen
Hepatitis A*	Exclude until seven days after onset of jaundice (or 7 days after symptom onset if no jaundice)	In an outbreak of Hepatitis A, your local HPT will advise on control measures
Hepatitis B*, C*, HIV	None	Hepatitis B and C and HIV are blood-borne viruses that are not infectious through casual contact. Contact your local HPT for more advice
Impetigo	Until lesions are crusted /healed or 48 hours after starting antibiotic treatment	Antibiotic treatment speeds healing and reduces the infectious period
Measles*	Four days from onset of rash and recovered	Preventable by vaccination (2 doses of MMR). Promote MMR for all students and staff. Pregnant staff contacts should seek prompt advice from their GP

Infection	Exclusion period	Comments
Meningococcal meningitis*/ septicaemia*	Until recovered	Meningitis ACWY and B are preventable by vaccination (see national schedule @ www.NHS.uk).Your local HPT will advise on any action needed
Meningitis* due to other bacteria	Until recovered	Hib and pneumococcal meningitis are preventable by vaccination (see national schedule @ www.NHS.uk) Your local HPT will advise on any action needed
Meningitis viral*	None	Milder illness than bacterial meningitis. Siblings and other close contacts of a case need not be excluded.
MRSA	None	Good hygiene, in particular handwashing and environmental cleaning, are important to minimise spread. Contact your local HPT for more
Mumps*	Five days after onset of swelling	Preventable by vaccination with 2 doses of MMR (see national schedule @ www.NHS.uk). Promote MMR forall students and staff.
Infection	Exclusion period	Comments
Ringworm	Not usually required.	Treatment is needed.
Rubella (German measles)	Five days from onset of rash	Preventable by vaccination with 2 doses of MMR (see national schedule @ www.NHS.uk). Promote MMR for all students and staff. Pregnant staff contacts should seek prompt advice from their GP or midwife
Scarlet fever	Exclude until 24hrs of appropriate antibiotic treatment completed	A person is infectious for 2-3 weeks if antibiotics are not administered. In the event of two or more suspected cases, please contact local HPT
Scabies	Can return after first treatment	Household and close contacts require treatment at the same time.
Slapped cheek /Fifth disease/Parvovirus B19	None (once rash has developed)	Pregnant contacts of case should consult with their GP or midwife
Threadworms	None	Treatment recommended for student and household

Tonsillitis	None	There are many causes, but most cases are due to viruses and do not need an antibiotic treatment

*denotes a notifiable disease. It is a statutory requirement that doctors report a notifiable disease to the proper officer of the local authority (usually a consultant in communicable disease control). Health Protection Agency (2010) Guidance on Infection Control in Schools and other ChildCare Settings. HPA: London. PHE publications gateway number 2016692Crown Copyright 2017

Infection	**Exclusion period**	**Comments**
Tuberculosis (TB)	Always consult your local HPT BEFORE disseminating information to staff/parents/carers	Only pulmonary (lung) TB is infectious to others. Needs close, prolonged contact to spread
Warts and verrucae	None	Verrucae should be covered in swimming pools, gyms and changing rooms
Whooping cough (pertussis)*	Two days from starting antibiotic treatment, or 21 days from onset of symptoms if no antibiotics	Preventable by vaccination. After treatment, non-infectious coughing may continue for many weeks. Your local HPT will organise any contact tracing