

**OVERWORLD
AMP**



FIRST AID & MEDICAL NEEDS

JUNE 2024

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INTRODUCTION

The Organisation recognises the importance of & their legal obligation to provide suitable First Aid provision both at our centre & when employees are undertaking work outside their usual working environment.

Under the Health & Safety (First Aid) Regulations 1981, employers are responsible for providing adequate & appropriate equipment, facilities, & personnel to ensure their employees receive immediate attention if they are injured or taken ill at work. Further guidance is published by the Health & Safety Executive First Aid guidance to help employers comply with the regulations & offers practical advice on what they need to do.

The Organisation will ensure that our First Aid provision is available to all non-employees; students, volunteers & visitors & make this document available on our website. This Policy also covers supporting students & staff with medical conditions & medicine management within the Organisation.

All staff working with young people (YP), volunteers & visitors are expected to always use their best endeavours, particularly in emergencies, to support those who require assistance to the best of their abilities. In general, the consequences of taking no action are likely to be more serious than those of trying to assist in an emergency.

FIRST AID NEEDS ASSESSMENT

Alfa House is based across two floors in which there are ~10 regular employees & during busy periods up to 40 members of the public accessing the facilities.

Activities within the building are normally confined to video gaming, streaming, video production & the movement of equipment. Employees will also have occasional light cleaning duties where they will use detergents & other cleaning agents.

The main potential hazards to employees & members of the public are trips, slips & falls, sudden illness & in unlikely circumstance electrocution.

In-line with legal responsibilities the Organisation will have one appointed person/qualified First Aider present while the premises is open to employees & visitors.

FIRST AID PERSONNEL

Qualified & appointed First Aider: **Steve Mitchell** steve.mitchell@overworld-amp.uk

Other First Aid trained staff: Mark Pickering & Ash Sanderson

Further training will be available to staff who are confident with & wish to have responsibility for providing First Aid

FIRST AID PROCEDURE

Any staff member or volunteer

1. If an accident or incident occurs, the first person on the scene must ensure their own safety & provide initial First Aid only in accordance with their level of expertise & training

Dial 999 in the event of an emergency

2. As soon as possible request the assistance of the appointed First Aider & wait for their arrival & remain with the appointed First Aider so to provide any assistance if needed

First Aider

3. Must be aware of the limits of their competency & when to call for an ambulance/assistance
4. Take charge of the casualty until a satisfactory level of recovery has been achieved or until the emergency services have arrived
5. Ensure that the condition of the casualty does not deteriorate as far as reasonably practicable by implementing their First Aid training
6. Refer the patient on to hospital or to their own GP as appropriate if they are in the opinion that further treatment/attention is required
 - a. In this case, the person's next of kin must be notified immediately
7. Take the following action if a YP sustains a bump to the head that does not require escalation
 - a. inform all members of staff to watch out for the signs of deterioration; dizziness, vomiting, fatigue
 - b. call the YP's parent/carer & email the named Overworld AMP Ltd if applicable as courtesy
8. Ensure an accident report is completed by the patient or on their behalf as appropriate for all events in the accident book
9. Inform the CYP parent/carer & named Overworld AMP Ltd if applicable, of any First Aid event
10. File & manage all reports in accordance with *Appendix 1 Data Retention & Disposal of Records Policy within the Data Protection, GDPR & IT Policy*

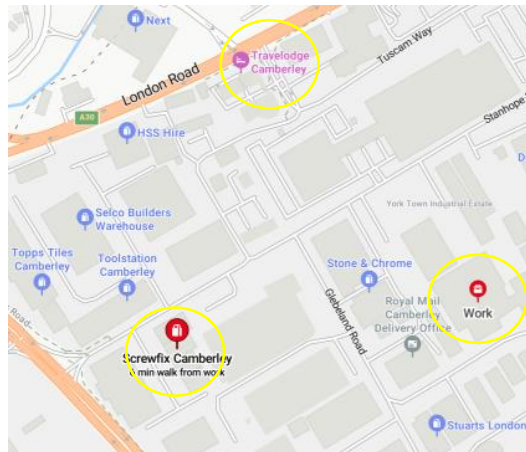
THE NEAREST ACCIDENT & EMERGENCY

Frimley Park Hospital,
Portsmouth Road
Camberley,
Surrey, GU16 7UJ
0300 6145000

THE NEAREST ACCESSIBLE DEFIBRILLATORS

SCREWFIX. Unit 2 Lawrence Way, Stanhope Way, Camberley, Camberley, GU15 3DL.

TRAVELODGE. 7 Minster Court, Tuscam Way, Yorktown Industrial Estate, Camberley, GU15 3YY



EMPLOYEES & ADULT VOLUNTEERS OR VISITORS

Employees with medical conditions such as Asthma, Diabetes, Severe Allergy, Epilepsy, Heart Condition or other, have a responsibility to carry & administer their own medication while at work.

They should, ideally, inform Steve Mitchell of any medication they are using & where to find said medication. This will help the First Aider to assess a condition & what steps to take in the event of emergency should the employee be unable to administer their own medication.

Medication must be kept out of reach of YP & the pets at the centre. Failure to comply with this will result in disciplinary action.

Adult volunteers & visitors using the centre have responsibility for carrying & administering their own medication while visiting.

Should a medical emergency arise relating to their medical condition they should notify a member of staff immediately & disclose any specific information, as appropriate for the best care. All information will be handled in the strictest of confidence

Medication must be kept out of reach of YP & the pets at the centre.

FIRST AID BOXES

First Aid boxes are located on the ground floor & first floor kitchen areas, & it is the appointed First Aider's responsibility to ensure that they are fully stocked.

FIRST AID ROOM

Alfa House does not have sufficient facilities to dedicate one room solely as a First Aid room however, the virtual golf room can be easily converted for this purpose allowing space, privacy & some comfort for First Aid to be administered, for recovery or as waiting room before transfer to a health-care facility or home.

RECORDING

All accidents that have required First Aid treatment are logged in the *Accident Record book*, located in the Senior's office. This is kept in accordance with the requirements of the Data Protection Act 2018.

The information to be recorded should include:

- ✓ date, time, & place of the incident;
- ✓ name & job of the injured or ill person;
- ✓ details of the injury/illness & what First Aid was given;
- ✓ what happened to the person immediately afterwards (for example, went back to work, went home, went to hospital);
- ✓ name & signature of the first-aider or person dealing with the incident.

This information can help identify accident trends & areas for improvement in the control of health & safety risks. It can be used for reference in future First Aid needs assessments. These records may also be helpful for insurance & investigative purposes.

All incidents in relation to accidental injury & near misses must be passed onto the Managing Director for scrutiny as soon as possible.

REPORTABLE INCIDENTS

Under the Reporting of Injuries, Diseases & Dangerous Occurrences Regulations 1995 (RIDDOR) some accidents that occur, must be reported to the Health & Safety Executive (HSE), the body responsible for enforcing health & safety law.

Reportable injuries, diseases or dangerous occurrences from the list below, must be reported to the HSE:

- ✓ Death
- ✓ Specified injuries, which are:
 - fractures, other than to fingers, thumbs & toes
 - amputations
 - any injury likely to lead to permanent loss of sight or reduction in sight
 - any crush injury to the head or torso causing damage to the brain or internal organs
 - serious burns (including scalding) which:
 - covers more than 10% of the body
 - causes significant damage to the eyes, respiratory system or other vital organs

- any scalping requiring hospital treatment
- any loss of consciousness caused by head injury or asphyxia
- any other injury arising from working in an enclosed space which:
 - leads to hypothermia or heat-induced illness
 - requires resuscitation or admittance to hospital for more than 24 hours
- ✓ Injuries where an employee is away from work or unable to perform their normal work duties for more than 7 consecutive days (not including the day of the incident)
- ✓ Where an accident leads to someone being taken to hospital
- ✓ Near-miss events that do not result in an injury but could have done. Examples of near-miss events relevant to places of learning include, but are not limited to:
 - The collapse or failure of load-bearing parts of lifts & lifting equipment
 - The accidental release of a biological agent likely to cause severe human illness
 - The accidental release or escape of any substance that may cause a significant injury or damage to health
 - An electrical short circuit or overload causing a fire or explosion
 - Acts of physical violence to employees

It is the responsibility of the Chief Operation Manager, Simon Bradley to carry out the reporting to the HSE in line with the Organisation's *Business Continuity Plan*.

APPENDIX 1 - SUPPORTING YOUNG PEOPLE WITH MEDICAL NEEDS

INTRODUCTION

Overworld AMP Ltd will work collaboratively with parents, YP, healthcare professionals (& where appropriate, social care professionals) & local authorities to ensure that needs of YP with medical conditions are met effectively.

ROLES & RESPONSIBILITIES

Mark Pickering will ensure that arrangements are in place so that YP with medical conditions;

- ✓ are properly supported;
- ✓ can play a full & active role in their sessions;
- ✓ staff are properly trained to provide the support an individual needs;
- ✓ staff must ensure that YP's health is not put at unnecessary risk from, e.g. infectious diseases;
- ✓ staff do not have to accept a YP at times where it would be detrimental to the health of that person or others to do so;
- ✓ all staff are aware of the policy for supporting YP with medical conditions & understand their role in its implementation;
- ✓ all staff including supply staff who support YP with medical needs receive sufficient information to provide appropriate support;
- ✓ sufficient staff are suitably trained & achieve the necessary level of competency before they take on responsibility to support YP with medical conditions;
- ✓ a register of YP in Overworld AMP Ltd is kept who have been diagnosed with asthma &/or prescribed a reliever inhaler;
- ✓ staff are trained to recognise the symptoms of an asthma attack (& are able to distinguish them from other conditions with similar symptoms);
- ✓ at least one emergency inhaler kit is maintained & readily available in an emergency situation;
- ✓ a register of YP in Overworld AMP Ltd is kept who have been diagnosed with anaphylaxis &/or prescribed an epi pen/auto injector;
- ✓ staff are trained to recognise the symptoms of anaphylaxis;
- ✓ risk assessments for activities outside of the centre are undertaken for YP with medical conditions;
- ✓ all staff are aware that medical information must be treated confidentially;
- ✓ Overworld AMP Ltd is appropriately insured.

Overworld AMP Staff

- Although administering medicine is not part of their professional duties, staff should consider the needs of YP with medical conditions.
- Staff should know what to do & respond accordingly if they become aware that a YP with a medical condition needs help.
- Staff must not administer any medication or undertake healthcare procedures without appropriate training unless it is an emergency & they are using their best endeavours

Young Person

- Will be expected, encouraged & supported to be actively involved in all processes/procedures around supporting their medical needs, as appropriate.
- Where appropriate, YP with medical conditions will be consulted to provide information about how their condition affects them.

Parent/carer

- Primary responsibility for their YP's health & safety.
- The parent/carer with whom Overworld AMP Ltd has day-to-day contact requested medication to be administered.
- Must complete, sign & return the appropriate consent forms for any & all medications &/or specialist care that their YP will require in Overworld AMP Ltd.
- Should provide Overworld AMP Ltd with sufficient & up to date information about their YP's medical needs.
- Should tell Overworld AMP Ltd of any change in prescription which should be supported by either new directions on the packaging of medication or by a supporting letter from a medical professional.
- Should:
 - ✓ administer medication at home if the prescription states it is to be taken once or twice a day;
 - ✓ bring their YP's medication & any equipment into Overworld AMP Ltd on the date of the first session;
 - ✓ replace the medication before the expiry date;
 - ✓ as good practice, take into Overworld AMP Ltd the new asthma reliever inhaler when prescribed;
 - ✓ dispose of expired items to a pharmacy for safe disposal;
 - ✓ during periods of high pollen count, encourage their YP, who have been prescribed anti-histamines, to take their medication before the session so that their condition can be better controlled during the session;
 - ✓ keep their YP at home when they are acutely unwell, specifically Public Health England, in Guidance on Infection Control in School & other childcare Settings: 2016, recommends that this is 48hrs following the last bout of vomiting & diarrhoea;
 - ✓ ensure that they or another nominated adult is always contactable.

STAFF TRAINING & SUPPORT

- **Steve Mitchell & Emma Rothery** will ensure that all staff are aware of Overworld AMP Ltd's policy for supporting YP with medical conditions & their role in implementing the policy.
- Any member of staff who agrees to accept responsibility for administering prescribed medicines to a YP does so voluntarily & will have appropriate training & guidance.
- Training will be provided for staff, as appropriate, to ensure that they are competent & have confidence in their ability to support CYP with medical conditions. Training for new staff will be provided on induction, as required.
- Training will be provided by an appropriate healthcare provider so that staff understand the specific medical conditions they are being asked to deal with. This includes understanding implications & preventative & emergency measures so that they can recognise & act quickly if a problem occurs.

THE YP'S ROLE IN MANAGING THEIR OWN MEDICAL NEEDS

- YP should be encouraged & supported to be actively engaged in managing their medical needs.
- YP will be assessed by Mark Pickering, Steve Mitchel & their parent/carer as competent or not to carry & administer their own medication including controlled drugs & inhalers.
- Some medicines prescribed for YP (e.g. methylphenidate for ADHD) are controlled by the Misuse of Drugs Act, 1971. A CYP who has been prescribed a controlled drug may legally have it in their possession if they are competent to do so but passing it to another YP for use is an offence.
- Generally, under 12s will not be deemed competent to hold & administer controlled medication, please see 'Controlled Drugs' below.

APPENDIX 2 - MANAGING MEDICINES AT OVERWORLD AMP LTD

- YP will only be given prescription or non-prescription medication after a parent/carer has completed a consent form (FORM 2 - CONSENT TO ADMINISTER MEDICATION FORM)
 - (Except in exceptional circumstances where the medicine has been prescribed to the YP without the knowledge of the parent/carer. In such cases Overworld AMP Ltd will encourage the YP to involve their parent/carer while respecting their right to confidentiality).

Steve Mitchell or the Senior manager on duty must be notified of any medication brought into the centre.

Prescribed medication

- Medicines will only be administered by Overworld AMP Ltd staff when it would be detrimental to a YP's health or cause them to miss their session to not to do so.
- Where clinically possible, medicines should be prescribed in dose frequencies that enable them to be taken before or after the YP's session.
- Overworld AMP Ltd will only accept medicines that are in-date, provided in the original container & include instructions for administration, dosage & storage.
- Prescribed medicines must have the prescription label/pharmacy dispensing label that has the YP's name, the dosage & the instructions for administration.
- The expiry date & batch numbers must be clearly visible & not obscured
 - The exception to this is insulin which must still be in date but will be available inside an insulin pen or a pump, rather than in its original container.
- Parent/carers should note the expiry date so that they can provide a new prescription as & when required.
- Medication will only be administered if there is a consent form completed, signed & returned which matches the prescription label on the medication. There should be a separate consent form for each medicine.

Controlled Drugs

- Mark Pickering, Steve Mitchell & their parent/carer will determine if the YP is competent enough to hold & administer their own medication. Usually this will not be considered for under 12s. This will be recorded on the Student Profile & Risk Assessment.

- Overworld AMP Ltd will keep controlled drugs in a locked non-portable container, to which only Senior staff have access.
- Senior staff may administer a controlled drug to the YP for whom it has been prescribed in accordance with the prescriber's instructions.
- FORM 1 - RECORD OF MEDICINE ADMINISTERED TO AN INDIVIDUAL will be kept tracking any doses used & the amount of the controlled drug held in Overworld AMP Ltd for each YP, i.e. total number of doses (tablets) provided to Overworld AMP Ltd, the dose given & the number of doses remaining.
- Where the dose is half a tablet then this will be cut using a tablet cutter at the time that the medication is required
- A controlled drug, as with all medicines, will be returned to the parent when no longer required to arrange for safe disposal. If this is not possible, it will be returned to the dispensing pharmacist.

Non-prescription Medication Including Pain Relief

- Parents will be asked to sign a consent form (FORM 2 - CONSENT TO ADMINISTER MEDICATION FORM) confirming that the medicine has been administered without adverse effect to their young person in the past & that they will inform Overworld AMP Ltd immediately if this changes.
- The medication must be brought into Overworld AMP Ltd in the original packaging, with expiry date, batch number & manufacturer's instructions, & a consent form signed.
- Medications, such as eye drops that have instructions to use within a certain period should be received by Overworld AMP Ltd unopened, wherever possible. Where this is not possible, parents should inform the Overworld AMP Ltd, in writing, the date that the medicine was opened.
- A child under 16 will never be given aspirin-containing medicine unless prescribed by a doctor.
- Staff must adhere to procedural practices when giving non-prescribed medicines

RECORD KEEPING

- FORM 1 - RECORD OF MEDICINE ADMINISTERED TO AN INDIVIDUAL will be used to record of all medicines administered to individual YP, stating what, how much was administered, when & by whom. Any side effects of the medication to be administered at Overworld AMP Ltd will be noted
- A second person will witness the administration of all medicines.
- A second person will witness the administration of controlled drugs.
- A record of administration of medicine will not be recorded for asthma inhalers where the YP is responsible for their own medication, & take their medication, as & when it is required. However, a record will be kept of the administration of an Emergency Inhaler.

SAFE STORAGE OF MEDICINES

- Medicines will be stored strictly in accordance with product instructions - paying note to temperature & in the original container in which dispensed.
- YP know where their medication is stored & can access them immediately or where relevant know who holds the key.
- Medicines & devices such as asthma inhalers, blood glucose testing meters & adrenaline pens are always readily available & not locked away.

- A few medicines require refrigeration. They will be kept in a clean storage container, clearly labelled, & stored in the Staff Room refrigerator, which is not accessible to CYP.
- An audit of YP's medication will be undertaken every term disposing of any medication that is no longer required.
- It is the parent/carer's responsibility to ensure their YP's medication remains in date.

DISPOSAL OF MEDICINES

- Parent/Carers are responsible for ensuring that date-expired medicines are returned to a pharmacy for safe disposal. The return of such medicines to a parent/carer will be recorded.
- Parent/carers should also collect medicines held at the end of the YP time with Overworld AMP Ltd or the end of summer term. All uncollected medicines will be taken to a local pharmacy for safe disposal.
- Sharp boxes will always be used for the disposal of needles.

HYGIENE & INFECTION CONTROL

All staff should be familiar with normal precautions for avoiding infection & follow basic hygiene procedures.

EIGHT STEP H& WASHING TECHNIQUES



OFF-SITE ACTIVITIES

- Some YP may need to take precautionary measures before or during exercise, & may need access, for example, to asthma inhalers. Staff supervising sporting activities will be made aware of relevant medical conditions & will review the YP's risk assessment.
- One member of staff accompanying the off-site activity will be asked to take on the lead role for administering medicines or healthcare procedures unless the parent/carer is accompanying their YP.

APPENDIX 3 - OVERWORLD AMP'S ARRANGEMENTS FOR COMMON CONDITIONS

ASTHMA

Asthma is a common lung condition that causes occasional breathing difficulties. Common asthma triggers include: allergies (to house dust mites, animals or pollen, for example), smoke, pollution & cold air exercise, infections like colds or flu

- If an enrolled CYP is known to be asthmatic, this will be marked on their Student Profile & Risk Assessment, Staff will be trained to recognise the symptoms of an asthma attack & know how to respond in an emergency.
- All CYP using (S)MART [(Single-inhaler) Maintenance & Reliever Therapy] in asthma should have a personalised asthma self-management plan (e.g. [asthma-self-management-plan](#)) that sets out the maintenance dose, use of reliever doses & when to seek medical attention. An essential element of the personalised self-management plan is the action required in a severe acute attack. Additional medication may be required.
- YP who provide Overworld AMP Ltd with inhalers are made aware where their inhalers are stored.
- Emergency salbutamol inhalers & spacers are kept in the first-floor kitchen cupboard.
- Emergency salbutamol inhalers will only be given to YP previously diagnosed with asthma whose reliever inhaler is not in Overworld AMP Ltd or whose inhaler has run out, who are on the register & whose parents have signed FORM 3 - USE OF EMERGENCY SALBUTAMOL INHALER
- Staff will know how & when to use the emergency salbutamol inhaler.
- Parent/carers will be informed of any emergency dosages given.

Symptoms of an asthma attack (NHS UK)

- ! Usual symptoms are getting worse (cough, breathlessness, wheezing or tight chest)
- ! Reliever inhaler (usually blue) is not helping
- ! Too breathless to speak
- ! Breathing is getting faster & it feels like they cannot catch their breath
- ! Peak flow score is lower than normal
- ! Children may also complain of a tummy or chest ache
- ! The symptoms will not necessarily occur suddenly, they often come on slowly over a few hours or days.

If you think someone is having an asthma attack, you should:

1. Ask a colleague to alert Steve Mitchell or a Senior on duty
 2. Ask the person to sit up straight & support them to keep calm
 3. Unless the person has a specific asthma self-management plan, they should take one puff of their reliever inhaler (usually blue) every 30 to 60 seconds up to 10 puffs
 4. If they feel worse at any point, or they do not feel better after 10 puffs, call 999 for an ambulance
- ! If the ambulance has not arrived after 10 minutes & their symptoms are not improving, repeat step 3.
 - ! If their symptoms are no better after repeating step 3, & the ambulance has still not arrived, contact 999 again immediately.
 - ! If their symptoms improve & you do not need to call 999, for CYP call their parent/carer to collect them

ANAPHYLAXIS (Severe Allergic Reaction)

Anaphylaxis is a severe sudden allergic reaction when a person is exposed to an allergen. The most common allergens are eggs, peanuts, cow's milk, fish, wheat, soy, certain insect stings & reactions to medication groups. Anaphylaxis is a potentially life-threatening condition.

- If an enrolled YP is known to be at risk of anaphylaxis, this will be marked on their Student Profile & Risk Assessment, which includes the arrangements staff will make to control exposure to allergens.
- Their auto-injectors (EpiPen) will be kept readily available in the first-floor refrigerator.
 - CYP will not be permitted to carry the auto-injectors with them around the site.
- Senior staff will be trained on record keeping in the event of having to administer an auto-injector.

Symptoms of anaphylaxis as including one or more of the following (Allergy UK):

AIRWAY

- ! Swollen tongue
- ! Difficulty swallowing/speaking
- ! Throat tightness
- ! Change in voice (hoarse or croaky sounds)

BREATHING

- ! Difficult or noisy breathing
- ! Chest tightness
- ! Persistent cough
- ! Wheeze (whistling noise due to a narrowed airway)

CIRCULATION

- ! Feeling dizzy or faint
- ! Collapse
- ! Young children may suddenly become floppy
- ! Loss of consciousness (unresponsive)

If you think a person is in anaphylaxis, you should:

1. Ask a colleague to alert Steve Mitchell or a Senior on duty
2. A trained member of staff will administer adrenaline – WITHOUT DELAY – if an EpiPen is available
3. Call an ambulance (999) & tell the operator it is anaphylaxis
4. Lie the person flat (or sit them up if they are having breathing problems)
5. Avoid standing or moving someone having anaphylaxis
6. Stay with the person until medical help arrives
7. If symptoms do not improve within five minutes of a first dose of adrenaline, give a second dose using another EpiPen
8. Simultaneously ensure their next of kin is notified - a person who has a severe allergic reaction &/or is given adrenaline should always be taken to hospital for further observation & treatment
9. Sometimes anaphylaxis symptoms can re-occur after the first episode has been treated & appeared to have settled. This is called biphasic anaphylaxis.
10. A member of staff will travel to hospital with a YP until their parent/carer arrives.

The key to prevention of anaphylaxis is knowledge, awareness & planning. Overworld AMP Ltd will manage anaphylaxis by:

- ! Providing professional development & annual updates for all staff in recognising & responding appropriately to an anaphylactic reaction, including competently administering an EpiPen
- ! Nuts & nut-based products will not be available in Overworld AMP Ltd
- ! There should be no trading & sharing of food, food utensils & food containers.
- ! It is ideal that YP with severe food allergies should only eat lunches & snacks that have been prepared at home.
- ! Bottles & other drinks provided by the parent/carers for their CYP should be clearly labelled with the name of the YP for whom they are intended.
- ! The risk of a life-threatening anaphylaxis from casual skin contact, even with highly allergenic foods such as peanuts, appears to be very low. On occasions casual skin contact will provoke urticarial reactions (hives). Simple hygiene measures such as h& washing & bench-top washing are considered appropriate.

EPILEPSY

Epilepsy is a common condition that affects the brain & causes frequent seizures. Seizures are bursts of electrical activity in the brain that temporarily affect how it works. They can cause a wide range of symptoms.

- If an enrolled YP is known to be epileptic, this will be marked on their Student Profile & Risk Assessment, Staff will be trained to recognise the symptoms the symptoms & triggers for epilepsy, including administering medication.
- Overworld AMP Ltd will liaise fully with parents & health professionals but cannot meet the needs of a YP who needs administration of rectal medications or requires a 1:1 at all times by a trained member of staff

Epileptic Seizure - An emergency would be if the person:

1. had a single seizure or cluster of seizures that lasts for longer than five minutes, or longer than is usual for them;
2. were severely injured as the result of a seizure.

If you think a person is having a seizure, you should:

1. Immediately clear the surrounding area of all hazards which may injure the YP e.g. sharp objects, tables, chairs etc.
2. Ask a colleague to alert Steve Mitchell or a Senior on duty
3. Record the time immediately from the start of the seizure
 - ! over 5 mins please call an 999 for an ambulance immediately
 - ! If the person recovers within 5 mins & goes into a second seizure call 999 for an ambulance immediately;
4. Remain with the person until medical help arrives. Simultaneously ensure their next of kin is notified.
5. A member of staff will travel to hospital with a YP until their parent/carer arrives.
6. Arrange for appropriate first aid, if they have been injured/severely injured. Contact parents/carers again, update them of the recovery & if the YP has been injured.
7. Arrange for an ambulance to be called as above.

8. In the event we have a YP who has been diagnosed with epilepsy & they require medication to stabilise them due to a seizure we will receive training as a whole staff team

DIABETES

Diabetes is a condition that causes a person's blood sugar level to become too high. There are 2 main types of diabetes: type 1 diabetes – a lifelong condition where the body's immune system attacks & destroys the cells that produce insulin & type 2 diabetes – where the body does not produce enough insulin, or the body's cells do not react to insulin properly.

- If an enrolled YP is known to be diabetic, this will be marked on their Student Profile & Risk Assessment
- YP diagnosed with Type 1 diabetes & have been prescribed insulin will be supported by staff who have specifically agreed to this responsibility & have received training & support from the Diabetic Nurses Team.
- A suitable private place will be provided for YP to carry out blood tests & administer doses.
- YP will not be prevented from eating drinking or taking toilet breaks whenever they need to.

Symptoms of a hypoglycaemic episode - low blood sugar, also known as a hypo (NHS UK)

- ! sweating
- ! being anxious or irritable
- ! feeling hungry
- ! difficulty concentrating
- ! blurred sight
- ! trembling & feeling shaky

If you think a person is having a hypo, you should:

1. Ask a colleague to alert Steve Mitchell or a Senior on duty
2. Offer the person a fast-acting sugar, such as glucose tablets, a glucose rich gel, or a sugary drink immediately. (Avoid sugary foods that contain fat like chocolate or cake – they do not work as well)
3. Remain with the person until they have stabilised & checked their blood sugar has gone above 3.5mmol/L
4. Once the CYP has recovered, slower acting starchy food, such as a sandwich or two biscuits & a glass of milk, will be given, some 10-15 minutes later.
5. If they become unconscious: put them into the recovery position (on their side, with their head tilted back & knees bent)
6. A trained member of staff administers their glucagon injection
7. Call an ambulance – if they don't have a glucagon injection to administer or if they haven't recovered 10 minutes after the injection.

SELF-HARM *(to be read alongside the organisations Safeguarding & Young Person Protection Policies & Procedures)*

Self-harm is where someone does something to deliberately hurt themselves when they find things difficult to cope with. It can include behaviours such as:

- Cutting
- Over-dosing
- Hitting
- Burning or scalding

- Picking or scratching skin
- Pulling hair
- Ingesting toxic substances
- Eating disorders

Why do people self-harm?

People self-harm for lots of different reasons. Sometimes this is because they feel bad about something that has happened to them but often there is no known cause. Self-harming behaviours may have the following functions:

- To communicate distress to others
- To relieve unbearable feelings
- To provide soothing & comfort by releasing tension & gaining care from others
- To feel alive if they feel numb due to life experiences
- To punish themselves as they feel shame & self-blame
- To control things in their life when everything feels out of control

YP shows signs & symptoms of self-harming:

- ✓ Stay calm – try not to panic or show you feel shocked, even though you may be.
- ✓ Ensure all physical wounds are treated by a trained member of staff before any conversations around the non-physical aspects of self-harm.
- ✓ Keep calm & give reassurance to YP & others who may have witnessed the self-harm
- ✓ **Duty of care** Tell the YP that Overworld AMP staff are responsible for their well-being & safety while they are in their care.
- ✓ **Confidentiality** Explain their situation will be kept private & only shared with professionals who can help them. It's important to reassure them that they are not alone & that there is support available
- ✓ Do not ignore, punish or criticise the behaviour.
- ✓ You may want the YP to stop but telling them to stop is not helpful & can be dangerous as it takes away their coping strategy
- ✓ Listen to them non-judgmentally & try to understand
- ✓ If medical attention was not needed, ensure you informed the Safeguarding Leads immediately – time is of the essence in the case it's a safeguarding event
- ✓ Ensure the concern is recorded in the monitoring notes for the session
- ✓ The Safeguarding Leads will ask for a written report of events
- ✓ Have an awareness of your own feelings & need for safe support
- ✓ Be aware of 'social contagion' – self-harm spreading between members of a group

Undertake a risk assessment:

The Safeguarding Leads will

1. work with available information to review the YP's risk assessment & develop a safety plan
2. Inform parents/carers unless clear reason not to e.g. safeguarding concern.
3. Think about circumstances & potential risks
 - ? Risk of mental health problems, e.g. depression & anxiety
 - ? Risk of potential abuse
 - ? Risk of other students self-harming

- ? Risk of further self-harm
- ? Risk of suicide
- 4. Relevant course of action will depend on level of risk
 - o Refer to Multi-Agency Safeguarding Hub if there is immediate risk of harm
- 5. Seeking support from other agencies
- 6. Document concerns & actions to be taken – within whole company approach/policy/procedures

Low/ medium risk

- ✓ Review the key adult who is assigned to work with the YP, change or increase support
- ✓ Support YP to stay safe if they continue to self-harm. Help them to minimise risks such as infection.
- ✓ Support them to develop new coping strategies. Other strategies include distraction, flicking a band on their wrist, putting cold ice on their skin, going for a walk
- ✓ Seek further advice from other agencies
- ✓ Ensure there is support for yourself.

High risk/Crisis

- Seek immediate medical attention & administer first aid if required
- If YP is taken to hospital, a member of staff will travel to hospital with a YP until their parent/carer arrives (unless there is a safeguarding concern)

the Safeguarding Leads will

- ✓ Refer to Multi-Agency Safeguarding Hub
 - [Hampshire Child](#) 01329 225379
 - [Hampshire Adult](#) 0300 555 1386
 - [Surrey Child](#) 0300 470 9100
 - [Surrey Adult](#) 0300 470 9100
 - [Berkshire Child](#) & chose the relevant Partnership
 - [Berkshire Adult](#) 07718 120601
- ✓ will decide whether the YP is safe enough to continue with their placement
- ✓ will call for a multi-disciplinary team meeting

Risk of self-harm & suicidal behaviour is likely to increase in the rare event that a student takes their life. If a suicide occurs, it is very important that the wellbeing & safety of other students is considered. Guidance is available on the Public Health England website at: [Suicide prevention in schools](#)

Resources

[Young people who self-harm: guide for schools](#)

Childline Tel: 0800 1111

Papyrus www.papyrus-uk.org

Young Minds www.youngminds.org.uk



FORM 1 - RECORD OF MEDICINE ADMINISTERED TO AN INDIVIDUAL

Name & strength of medication _____ Dosage _____

Date	Time	Dosage	Tablets In	Tablets out	Tablets Remaining	Staff signature	Witness signature	YP's signature

Note any reactions observed:



FORM 2 - CONSENT TO ADMINISTER MEDICATION FORM

Overworld AMP Ltd will not give your CYP medicine unless this form is completed in full & signed. The completion of this form does not act as a guarantee that the staff will administer medication & they may refuse to administer medication at any time. Medication must have been administered previously by the parent/carer to minimise the risk of adverse or allergic reaction to any new medication. **All medication must be stored in its original container. Prescribed medication must have the pharmacy dispensing label clearly printed. All medicines should be clearly named, & the batch number & expiry date left unobscured.** If more than one medicine is required a separate form should be completed for each one. If medication dosage changes you will be asked to complete a new consent form. Please advise if you require additional forms.

Name of young person	
Date of birth	
Medical condition / illness	
Name of medicine as described on container	
Is the medication prescribed?	YES / NO
Dosage & method	
Self-administration	YES / NO
Timing(s)	
Special precautions / other instructions	
Duration of course	
Are there any side effects that you know of?	
Parent/carer name	
Relationship to young person	
Daytime telephone number	

The above information is, to the best of my knowledge, accurate at the time of writing & I give consent to Overworld AMP Ltd staff administering medicine in accordance with their policy. **The medication does not contain Aspirin.**

Prescribed Medication: I will inform Overworld AMP Ltd immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Non-prescription medication: I confirm that I have administered this non-prescription medication, without adverse effect, to my young person in the past. I will inform Overworld AMP Ltd immediately, in writing, if my young person subsequently is adversely affected by the above medication.

I confirm that I am happy for a responsible member of staff to support my young person with their medication when they are attending an offsite activity.

Parent/Carer Signature: _____ Date: _____

Name (print): _____



FORM 3 - USE OF EMERGENCY SALBUTAMOL INHALER

Young person showing signs of asthma / having asthma attack

Please note, without this form completed in full & signed, we are unable to administer an emergency inhaler.

1. I can confirm that my child has been diagnosed with [please delete as appropriate]:
 - asthma
 - has been prescribed an inhaler
2. My young person has a working, in-date inhaler, clearly labelled with their name, which they bring with them to Overworld AMP Ltd every session. I understand that my young person is responsible for their inhaler during their session times & that Overworld AMP staff are not able to monitor usage or the working order of this inhaler.
3. I will provide the Overworld AMP Ltd with a spare inhaler to keep in case of loss or damage to their personal inhaler. This will be working, in-date & clearly labelled with their name & expiry date.
4. In the event of my young person displaying symptoms of asthma, & if their inhaler is not available or is unusable, I consent for my child to receive salbutamol from an emergency inhaler held by Overworld AMP Ltd for such emergencies.

Young person's name: _____

Parent/Carer signature: _____ Date: _____

Name (print) _____