



Rainbow Horses

Learning Centre CIC

FIRST AID, MEDICAL AND INTIMATE CARE POLICY AND PROCEDURES

We have a duty to ensure that all learners are healthy and safe on our premises, as well as during off-site educational visits. We also need to make sure that learners with medical needs receive the necessary care at Rainbow Horses to enable regular attendance. All staff have completed at least the basic first aid training course.

Kayleigh Sreedharan has completed the four day training and is the named First Aider.

First Aid Information First Aid boxes are checked regularly and contain basic items for dealing with injuries

If there is an incident in which an injury occurs, the person dealing with the incident should make an entry in the Health and Safety Accident book (located in the kitchen cupboard).

Learner Medical Information All staff must be aware of existing medical conditions. Once the annual learner data check is complete (in September of each academic year), the named First Aider is responsible for making sure the medical information is kept up-to-date, as well as informing staff of individual learner conditions eg diabetes. All learner information will be treated with confidentiality.

Administering Medicines Only prescribed medicine may be given to learners. No medication should be given to a learner without parental consent. Medication will only be brought into Rainbow Horses when absolutely essential. Mostly this will be for a short period only eg to complete a course of antibiotics. If a learner suffers from pain eg migraine, the parent/guardian must authorise and supply the appropriate medication with written instructions.

Please refer to Management of Medications Policy for more detailed information.

Medical Conditions/Allergies Anaphylactic Shock – staff should be made aware of any learner likely to suffer a severe reaction. If an epipen is carried -a member of staff will be trained to administer it.

Asthma/Diabetes/Epilepsy and other conditions Parents must inform Rainbow Horses of conditions such as these. Learners who use inhalers should carry them at all times (clearly labelled). Any additional medication required to be issued to learners who suffer from these conditions should be given to a staff member, clearly labelled and with detailed instructions about administration. Spare inhalers (clearly labelled) may be stored in the medical room for emergencies.

Medical Emergencies At Rainbow Horses – in the event of a medical emergency, the named First Aider should be contacted. Depending on the severity of the injury, appropriate action will be taken eg ambulance, parents contacted. The learner will always be accompanied in the ambulance by an adult, if parents are unavailable.

Off site visits – Staff members taking visits off site will be provided with a First Aid kit. Lists of learners being taken out on visits should be checked for any special medical or dietary conditions. Appropriate medication should be carried by the designated member of staff i/c First Aid.

Safety, Storage and Access Learners should know where their medication is stored in case of emergency. However, all controlled/prescribed medication will be stored in a locked cupboard. Epipens will be stored during the day in an unlocked container, for emergency use. Where relevant, medication is stored in the fridge. It is the parents' responsibility to ensure that all medication is within the date for use.

First Aid and intimate care

Staff who administer first aid should ensure wherever possible that another adult or other children are present. The learner's dignity must always be considered and where contact of a more intimate nature is required (e.g. assisting with toileting or the removal of wet/soiled clothing), another member of staff should be in the vicinity and should be made aware of the task being undertaken.

Regular requirements of an intimate nature will be planned and agreed between the Rainbow Horses, those with parental responsibility and the child concerned and will be documented and easily understood. The necessity for such requirements will be reviewed regularly. The child's views must also be actively sought and, in particular, any discomfort with the arrangements addressed.

Intimate care is any care which involves washing, touching or carrying out an invasive

procedure (such as cleaning up a learner after they have soiled themselves) to intimate personal areas. In most cases such care will involve cleaning for hygiene purposes as part of a staff member's duty of care. In the case of a specific procedure only a person suitably trained and assessed as competent should undertake the procedure, (e.g. the administration of rectal diazepam.)

The issue of intimate care is a sensitive one and will require staff to be respectful of the child's needs. The child's dignity should always be preserved with a high level of privacy, choice and control. There shall be a high awareness of child protection issues. Staff behaviour must be open to scrutiny and staff must work in partnership with parents/carers to provide continuity of care to children/young people wherever possible.

Rainbow Horses is committed to ensuring that all staff responsible for the intimate care of children will undertake their duties in a professional manner at all times. Rainbow Horses recognises that there is a need to treat all children with respect when intimate care is given. No child should be attended to in a way that causes distress or pain.

Our approach to best practice

The management of all children with intimate care needs will be carefully planned. The child who requires intimate care is treated with respect at all times; the child's welfare and dignity is of paramount importance.

Staff who provide intimate care are trained to do so (including Child Protection and Health and Safety training in lifting and moving) and are fully aware of best practice. Staff will be supported to adapt their practice in relation to the needs of individual children taking into account developmental changes such as the onset of puberty and menstruation. Wherever possible staff who are involved in the intimate care of children/young people will not usually be involved with the delivery of sex education to the children/young people in their care as an additional safeguard to both staff and children/young people involved.

The child will be supported to achieve the highest level of autonomy that is possible given their age and abilities. Staff will encourage each child to do as much for him/herself as he/she can. This may mean, for example, giving the child responsibility for washing themselves. Individual intimate care plans will be drawn up for particular children as appropriate to suit the circumstances of the child.

Each child's right to privacy will be respected. Careful consideration will be given to each child's situation to determine how many carers might need to be present when a child is toileted. Where possible one child will be catered for by one adult unless there is a sound reason for having more adults present. If this is the case, the reasons should be clearly documented. Wherever possible the same child will not be cared for by the same adult on a regular basis; there will be a rota of carers known to the child who will take turns in providing care. This will ensure, as far as possible, that over-familiar relationships are discouraged from developing,

whilst at the same time guarding against the care being carried out by a succession of completely different carers.

Wherever possible staff should only care intimately for an individual of the same sex. However, in certain circumstances this principle may need to be waived where failure to provide appropriate care would result in negligence.

Intimate care arrangements will be discussed with parents/carers on a regular basis and recorded on the child's care plan. The needs and wishes of children and parents will be taken into account wherever possible within the constraints of staffing and equal opportunities legislation.

The Protection of Children

Education Child Protection Procedures and Inter-Agency Child Protection procedures will be adhered to.

All children will be taught personal safety skills carefully matched to their level of development and understanding.

If a member of staff has any concerns about physical changes in a child's presentation, e.g. marks, bruises, soreness etc. s/he will immediately report concerns to the appropriate manager/ designated person for child protection.

If a child becomes distressed or unhappy about being cared for by a particular member of staff, the matter will be looked into and outcomes recorded. Parents/carers will be contacted at the earliest opportunity as part of this process in order to reach a resolution. Staffing schedules will be altered until the issue(s) are resolved so that the child's needs remain paramount. Further advice will be taken from outside agencies if necessary.

If a child makes an allegation against a member of staff, all necessary procedures will be followed.

Adopted 21st March 2014

Signed S. Coombes

Last reviewed September 2023

Next Review due September 2024

Additional Information

Children wearing nappies

Where a child wearing nappies attends Rainbow Horses we will provide a simple agreement form for parents to sign- outlining who will be responsible, within the school, for changing the child and when and where this will be carried out.

We will record who changes a child, how often this task is carried out and the time taken. This will provide reassurance for parents that systems are in place and that we have implemented procedures for staff to follow.

The dignity and privacy of the child should be of paramount concern and a private area will be used. An area, which can be made private by the use of a screen, is acceptable. Consideration will be given to the sighting of this area from a health and safety aspect. A changing mat will be used on the floor when a child is to be changed. This is the recommended method of changing a child, as it avoids an adult having to lift a child and cause possible back injury.

Equipment Provision

Parents should provide nappies, disposal bags, wipes, changing mat etc. and parents should be made aware of this responsibility. Rainbow horses are responsible for providing gloves, plastic aprons, a bin and liners to dispose of any waste.

Health and Safety

Staff should always wear an apron and gloves when dealing with a child who is bleeding or soiled or when changing a soiled nappy. Any soiled waste should be placed in a polythene waste disposal bag, which can be sealed. This bag should then be placed in a bin (complete with a liner) which is specifically designated for the disposal of such waste. The bin should be emptied on a weekly basis and it can be collected as part of the usual refuse collection service as this waste is not classed as clinical waste. Staff should be aware of the school's Health and Safety policy.

Special needs

Children with special needs have the same rights to safety and privacy when receiving intimate care. Additional vulnerabilities that may arise from a physical disability or learning difficulty must be considered with regard to individual teaching and care plans for each child. As with all arrangements for intimate care needs, agreements between the child

those with parental responsibility and the organisation should be easily understood and recorded.

Regardless of age and ability, the views and/or emotional responses of children with special

needs should be actively sought (with advocacy arrangements made for those who can't) in regular reviews of these arrangements.

Guidance to safeguard children and education staff with regard to situations which may lend themselves to allegations of abuse

(Physical contact, first aid, showers/ changing clothes)

Physical Contact

All staff engaged in the care and education of children and young people need to exercise caution in the use of physical contact.

The expectation is that staff will work in 'limited touch' cultures and that when physical contact is made with learners this will be in response to the learner's needs at the time, will be of limited duration and will be appropriate given their age, stage of development and background.

Staff should be aware that even well intentioned physical contact might be misconstrued directly by the child, an observer or by anyone the action is described to. Staff must therefore always be prepared to justify actions and accept that all physical contact be open to scrutiny. Physical contact which is repeated with an individual child or young person is likely to raise questions unless the justification for this is formally agreed by the child, the organisation and those with parental responsibility.

Children with special needs may require more physical contact to assist their everyday learning. The general culture of 'limited touch' will be adapted where appropriate to the individual requirements of each child. The arrangements must be understood and agreed by all concerned, justified in terms of the child's needs, consistently applied and open to scrutiny. Wherever possible, consultation with colleagues should take place where any deviation from the arrangements is anticipated. Any deviation and the justification for it should be documented and reported.

Extra caution may be required where a child has suffered previous abuse or neglect. In the child's view, physical contact might be associated with such experiences and lead to staff vulnerable to allegations of abuse. Additionally, many such children are extremely needy and seek out inappropriate physical contact. In such circumstances staff should deter the child without causing them a negative experience. Ensuring that a witness is present will help to protect staff from such allegations.

Restraint

There may be occasions where it is necessary for staff to restrain children physically to prevent them from inflicting damage on either themselves, others or property.

In such cases only the minimum force necessary should be used for the minimum length of

time required for the child to regain self- control.

In all cases of restraint the incident must be documented and reported. Staff must be fully aware of the school's/organisation's Physical Intervention/Positive Handling Policy, which should comply with LEA policy

Under no circumstances would it be permissible to use physical force as a form of punishment, to modify behaviour, or to make a learner comply with an instruction. Physical force of this nature can, and is likely to, constitute a criminal offence.

Learners in distress

There may be occasions when a distressed learner needs comfort and reassurance that may include physical touch such as a caring parent would give. Staff must remain self-aware at all times to ensure that their contact is not threatening or intrusive and not subject to misinterpretation.

Judgement will need to take account of the circumstances of a learner's distress, their age, the extent and cause of the distress. Unless the child needs an immediate response, staff should consider whether they are the most appropriate person to respond. It may be more suitable to involve the child's relative or school's counsellor.

Particular care must be taken in instances which involve the same learner over a period of time.

Where a member of staff has a particular concern about the need to provide this type of care and reassurance they should seek further advice, from their line manager or other appropriate person.

Some staff are likely to come into physical contact with learners from time to time in the course of their duties when participating in games, demonstrating an exercise or the use of equipment.

Staff should be aware of the limits within which such contact should properly take place and of the possibility of misinterpretation.

Where it is anticipated that a learner might be prone to misinterpret any such contact, alternatives should be considered, perhaps involving another member of staff or a less vulnerable learner in the demonstration.

Showers/changing clothes

Young people are entitled to respect and privacy when changing clothes or taking a shower. However, there must be the required level of supervision to safeguard young people with regard to health and safety considerations and to ensure that bullying or teasing does not occur. This means that adults should announce their intention of entering changing rooms, avoid remaining in changing rooms unless learner needs require it, avoid any physical contact when children are in a state of undress and avoid any visually intrusive behaviour.

Given the vulnerabilities of the situation, it is strongly recommended that when supervising

children in a state of undress, another member of staff is present. However, this may not always be possible and therefore. Staff need to be vigilant about their own conduct, eg adults must not change in the same place as children or shower with children.

Reviewed 14th September 2022

Next review due September 2023