

First aid policy (Whole School including EYFS)

Independent Day School for Boys and Girls

Our Lady of Sion School

Reviewed: October 2021

Frequency of review: 3 Years

Date of next review October 2025

OUR LADY OF SION SCHOOL

FIRST AID POLICY

1. Definition and Objective

First Aid is the immediate and temporary care given until the services of a medical practitioner can be obtained. The object of First Aid is to give help at once to pupils, staff or visitors, who are injured or suddenly taken ill whilst at school before expert help from a Doctor or Nurse is available, or the ambulance arrives.

Nothing in this policy should affect the ability of any person to contact the emergency services in the event of a medical emergency. For the avoidance of doubt, staff should dial 999 for the emergency services in the event of a medical emergency before implementing the terms of this Policy and make clear arrangements for liaison with ambulance services on the School site.

2. Arrangements for First Aid

In the event of an accident or illness where possible the pupil or member of staff should be sent to the Reception (Senior School) and Secretary's Office (Junior School) immediately. If this is not possible then the first-aider should be called immediately using the red card system (see point 10).

The main duties of a first-aider are to:-

Give immediate help to casualties with common injuries or illnesses and those arising from specific hazards at school.

The School arranges the approved training of first-aiders to comply with the Health and Safety (First Aid) Regulations and a list of trained staff is displayed on the staff and pupil notice boards as well as in the Sick Bay.

Lists of the employees who have attended an enhanced two or three day course specifically designed for first aid at work or Paediatric First Aid are displayed in the Senior and Junior School receptions.

This policy has a supplementary appendices outlining guidance for the treatment of:

- Generic first aid guidance
- Generic Policy for Asthma Care
- Generic Policy for Anaphylaxis
- Generic Policy for Automated External Defibrillators (AEDs)

3. First Aid Boxes

All first aid boxes should be furnished in accordance with current regulations and are located as follows:-

Senior School

- a. Reception
- b. Headmaster's PA's Office
- c. School Hall
- d. Sick Bay
- e. Central Kitchen
- f. Maintenance Workshop
- g. CDT Workshop
- h. Science Department
- i. P.E. Office
- j. All minibuses
- k. Food and Nutrition Room
- l. Resource Centre
- m. Art Room
- n. 2 x Travel Bags

Junior School

- a. Kitchen
- b. Sick Bay
- c. Nursery
- d. Staff Room
- e. Travel Bag
- f. Mini Bus
- g. Staff Cloakroom

Staff must inform the office if any items are used. The regular review of the contents and replacement of any items used is the responsibility of the Receptionist in the Senior School and the Secretary in the Junior School. Appropriate records of these checks are to be maintained.

4. Travelling First Aid Kits

Travelling first aid kits for use at sports fixtures or on expeditions and school trips are available from the Bursar's PA's office and Junior School Sick Bay. Staff responsible for these activities are to collect a kit and return it after use and to inform the office if used. A first aid box is kept in each school minibus. Guidance on first aid arrangements at sports fixtures is contained in the Trips Policy and Health and Safety Manual.

5. Records of Illness or Injury (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR)) The School has a legal responsibility to report certain injuries, work related diseases and dangerous occurrences and near miss accidents under The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR). The information enables the Health and Safety Executive (HSE) and local authorities, to identify where and how risks arise, and to investigate serious accidents.

The School will report, therefore:

- Fatal accidents
- Specified injuries (as defined in RIDDOR 2013, Regulation 4)
- Accidents to 'non-workers' (which would include pupils, parent and visitors, for example) where the person is taken to hospital
- Accidents which result in the incapacitation of a worker (such as a teacher or caretaker) for more than seven days

The HSE booklet "Reporting accidents and incidents at work, A brief guide to the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR)" is referred to, when further detail is required at: <http://www.hse.gov.uk/pubns/indg453.pdf>.

In addition to the above statutory requirements, details of any first aid administration are to be recorded by the first-aider concerned, in the school Accident Book which is held in reception for the Senior School and the Secretary's office in the Junior School. This must include the name and signature of the first-aider or person dealing with the incident.

Parents/next of kin must be informed of significant or serious illness/injury as quickly as possible.

All records should be kept for a minimum of 3 years in the archive room.

6. General First-Aid Guidance

Take care not to become a casualty yourself whilst administering first aid. Be sure to use protective clothing and equipment where necessary. If you are not a trained first-aider, send immediately for the nearest first-aider where one is available.

First-aiders should take precautions to avoid infection and must follow basic hygiene procedures. They should have access to single use disposable gloves and hand washing facilities. All dressings, gloves etc soiled with blood or other body fluids should be disposed of in a yellow clinical waste bag, which is then placed in the clinical waste bin for collection by a licensed contractor. These bins are placed in each Sick Bay and the Early Years' building.

7. Arrangements for the Transfer of a Child or Adult to Hospital

If a child/adult is severely injured and needs to attend hospital then the matter should be reported to the Bursar. A note will be made of the date and time of the event. If the Bursar is not available then the matter should be referred, in order, to the following people:-

In the Senior School: The Deputy Headmaster, the Assistant Bursar

In the Junior School: The Senior Teachers of Junior School, the Assistant Bursar

If a first-aider deems it necessary to call for an ambulance they should do so or arrange for this to be done without delay. The senior official to whom the incident is reported must ensure the person is accompanied in the ambulance to hospital and stay until a relative arrives or the person is discharged.

Staff should **always** call an ambulance when there is a medical emergency and / or serious injury. Examples of medical emergencies include:

- a significant head injury;
- fitting, unconsciousness or concussion;
- difficulty in breathing and / or chest pains;
- a severe allergic reaction;
- a severe loss of blood.

THE HEADMASTER, DSLs AND THE BURSAR MUST BE ADVISED IMMEDIATELY OF ANY SEVERELY ILL PUPIL AND ANYONE NEEDING TO GO TO HOSPITAL, noting the reporting requirements in respect of RIDDOR.

8. General

Hygiene – Please use a pair of surgical gloves before treating wounds, burns or eye injuries. Take care in any case not to contaminate the surfaces of dressings.

Record Keeping - An entry must be made in the Accident Book for each case.

First Aid Box - Each article used from the first aid box should be replaced as soon as possible.

9. Advising Parents of Sickness / Injury

The School will inform parents of any significant illness, accident, injury or first aid treatment provided on the same day or as soon as reasonably practicable. For the Junior School a bumped head sticker is used and for all other ages a slip home.

The School will notify local child protection agencies, as appropriate, of any serious accident or injury to, or the death of, any child whilst in their care and act on any advice given. A note will be made of the date and time of the event.

Diarrhoea and/or vomiting

The school follows the advice from the Health Protection Agency, NHS and Public Health Agency that all pupils or staff who present with symptoms of Diarrhoea and/or vomiting should be excluded from school until 48 after the person is free from symptoms unless authorised by a member of the Senior Leadership Team. The school will expect parents/guardians to make arrangements for their child to return home should symptoms begin at school or if the pupil returns to school sooner than the recommended advice.

10. Red Card System

In the Senior School, red cards are available to every member of staff. If a pupil is sent for help by a member of staff the red card will signify that urgent medical assistance is required for another pupil. If the card is unavailable, then the pupil will instead state Red Card situation.

11. Pupil's Own Medicine

A medical questionnaire is distributed to parents of every new pupil and an update request is issued every year, usually in September. The form includes significant past medical problems, current medical problems and any on-going treatment including medication. Relevant information will be entered on the school's database.

It is recognised that arrangements may be needed for pupils with particular medical conditions (for example, asthma, epilepsy, diabetes.) Where necessary, a specific risk assessment will be carried out and appropriate controls put in place.

Pupils who are required to take prescription medication during a school day may deposit the medication with Reception (Senior School) or Secretary's Office (Junior School) and then attend to receive the same when necessary. This includes paracetamol or similar medicines. Please see Pupil Medication Policy.

11a. Medical Consent

A pupil's ability to consent to, or refuse medical treatment is acknowledged and is based on the so-called 'competency' of the pupil as judged by the medical professional proposing the treatment. Parental consent from the parents of pupils for the administration of medication is obtained on the medical form distributed alongside the contract before the pupil is enrolled in the school.

11b. Confidentiality of Medical Information

The school first aiders must understand the school's policies regarding confidentiality of medical information. There may be times where a conflict of loyalty may occur between the school and the pupil as a patient. Each case should be reviewed individually before any confidential information is shared but parents (and pupils) should be made aware that any medical information passed to the school may be shared on a 'need-to-know' for those who have responsibility to pupils whilst in the school's care. Should there be a time when no resolve can be found with regards to sharing information then the Headteacher must have the final decision. Pupils should be made aware that confidence will be upheld by the school's health team so long as safety or risk (to self or others) is not compromised by doing so. Staff should be made aware of pupils with disabilities or medical conditions that may affect the safety of the pupil such as vision or hearing loss, diabetes or epilepsy etc. Staff and specifically catering staff will also be made aware of significant dietary requirements and significant allergies.

Some pupils may be required to carry their own with them following professional medical advice i.e. Epi-pens and inhaler. Separate arrangements are in place to ensure that the school has back up medication for these situations e.g. a spare 'named' Epi-pen located in the medical room. The school will work closely with parents to ensure that the controls identified in specific risk assessments are agreed and implemented where required. Please see Pupil Medication Policy.

11c. Storage

All Senior School medication is to be stored in the medication cupboard or the medical fridge in the Senior School Office. All Junior School medication is to be stored either in the medication cupboard, medical fridge or classroom. AAls should not be unavailable during any time the pupil is in the school's care and therefore if the office is not manned arrangements will need to be made for the safe storage of AAls. All medication stored in the school is to be recorded complete with expiry date.

12. EYFS - There is always a paediatric first aid trained member of staff on duty whenever Early Years

pupils are in school and the School will ensure that there are sufficient paediatric trained first aiders accompanies pupils on all outings. A list of trained staff is held by the school and are displayed in reception.

13. Monitoring

The Bursar will organise a regular review of the Accident book in order to take note of trends and areas of improvement. This will form part of the (at least) annual First Aid risk assessment.

The information may help identify training or other needs and be useful for investigative or insurance purposes. In addition, the Bursar will undertake a review of all procedures following any major incident to check whether the procedures were sufficiently robust to deal with the major occurrence or whether improvements should be made.

14. Staff Taking Medicine

It is recognised that arrangements may be needed for staff with particular medical conditions (for example, asthma, epilepsy, diabetes.) Staff with pre-existing conditions are identified when they join the school and are asked to inform their line manager if conditions arise during the staff member's time at the School. Where necessary, a specific risk assessment will be carried out and appropriate controls put in place.

Staff who are required to take prescription medication during a school day are obliged to ensure that it does not present a risk to others.

15. Health and Wellbeing

It is recognised that issues relating to the general health and wellbeing of staff and pupils at the School may be identified, such as those relating to emotional and sexual health (e.g. eating disorders, self-harm, stress related conditions.)

In the case of the pupils, this is addressed through the School's pastoral care system.

In respect of staff members, this is addressed through the School's management procedures, including the provision of information in respect of Health and Wellbeing.

16. Immunisations

The school will continually monitor the requirements for providing immunisations. The SLT and Health Manager will agree annually whether the school will host NHS immunisation teams to visit pupils although it is expected that this will go ahead.

Appendix A

Generic first aid advice

In the case of injury or severe pain do not give a child a drink. This could delay possible treatment if the child is required to have an anesthetic at hospital. It is permissible to moisten the lips with a tissue.

REMEMBER - A FIRST AIDER'S MAIN DUTIES ARE TO:-

Give immediate help to casualties with common injuries or illnesses and those arising from specific hazards at school.

When necessary, to ensure that an ambulance or other professional medical help is called.

MAKE SURE THAT ALL SERIOUS OR SIGNIFICANT INCIDENTS ARE REPORTED TO THE CHILD'S PARENTS AND A SENIOR MEMBER OF STAFF AS QUICKLY AS POSSIBLE.

Generic Policy for Asthma Care

Difficulty breathing:

- Contact a school first aider and/or the Health manager
- Loosen tight clothing such as tie & collar
- Ask if they are asthmatic and if they have their inhaler with them
- If yes, ensure they use their inhaler as prescribed (Emergency Inhaler may be available)
- Are they blue around the mouth? Grey coloured face? Breathing short and shallow?
- If the inhaler is making no difference or condition worsening after 5 minutes call (9) 999
- Ensure the school office is made aware of an ambulance being called and can assist with arrival of emergency services.

Generic Policy for Anaphylaxis

There are a number of pupils on roll at the school who are at risk of Anaphylactic shock due to different allergens and carry adrenaline auto – Injectors (AAI) for treatment. Pupils who are at risk of anaphylaxis due to food products will be made known to the catering staff.

Symptoms of an allergic reaction may include (but not limited to):

- Itchy eyes/ skin/ rash
- Tingling mouth, lips and tongue
- Swelling mouth, lips, tongue
- Difficulty in breathing, wheezy or croaky voice
- Feeling faint/ dizzy
- If these symptoms begin slowly or appear mild an anti-histamine (eg. Cetirizine or Loratidine) may be given in tablet or liquid form (read the packet for appropriate dosage).
- If these symptoms do not improve or are worsening within 5-10 minutes then the pupil's AAI must be used and (9) 999 must be called stating 'anaphylaxis'.

- AAls should be carried on the pupil's person. A spare AAI should be provided to the school to keep. These are stored in the School office.
- The school will order and maintain two 'spare' AAI to be stored in the school office and in the Senior School hot canteen. These are only to be used when there is no other medication and should not be considered when ensuring pupils have two AAls on site.
- Whilst school policy states two AAls must be provided for each pupil at the school, we are aware of the national shortage of AAls and therefore understands this is not always possible. The situation is being closely monitored and the policy will be amended if required.

Generic Policy for Automated External Defibrillators (AEDs)

This guidance is applicable to all those involved in the provision of first aid related to school activities who may use the Automated External Defibrillators (AEDs) and those responsible for maintaining them. This is to ensure there is adequate knowledge amongst staff about the use of the AEDs and their locations in school and to ensure appropriate staff have suitable training in the use of the AEDs.

The school has two AEDs, one in each school, both placed in the entrance lobby.

The AEDs should be used on any persons in Cardiac Arrest, meaning someone who is unconscious and not breathing.

All staff are aware of the AEDs, their location and manufacturer's instructions. All staff should partake in a short general awareness briefing. Selected staff should be made aware of how to perform maintenance checks on the AEDS.

First Aiders are more confident in using the AEDs and have undergone a more detailed training session using them.

All staff should be aware that all members of staff can use the AEDs, it is not limited to first aiders.

All AEDs should be checked by selected members of staff for errors, damage or any other maintenance concerns no less than weekly. A record of these checks are be kept.

The AEDs are stored in protected cabinets which should also be checked for any issues and immediately reported to the Bursar if issues are found.

In any incident where the AEDs are used, 999 should immediately be called.

After an incident SLT should support persons involved in aiding (which may include themselves) a cardiac arrest situation who may require support following the incident. If the AEDs are used, the person(s) responsible for the AED should be informed as soon as possible to ensure the AED can be used again with as small a delay as possible.

**Approved by
Chair of Governors**