First Aid Policy

Lochinver House School aims to ensure that every pupil, member of staff and visitor to the School is well looked after in the event of an accident, no matter how minor or major, by providing timely and competent administration of First Aid in line with national guidelines.

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The School has a Medical Centre located next to the School Office which is staffed by one full-time Registered General Nurse and one part time Teaching Assistant. The Medical Centre is open during the School day from 8am until 5pm and comprises a bed, nearby toilet and shower, hand washing facilities, lockable cabinets for medication, a sharps bin and a yellow bin for First Aid and wound debris. The School Nurse is contactable during these hours by dialling extensions 1003/1004 from any School internal phone. Outside of these hours assistance for pupils and staff

needing medical attention will be provided by Full Paediatric and First Aid qualified staff. A list of qualified First Aid staff is held by Emma Beckwith .

The Medical Centre has a well-resourced Treatment Room to look after pupils and staff until they recover and return to normal lessons or duties, or their parent or named carer arrives to take the pupil home. If a member of staff is taken ill during the working day they are required to see the School Nurse.

First aid training is provided to identified pupil facing members of staff, all staff in EYFS, all extended care Managers, and School Secretaries, members of the Site Team as well as a number of staff who are employed during the School term times. All First Aid certifications are held by the School Secretary and available to all staff.

Staff First Aid training now incorporates 2025 HSE expectations, including consideration of mental health crises. The School has trained mental health trained first aiders.

Training also reflects updated Resuscitation Council UK 2025 CPR and AED protocols, including revised guidance, AED usage and enhanced infection control measures .

At least one member of staff with current Full Paediatric First Aid is always present with EYFS (Early Years Foundation Stage) pupils whilst they are in the care of the School. This includes Morning Club and Tea Time Club. From 1st September 2025, volunteers aged 17+ and staff qualified through the Experience-Based Route hold a valid full paediatric First Aid Certificate where they are counted within EYFS staffing ratios.

- In the event of an accident or illness, all members of the School community are aware of the support available to them and the procedures necessary to activate them.
- Every pupil and member of staff who has a medical condition or need has their individual health and welfare requirements met. A medical condition should not limit access to their education or employment and that the management systems put in place for these individuals are understood by staff as necessary.
- The School develops an ethos in which pupils feel secure, their viewpoints are valued, they are encouraged to talk and they are listened to.
- The School aims to look after the whole School community and to increase awareness of health matters.

Record keeping

On entry to Lochinver House School, parents complete a medical form in accordance with the strengthened EYFS 2025 welfare requirements. The School ensures that emergency contact details are collected, verified and updated and that prolonged absences are followed up promptly. Parents are given the opportunity to discuss any health issues with the School. Consent for treatment and administration of medicines is sought at this time. All medical information, including GP details, is stored on SchoolBase. Parents are expected to update their child's medical and GP details as they change. The School ensures that a reminder to make any amendments to records is sent annually. All information is held and used in accordance with the School's *Data Protection Policy*.

Health plans are generated using data held on SchoolBase if a pupil has a specific need, for example, anaphylaxis (Appendix 1), asthma (Appendix 2), diabetes (Appendix 3) or epilepsy (Appendix 4). These are stored electronically where relevant staff are able to access them. Supply teachers supporting the School are issued a Medical Folder from the School Office containing:

- A copy of this policy
- Emergency procedures for known medical conditions (asthma, diabetes, anaphylaxis, epilepsy)
- Epipen users
- Diabetic pupils
- Pupils will allergies (no Epipen)

Catering staff are informed of any dietary needs by email and full access to our database

All pupil accidents and treatments are recorded on SchoolBase or a School's Accident Form. All staff and visitor accidents that occur on the School premises are recorded in the Accident Book located in the Medical Centre.

Accidents and incidents that fall under Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR 2013) will be reported to the Health & Safety Executive by Site manager Mrs Brierley and Mr Wadge head teacher in consultation with the School Nurse.

The School Nurse collates accident information and there is a termly review at Health & Safety Meetings of the information in order to identify patterns or trends. This is to ensure the School's First Aid provision is appropriate and if any change is required in practice or facilities.

Procedure for pupils and staff requiring medical treatment and/or First Aid
All pupils and staff have access to the Medical Centre throughout the school day. The teachers of pupils in Little Lochies to Year 2 will seek advice from the School Nurse if they become concerned about a pupil's health during the day. The pupil will be accompanied to the Medical Centre or the School Nurse will visit the classroom. Pupils from Years 3 to 8 may drop into the Treatment Room during break times if they feel they need to see the School Nurse. During lesson times, they require permission from the member of staff teaching them to go to the Medical Centre. If it is safe to do so, the pupil may make their way to the Medical Centre independently. However, it may be necessary for the pupil needing medical attention to be escorted by a pupil or member of staff.

Minor head and eye injuries that do not require further medical assistance should be reported to the School Nurse for follow up observation prior to the end of the School day. The Concussion Policy must be followed in the event of a head injury.

Procedures for dealing with spillage of bodily fluids are to be always followed to protect individuals and the School community from contamination (See Appendix 5.)

If a pupil becomes ill at School or sustains an injury and they are unable to continue the school day, parents are informed and asked to collect their child.

The School Nurse will inform parents by note system/communication book or in person when minor care has been administered.

Pupils on crutches
Lochinver House School requires a letter from a medical professional (GP, hospital etc.) detailing exactly what injury has been sustained before accepting responsibility for a pupil on crutches. This letter should include details of whether the pupil is required to use crutches in school and approximately for how long. Looking after pupils on crutches is not a responsibility taken lightly by the School and without clear medical information, potentially puts the school and pupils at risk.

Parents are required to contact the School Nurse prior to the pupil's return to School to enable the following to be discussed and arranged:

- Arrangements to and from School.
- Arrangements to and from lessons.
- General help and support.
- Medication.
- Notes taken about any follow-up appointments.
- Emergency contact details can be checked.

A risk assessment will be completed by the School Nurse covering health and safety evacuation issues especially within high risk classrooms such as Science, ICT, Art, Design and Technology etc and consideration will be given regarding classrooms accessed via stairwells.

Prescribed and non-prescribed medication
Parents should administer medication before and after the School day. However, this might not be practicable and in such cases parents can request for medication to be administered at School. Administration of any prescribed medication at School requires consent from the parent and this is made by completing 'Request for School to

Administer Medication' form which can be requested via the School Office. Medication should always be provided in the original container as dispensed by the Pharmacist and include the prescriber's instructions for administration. Prescribed medication may not be administered if it is not in its original container. Antibiotics cannot be administered unless the pupil has already received 2 doses in case of allergic reaction. General consent for administering non-prescribed over the counter medicines, for example, Calpol, Piriton and Ibuprofen, is obtained from parents when their child joins the School. A treatment record is kept on SchoolBase of all medicines administered to pupils.

Pupils are not allowed to carry their own medication during the school day except with express permission from the School Nurse and upon consultation with parents.

The School Nurse will attempt to contact a parent or carer prior to administering medicines to EYFS pupils. If this is not possible and it is deemed necessary for the pupils' wellbeing, and as long as consent has previously been given, the School Nurse will administer and inform parents as soon as possible. Staff holding the Administration of Medicines certificate are able to administer prescription medicines, following receipt of the 'Consent Statement to General and Emergency Treatment and First Aid' (Appendix 6). They may also administer the non-prescribed medication listed in the consent form signed by parents when a pupil joins the School. Staff holding the Administration of Medicines certificate are held by the School Secretary and available to all staff.

Sun Protection

All staff and pupils are reminded of the need to take care of their skin when outside. Where possible, pupils spend part of the School day outside and parents are asked to apply appropriate once a day sun protection lotion to their child before coming to school in the sunny weather. In Pre Prep, if required, Pre Prep staff may apply some hypoallergenic sun lotion with prior consent from parents (Appendix 8). Pupils are advised to wear hats to protect their head. Parents are asked to name hats and send them to school daily in sunny weather.

Duty staff will aim to use shaded outside areas where possible and will encourage pupils to use these.

First Aid kits

First Aid kits are located throughout the School including EYFS cloakroom, the Sports Hall, Dining Room, Theatre, Green Meadow, the Salter building, Atkinson building, Science Laboratories and the Art and DT rooms. These are checked and restocked regularly by the School Nurse. Pre Prep staff take a small First Aid kit with them when on duty at break times. Supervisory School Assistants are responsible for stocking these weekly.

In line with national first aid updates introduced in 2025, catastrophic bleeding control equipment, such as tourniquets and haemostatic dressings are included in first aid provision for areas identified as higher risk through updated risk assessments. " Critical Injury Bleed Control Kit" is stowed in orange box outside medical.

First Aid kits are supplied for out of School trips as well as sporting fixtures. Staff may be asked to administer medicines during off-site activities and trips and instructions will be given by the School Nurse on how to do so.

The School's defibrillators are located centrally in the emergency cabinet in the Theatre Foyer and Green Meadow.

Pupil's Epi-Pen kits are in the white First Aid cupboard in the corner of the Dining Room. Each kit is labelled with the pupils' name and contains the individual Health Care Plan and any other appropriate emergency medication required. These kits must be taken on all trips and fixtures. Training on administering Epi-Pens has been given to relevant staff. In the event of a child with multiple allergies a set of EpiPens will also be stowed in the classroom and will travel with the child from lesson to lesson.

There is an emergency asthma inhaler kit containing medication and administration devices located in the emergency cabinet in the Theatre Foyer as well as in the First Aid cupboard in the Dining Room. It can be used if a pupil's own inhaler cannot be located and if a parent has given prior consent. Individual asthma inhalers for pupils in Little Lochies to Year 4 are stored in their classroom medical box. Individual asthma inhalers for pupils in Years 5 to 8 are stored in the Medical Centre. Training on administering asthma inhalers is given to relevant staff.

Off site, external providers and out of hours provision
The School Nurse is informed of any off-site activity, sporting fixture or day and residential trip. A First Aid kit appropriate to the type and length of activity is prepared for the staff member leading the event. This should be collected from the Medical Centre where any specific information or additional training will be given. The kit should then be returned to the Medical Centre as soon as possible on returning to School; with any accidents and treatments reported to the School Nurse. All EYFS off site events have a Full Paediatric First Aider present.

Activities run by external providers and those held out of regular School hours must have their own designated First Aider. Activity providers are responsible for gathering all relevant information on specific health care needs of pupils in their care via their activity signing-up processes and are directed to the School Nurse if there are any concerns or need for clarity.

Emergencies
In the event of the following emergencies, an ambulance should be called immediately and SLT informed. Parents or next of kin must be contacted and informed of the emergency and the action taken if:

- an emergency adrenaline device has been used
- an asthma attack is not relieved by the use of an inhaler
- there is a loss of consciousness that is not a faint, for example, as a result of an accident, a head injury, an illness or a diabetic coma
- there has been a severe burn
- there has been a severe loss of blood
- a pupil has had a seizure
- any casualty is in a life threatening situation or perceived to require urgent medical treatment
- a bone has possibly been broken, except fingers and toes. Additionally parents would be contacted if a bone has possibly been broken, and an ambulance may be called particularly for a long bone or compound fracture.

A parent should accompany their child to hospital, but the ambulance should not be delayed in departing the School if the parent has not arrived to do so. A member of staff will be asked to accompany the pupil until a parent arrives to take their place.

Medical conditions requiring non-attendance
If a pupil or a member of staff has suffered diarrhoea and / or vomiting, they must remain absent from School for 48 hours from the last episode of either, to ensure the infection is not passed on.

If a pupil has been diagnosed with a communicable disease, as listed below, they must remain at home. The School Nurse will follow NHS England advice in her communication with parents and staff members.

- Diphtheria
- Mumps
- Poliomyelitis
- Haemophilus influenza Type b (Hib)
- Meningococcal disease
- Rubella (German measles)
- Measles
- Pertussis (whooping cough)

The School also require pupils to stay at home if they have:

- a raised temperature and for 24hrs after the fever has resolved without medication
- been prescribed antibiotics. Pupils may return to School after taking the first two doses.

If a pupil is absent for more than 10 days with illness the School may ask for a letter from the GP to clarify the nature of the illness.

Staff Medical Information
New staff are required to complete a medical form that is assessed by the School Nurse who may seek advice from an independent medical practitioner. Advice received regarding any support to be offered is sent directly to the School Nurse. All information sent is in confidence to the School Nurse, the HR and Compliance Manager and the Head who may share relevant information with members of SLT and the Governing Body in order to ensure that the appropriate support is provided. Staff with a medical condition that requires support within School will be supported with a healthcare plan and, where deemed necessary, regular review meetings.

Staff Medication
Medication for personal use must not be stored in the Classroom, or in the vicinity of any pupil. If a member of staff is completing a course of medication that needs to be administered during the working day, this must be discussed and kept with the School Nurse. If prescribed medication could impede the members of staff's ability in their role they must inform the School immediately.

Staff Welfare
During the workday, if staff develop an illness which impairs their ability to carry out their duties, these must be declared to the Line Manager or a member of SLT. Similarly, if a member of staff is on a course of medication which can negatively affect or impair ability to carry out duties, for example – dizziness, this must be communicated to the Line Manager or a member of SLT who will refer the member of staff to the School Nurse.

Reviewed By	Nurse & Deputy Head Academic
Approval Body/ Committee	Full Governors
Last Review	Spring 2026
Next Review	Spring 2027
Policy Linked To	Anaphylaxis Policy, Catering and Hygiene Policy, Concussion Policy, Data Protection Policy, Educational Visits Policy, Health and Safety Policy, Supervision Policy.

Any data held in relation to the content of this policy will be managed in accordance with our Data Protection Policy and Privacy Notice.

Appendix 1:
Appendix 1: Anaphylaxis - LINK WITH ALLERGY AND ANAPHYLAXSIS POLICY IN LINE WITH BENEDICTS LAW

Anaphylaxis is a severe and potentially life-threatening allergic reaction which may occur within minutes of exposure if a susceptible person is exposed to an allergen (such as food, an insect sting or an unknown allergen). A reaction can be mild or severe with slow or fast onset and can be life-threatening if not treated quickly with adrenalin. An Anaphylaxis reaction always requires an immediate emergency response.

Common allergens include peanuts, tree nuts, sesame, shellfish, milk and eggs, grass and tree pollen, insect stings, latex, dust mites, moulds and animal dander.

A person having an anaphylaxis episode could have any of the signs/symptoms listed below and in any order. A person might experience only one reaction or a combination of many; there is no set pattern and just because certain signs and symptoms may have been experienced before does not mean that they will experience the same ones again.

Common signs/symptoms
Metallic taste or tingling in the mouth, swelling of face, tongue, lips and throat, itchy skin, usually around mouth but can be anywhere on body, difficulty in swallowing, flushed, hives, rash, abdominal cramps and nausea, rise in heart rate, looking pale, dizziness, wheezing or breathing difficulty, collapse and unconsciousness.

In the most severe cases of anaphylaxis, people are normally prescribed a device for injecting adrenaline. The device, an Adrenaline Auto-Injector (AAI), looks like a large pen and is pre-loaded with the correct dose of adrenaline (following review by a Consultant in the hospital setting). The AAI is normally injected into the fleshy part of the thigh and the staff at Lochinver house School are trained on the use of an Adrenaline Auto-Injector.

At Lochinver House School, the chosen 'spare' adrenaline auto-injector is EpiPen 300mcg. A spare pen is held in a green box marked 'Allergy response kit"', it is situated on the wall to the right hand side, when entering the medical room.

Parents' responsibility
- Tell the School if their child has an allergy and is at risk from anaphylaxis
- Ensure the School has complete and up to date information regarding their child's condition.
- Inform the School about the medicines their child requires during School hours
- Inform the School of any medicines their child requires while taking part in educational visit or other School activities
- Ensure an adequate supply of medication is provided for the School to administer
- Keep the School informed of any changes.

The School Nurse will develop an individual health care plan that will be shared with relevant staff and is stored on the School's CRL. The IHCP is also stored in the emergency bag in dining room.

Teaching staff complete online anaphylaxis awareness training at the start of every new academic year. Further training can be given by the school nurses on an as needed basis (i.e. before residential trips, departmental meetings).

Staff can find more detailed information on this condition held on the CRL/Pupil Medical Information.
IHCP

You are referred to the School's *Anaphylaxis Policy*.

Appendix 2: Asthma

Asthma is a long-term medical condition that affects the airways. It is caused by inflammation of the airways, the breathing tubes that carry air in and out of the lungs. This inflammation makes the tubes highly sensitive so they narrow temporarily. This narrowing can occur at random or after exposure to a trigger. Common triggers include, allergies including pollen, smoke, pollution, cold air and exercise.

Asthma affects people of all ages often starting in childhood however it can develop for the first time in adults. Asthma is harmless until it is triggered at which point it has the potential to be life-threatening; because of this it is important that a pupil has an inhaler readily available at all times during the day. There is currently no cure for asthma but there are excellent treatment options that can help keep the symptoms under control enabling those with asthma to reach their full potential and participate in all aspects of Lochinver life.

Lochinver House School holds an asthma register; all care plans are on the CRL which is available to staff highlighting those pupils who have asthma. This allows staff to easily identify whether a pupil is recorded as having asthma and if parent consent has been received for use of the emergency salbutamol (blue) inhaler. An emergency inhaler is located in the dining room and also in the theatre foyer. The School Nurse is responsible for checking the emergency halers are present and in working order on a monthly basis. Use of the emergency inhaler is recorded, and the pupils' parents will be informed so that this information can be passed to the pupils GP.

Common signs/symptoms
Talking in short sentences, wheezing, breathlessness, coughing, the pupil might be very quiet. Staff at Lochinver House School are trained regularly on administering asthma inhalers.

Individual asthma inhalers for pupils in Little Lochies to Year 4 are located in their classroom medical box together with their IHCP. For pupils Year 5-8 their inhalers are stored in the medical room. All individual inhalers are kept in their original packaging with the pupil's doctor's details, prescription and dosage instructions.

Parents' responsibility:
- Tell the School if their child suffers from asthma
- Ensure the School has complete and up to date information regarding their child's condition.
- Inform the School about the medicines their child requires during School hours
- Inform the School of any medicines their child requires while taking part in educational visit or other School activities
- Ensure an adequate supply of medication is provided for the School to administer
- Keep the School informed of any changes.

The School Nurse will develop an individual health care plan that will be shared with relevant staff and is stored on the School's CRL.

Education visits or off-site events
All inhalers must accompany pupils when they are off the School grounds – for instance on an educational visit or sporting event. It is the responsibility of the trip organise to liaise with the School Nurse regarding pupils medical needs and ensure appropriate medication is available.

Staff can find more detailed information on this condition held on the CRL/Pupil Medical Information.

Appendix 3: Diabetes

Diabetes is a lifelong condition that causes a person's blood sugar (glucose) to become too high. The hormone insulin, produced by the pancreas, is responsible for controlling the amount of glucose in the blood.

Type 1 Diabetes is an autoimmune condition which means your immune system attacks healthy body tissue by mistake. In this case it attacks the cells in the pancreas. The damaged pancreas is then unable to produce insulin so glucose cannot be moved out of your bloodstream and into the cells. It is not known exactly what triggers the immune system to attack the pancreas, but some researchers have suggested it may be a viral infection.

Hypoglycaemia is a term used when the blood glucose level becomes extremely low. Too much insulin results in low blood glucose levels.

Common signs/symptoms
Symptoms of a hypoglycaemia episode include feeling shaky, sweating, being anxious or irritable, going pale, palpitations and a fast pulse, lips feeling tingly, blurred vision and feeling hungry.

Responsibilities
It is the parents' responsibility to notify the School if their child has diabetes.

- Each pupil with Type 1 Diabetes will have an Individual Health Care Plan (IHCP). The IHCP will include specific information regarding the pupil's daily routine and care requirements, medication regime and equipment requirements. It will also state extra precautions and any reasonable adjustments to be observed regarding sport and PE, trips out of School and exams/assessments. Emergency contact details will also be included on the IHCP. Full details are required including the child's daily care requirements, specific emergency procedures and the name and dosage of all medication prescribed.
- The School Nurse will ensure that a copy of the IHCP is available to all teaching staff who have direct contact with the pupil
- All pupils with diabetes must carry their blood sugar testing kit and 'hypo' kit with them at all times
- A snack box should be kept with the pupil. It is the parent's responsibility to ensure appropriate and recommended snacks are available to the pupil.
- Back up supplies of routine medications must be provided to the School Medical centre for safe storage (medical fridge)
- The School Nurse will inform the catering team of any pupils with Type 1 Diabetes
- Pupils with diabetes are not excluded on the basis of their condition. Blood glucose levels should however be closely monitored
- Pupils are advised not to take part in physical activities without their blood sugar testing kit and 'hypo' kit.
- Staff are aware that pupils may require access to food and drink during the School day and may require to be allowed to leave class and attend medical centre to deal with any issues relating to their condition.
- Parents are asked to inform the School if their child has been unwell with unstable diabetes or any other condition that is likely to affect their diabetes, particularly if they have required hospitalisation
- Diabetes awareness training will be given to staff, for example PE staff, prior to a School trip. The medical centre is also available for drop in teaching sessions.

The School Nurse will develop an individual health care plan that will be shared with relevant staff and is stored on the School's CRL.

Staff can find more detailed information on this condition held on the CRL/Pupil Medical Information.

Appendix 4: Epilepsy

What is Epilepsy

Epilepsy is often a lifelong condition to have seizures caused by a sudden burst of intense electrical activity in the brain. This causes a temporary disruption to the way that messages are passed between brain cells, so the brain's messages briefly pause or become mixed up.

Epilepsy can start at any age, but usually starts either in childhood or in people over 60. It is different for each individual as seizures can manifest themselves in many ways, ranging from "absence", apparent daydreaming, to Tonic-clonic seizures where one may become unconscious and experience convulsions.

Common signs/symptoms

Seizures can affect people in different ways, depending on which part of the brain is involved. Possible symptoms include:

- uncontrollable jerking and shaking, called a "fit"
- losing awareness and staring blankly into space
- becoming stiff
- strange sensations, such as a "rising" feeling in the tummy, unusual smells or tastes, and a tingling feeling in your arms or legs
- collapsing

Sometimes you might pass out and not remember what happened.

Responsibilities

It is the parents' responsibility to notify the School if their child has epilepsy:

- Each pupil with epilepsy will have an Individual Health Care Plan (IHCP). The IHCP will include specific information regarding the pupil's daily routine and care requirements and medication regime. It will also state extra precautions and any reasonable adjustments to be observed regarding sport and PE, trips out of School and exams/assessments. Emergency contact details will also be included on the IHCP. Full details are required including the child's daily care requirements, specific emergency procedures and the name and dosage of all medication prescribed.
- The School Nurse will ensure that a copy of the IHCP is available to all teaching staff who have direct contact with the pupil
- If required, back up supplies of medications must be provided to the School Medical centre
- Pupils with epilepsy are not excluded on the basis of their condition.
- Parents are asked to inform the School if their child's condition or levels of epileptic episodes have changed.

The School Nurse will develop an individual health care plan that will be shared with relevant staff and is stored on the School's CRL.

Staff can find more detailed information on this condition held on the CRL/Pupil Medical Information.

Appendix 5: Protection from Blood Borne Viruses and Other Bodily Fluids

In any situation requiring First Aid or the clearance of bodily fluids it is to be assumed that all blood products and bodily fluids are potentially infectious, thus the following procedures should always be applied.

- Always cover any open wounds on your own hands with a waterproof adhesive dressing.
- Disposable gloves (un-powdered latex or vinyl) are to be worn when dealing with bleeding / cleaning up bodily fluids.

Actions to be taken after direct contact with blood / bodily fluids

- If direct contact with another person's blood or other bodily fluids occurs the area should be washed as soon as possible with soap and water.
- If contact is made with the lips, mouth, tongue, eyes or broken skin, these should be washed out thoroughly with clean, cold tap water. Where running water is unavailable saline should be provided to wash out the eyes.
- Hands should be washed using soap, water and dried using paper towels.
- If a cut or puncture wound is sustained (e.g. by hypodermic needle from an adrenalin device, bite etc.) the wound should be squeezed to encourage bleeding, washed with soap and water and covered with a waterproof dressing.
- Any incident in which another's blood may have entered a person's bloodstream through a cut or abrasion or by splashing in the mouth or eyes should be reported firstly to the School Nurse and then to their doctor.

Cleaning and washing

- All spillages of blood, faeces and vomit should be cleared up as quickly as possible wearing suitable personal protective equipment. When spillages do occur, clean using a product suitable for the affected surface which combines both detergent and disinfectant (and use in accordance with the manufacturer's instructions).
- Mops should **never** be used for cleaning up blood and bodily fluid spillages. Use disposable paper towels or cloths.
- Separate cloths and mops should be used for general cleaning of kitchens, toilets and other general areas. Disposable cloths should, where possible, be used. If it is necessary to use a non-disposable brush, they should be thoroughly disinfected.
- Protective gloves, and where appropriate protective clothing, should be worn when handling soiled laundry. Soiled pupil's clothing should be bagged to go home, never rinsed by hand at School.
- Bodily Fluids Kits are kept in the Dining Room, in the cupboard in the Medical Centre and in the toilets in Little Lochies and Reception classrooms. These can also be located by calling 888 to contact the site team. These include a powder/spray that can be placed over the bodily fluid prior to being cleaned up

Waste Disposal

- Protective gloves, and where appropriate protective clothing e.g. disposable plastic aprons, should be worn when disposing of contaminated waste.
- Debris contaminated with blood should be bagged and taken to the School Nurse for "Yellow bag" disposal.
- Small quantities of contaminated waste (up to one bag in any collection interval), other than blood debris, can be safely disposed of via the usual "black bag" refuse collection arrangements. Waste disposed of in this way is to be double bagged in plastic and sealed by knotting.
- Non contaminated waste should be discarded into a bin liner and disposed of in the usual manner.

Personal Protective Equipment (PPE)

- Disposable vinyl or powder free gloves and disposable aprons should be worn for any activity where there is risk of contamination with blood or bodily fluids. Hands should be washed immediately after removal of gloves.
- PPE is found in Bodily fluids kits and from the School Nurse. They are single use and are to be discarded after the task is completed.

Appendix 6: Consent Statement to General and Emergency Treatment and First Aid

I/We authorise the Head (or an authorised deputy acting on his behalf) to give his consent for …….. (full name of pupil) to receive emergency medical treatment, including general anaesthetic and surgical procedure, on the advice of an appropriately qualified medical specialist in the event that the School is unable to contact me/us.

I/We give consent for ……. (full name of pupil) to receive first aid treatment for minor injury and illness at Lochinver House School (which will be undertaken by a qualified first aider), under the supervision of the School Nurse, the School's qualified nurse.

He/she may/may not be given non-prescribed medicines to treat minor illnesses or injuries

I/We would like/would not like to be informed of any medication that has been administered

I/we undertake to inform the School Nurse of any change in my/our child's medical status

Signature of both parents or guardians:

……. …….

Date: …….

Appendix 7: Request for School to administer medication

The School will not administer medication without written instructions.
Please complete and sign this form.

PUPIL DATA:			
Surname:		Forename:	
Date of Birth:		Class/Form:	

MEDICATION:	
Name/type of medication (as described on container):	
How long will your child need to take this medication?	

DIRECTIONS FOR USE:	
Dosage:	
Preferred timing:	

AUTHORISATION:			
Signature:		Date:	
Relationship to pupil:			

Appendix 8: Sunscreen Consent Form

FOR PUPILS IN PRE-PREP

Pre Prep pupils spend a significant part of the school day outdoors. The school asks that in the warmer months you apply sunscreen to your child, before morning drop off and provide them with a named regulation sun hat.

We understand that it is necessary for the pupils to generally have a second application of sunscreen within the day, and to be applied effectively, this needs to be done by an adult. We therefore request that you complete and return the consent form below.

Child's Name _____

- I give permission for the staff at Lochinver House School to apply sunscreen, which I will provide for my child, labelled with their name.
- I give permission for the staff at Lochinver House School to apply sunscreen provided by the school when off site and in the event of my child's sun cream being unavailable. The School will only use high factor, hypoallergenic sunscreen.

Signed:	
Print Name:	
Date:	