

# First Aid Policy

Version Number: 2.1



HARDWICK HOUSE

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## **First Aid & Administration of Medicines for Pupils, Staff and Visitors**

### **Emergency Contact Details**

**Call 999** in the event of serious injury, then inform the Director or The Head of School or Deputy Head during working hours.

Call 01509 218203 in the event of minor injuries or to report a serious injury once an ambulance has been called.

### **Policy Statement**

Hardwick House School is owned and operated by Cavendish Education, the Proprietary Body, also known as the Governing Body. Any reference to governors means any director of Cavendish Education. Hardwick House School recognises its legal duty to make suitable and sufficient provision for first aid to pupils, staff and visitors, including those travelling or working away from School premises and to appropriately respect the confidentiality and the rights of pupils as patients. This includes the right of the pupil deemed to be 'Gillick competent' to give or withhold consent for his/her own treatment.

Written consent of the administration for the medical and dental treatment, first aid and non-prescription medicine is required from parents and guardians.

### **Purpose of the policy**

The purpose of this Policy is therefore:

- To provide effective, safe First Aid cover for pupils, staff and visitors.
- To ensure that all staff and pupils are aware of the system in place.
- To provide awareness of Health & Safety issues within school and on school trips, to prevent, where possible, potential dangers or accidents.
- To provide, only when necessary, effective and safe administering of medication.

### **First Aid**

There is provision in place for having at least one qualified person on the School site when children are present. NB The term FIRST AIDER refers to those members of the school community who are in possession of a valid First Aid at Work (FAW) certificate or equivalent. The names of those qualified and details of their qualifications can be accessed on the notice board in reception.

### **Responsibilities**

The management responsibility for all first aid functions is held by the governing body.

The governors and Head teacher will be responsible for promoting and implementing the policy by:

- Reporting accidents to the appropriate authority;
- Encouraging staff to take training in first aid;
- Authorising refresher training;
- Providing first aid cover;
- Maintaining adequate first aid supplies and equipment;

The governors and Head teacher of the school will:

- regularly monitor systems and the management of medical welfare including records of significant accidents to identify whether a review or change in welfare practice is needed.
- Ensure that there is always a qualified first aid person available on the school site.
- Report all staff accidents at work that fall under Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR).
- Provide adequate First Aid cover compliant with Health & Safety.
- Monitor and respond to all matters relating to the health and safety of all persons on school premises.
- Ensure all new staff are made aware of First Aid procedures in school through the induction process.
- Ensure that relevant insurances are in place.
- Ensure that first aid cover is available throughout the working hours of the school week.
- Ensure that they always obtain the history relating to a student not feeling well, particularly in the cases of headaches, to ensure that no injury has caused the student to feel unwell.
- Ensure that in the event that an injury has caused a problem, the student must be referred to a First Aider for examination.
- At the start of each academic year, provide staff with a list of students who are known to be asthmatic, anaphylactic, diabetic, epileptic or have any other serious illness.
- Have a file of up to date medical consent forms for every student. A separate medical consent form is required for each pupil for every trip or outing.

First Aiders will:

- Receive sufficient and suitable training to achieve the necessary level of competency and ensure that their training and qualifications are always up to date.
- Always attend a casualty when requested to do so and treat the casualty to the best of their ability in the safest way possible. This includes wearing gloves where any loss of blood or body fluid is evident, calling for help from other First Aiders or Emergency Services.
- Help fellow First Aiders at an incident and provide support during the aftermath.
- Act as a person who can be relied upon to help when the need arises.
- Ensure that their portable first aid kits are adequately stocked and always to hand.
- Insist that any casualty who has sustained a significant head injury is seen by professionals at the hospital, either by sending them directly to hospital or by asking parents to pick up a child to take them to hospital; ensure that parents are aware of all head injuries promptly.
- Ensure that a child who is sent to hospital by ambulance is either:
  - i) Accompanied in the ambulance at the request of paramedics. Followed to a hospital by a member of staff to act in loco parentis if a relative cannot be contacted or the parent is not present.
  - ii) Met at hospital by a relative.
- The First Aider need not be the member of staff to accompany the casualty to hospital, however, an appropriate person should be sent.
- Keep a record of each student attended to, the nature of the injury and any treatment given.
- In the case of an accident, the Accident Book must be completed by the appropriate person.
- Ensure that everything is cleared away, using gloves, and every dressing etc. be put in a bag for contaminated/used items and sealed tightly before disposing of the bag in a bin. Any bloodstains on the ground must be washed away thoroughly. No contaminated or used items should be left lying around.

Staff may be required to provide care and medical assistance as required in line with their job description.

Staff will:

- Familiarise themselves with the first aid procedures in operation. They will also ensure that they know who the current First Aiders are.
- Be aware of specific medical details of individual students.
- Ensure that their students are aware of the procedures in operation.
- Never move a casualty until they have been assessed by a qualified First Aider unless the casualty is in immediate danger.

- Reassure, but never treat, a casualty unless staff are in possession of a valid Emergency Aid in Schools Certificate or know the correct procedures; such staff can obviously start emergency aid until a First Aider arrives at the scene or instigate simple airway measures if clearly needed.
- Ensure that they have a current medical consent form (including contact details of each pupil's own GP) for every student that they take out on a residential school trip which indicates any specific conditions or medications of which they should be aware.
- Have regard to personal safety.
- Report all accidents occurring to themselves at work
- Support the First Aiders in calling for an ambulance or contacting relatives in an emergency
- NOT administer paracetamol or other medications

Parents will:

- Provide the school with sufficient and up-to-date information about their child's medical needs
- Give written permission for staff to administer medication
- Provide in date clearly prescribed medicines for the school to use
- Provide contact details for themselves or a nominated adult at all times
- Consent to allow information sharing between the school and healthcare providers

### **Accident prevention and procedure**

- The School assesses risks and makes appropriate first aid arrangements to deal with these risks. First aid provisions are to be reassessed annually or whenever there is a relevant change concerning those for whom the School is responsible or the hazards to which they are exposed.
- Additionally, the School will ensure that contractors on its premises either have suitable and sufficient first aid provision, or if the work involves no special risks, that the contract may include their use of the School's first aid facilities, by agreement.
- The First Aid procedure at Hardwick House School is in operation to ensure that every student, member of staff and visitors will be well looked after in the event of an accident, no matter how minor or major.
- It is emphasised that the team consists of qualified First Aiders. All School Staff receive basic first aid training on a three yearly cycle.
- In the event of an accident all members of the school community should be aware of the support available and the procedures available to activate this.
- Any First Aid trained staff may be called upon to make an assessment of the need for the provision of first aid.

Assess the situation

- Check the immediate area for hazards/danger and make the area safe.
- Get help – summon an ambulance by ringing 999. As soon as possible ask another person to inform Reception. The receptionist will ensure that a nominated person is asked to guide the emergency services to the nearest convenient point.
- Give emergency first aid, for which they have been trained and are competent.

Qualified first aiders and access to first aid equipment

- The names and normal location for each First Aider and the location of first aid kits are available in the medical room.
- The School recognises the need for training in first aid; qualifications are to be updated every three years. Records and dates shall be kept by the SLT of all First Aiders' qualifications and training shall be provided by suitable external organisations, such as St John's Ambulance.
- There is at least one person qualified in first aid on each school site when children are present.
- Staff who use contents of first aid kits are to ensure that they are replenished from the stores held in the medical room.
- First aid kits must be signed out and back in to the medical room by the designated First Aider for each off-site activity.

## Recording accidents, informing parents and RIDDOR

- An accident report must be fully completed by the staff member, pupil or visitor for all injuries incurred at work, on School premises or off-site activities, however minor. An Accident Book is maintained in the medical room; this book must be filled in as soon as possible after any injury. Accident reports will be kept, in accordance with current Data Protection requirements, securely in the medical room
- If, because of their injury, staff members, pupils or visitors are incapable of completing a report, then that report is to be completed by a person nominated by the injured person or those involved assisting or treating the injured person.
- The Head of School is responsible for reporting all notifiable accidents to the enforcing authorities, and when necessary, to parents of pupils. Any injury to the head must always be reported to parents.

## Arrangements for pupils with particular medical conditions

- Before trips, expeditions and activities, pupils are assessed with specific needs for asthma, epilepsy, diabetes, allergies and other declared medical conditions, including medication; these needs should be indicated as part of the risk assessment process.
- Epi pens are kept in marked boxes (with pupils' names) in the medical room in the safe. Administration of epi pens will normally be by trained staff.
- Buccal Medazolan will be kept in a marked box (with the pupil's name) in the medical room in the safe or a locked container when off site. Administration of Buccal Medazolan will be administered by trained staff.

## Hygiene procedures for dealing with the spillage of body fluids

- In the event of the spillage of body fluids, staff are to contact the facilities manager or Head of School, who will deal with the situation.

## Calling an ambulance

- If an ambulance is needed, call 999 for an ambulance and then inform Reception who will alert the Head of School. In the event of a casualty being a pupil, he or she must be accompanied to hospital by a member of staff. Under no circumstances must another pupil be used as an escort.

## Notifiable incidents and diseases

- In line with the Accident, Records and Notification procedures Hardwick House School will notify the HSE, under RIDDOR, of any serious accident, illness or serious injury to, or death of, any pupil whilst in our care, and of action taken in respect of it. A pupil's GP has the responsibility of reporting notifiable diseases and ensuring that a pupil is safe to return to school and not cause public health problems from infections. However, the School may seek advice from the Health Protection Agency if a pupil is believed to be suffering from a notifiable disease as identified under the Health Protection (Notification) Regulation 2010 (see Schedule 1 at the end of this policy). If Hardwick House School, without reasonable excuse, fails to comply with this requirement, we commit an offence. Contact details for Ofsted are as follows: [www.ofsted.gov.uk](http://www.ofsted.gov.uk) or by telephone on 0300 123 4666.

## Lessons Learned

- The Head of School will review all incidents recorded in the Accident Book at management meetings. The Committee will examine whether a future, similar incident could be avoided and what procedures, if any, could be put in place to reduce the likelihood of a recurrence.

## Nut Allergies

- A student or member of staff might have a serious nut allergy that may require the administration of an epi-pen in cases of an incident. The school operates a 'no nuts' policy. Pupils may not bring in cakes or other chocolates into school, unless they are nut-free. The staff room is also a nut free environment. If a pupil is prescribed an

epi-pen, they should hold epi-pens on their person in a small bag when away on trips/outings and at the School it is held in the medical room at all other times. All staff receive epi-pen training as part of their first aid training.

#### Epilepsy

- At present there is 1 pupil who has epilepsy which may require the administration of Buccal Medazolan in cases of an incident. The medication will be the responsibility of a trained member of staff when away on trips/outings, during which it should be stored in a locked container along with a blanket. It is held in the medical room safe at all other times. All staff receive regular epilepsy awareness training.

#### Physical Sickness

- If a pupil is physically sick inside the school building the area is covered then cleaned and disinfected by staff.
- At the beginning of each academic year all staff are made aware of all pupil's medical needs, (that have been supplied by parents regarding their children). This is confidential medical information and as such is kept within the confines of the medical room, compliant with Data Protection and the GDPR guidelines.

The following medical conditions / injuries are treated as set out below:

- Minor grazes and cuts are cleaned with water / sterile cleansing wipes and where deemed appropriate covered with a plaster. Details of pupil, date, time, injury, treatment and signature of the attending member of staff are recorded in the 'Accident book'. All staff are aware of the need for good hygiene practices when dealing with spillage of bodily fluids.
- All pupils with minor bumps to the head are assessed and an ice pack is usually administered. Details of the accident, are recorded as above are entered in the medical room 'Accident book'.
- Any time that the 'Accident book' is filled out, this is always followed up by a phone call home to inform parents.
- Pupils, who are assessed as having more serious bumps to the head, and possibly bleeding, are taken to the medical room and assessed. Parents are also informed at this stage. Details of the accident (name, date, treatment) are recorded in the 'Accident book' in the medical room.
- If the 'Accident book' is completed in association with a hold, a copy of this is also placed in the 'Incident book' which is held in reception.
- Where a suspected broken bone or dislocation has occurred the Head of School is contacted immediately and Parents are then contacted. In extreme cases it may be necessary to call for the assistance of an ambulance.
- Where a child presents as unwell, they are assessed by a member of staff and the pupil's parent(s) are contacted to come and take the pupil home.
- Where a pupil is physically sick, the parent(s) are contacted as a matter of course and asked to collect their child. The parent(s) are then asked to keep their child at home for at least 48 hours (from the last vomit).

#### Administration of Medicines

- Two members of staff must always be present (only those who have agreed – one needs to be a member of SLT or the Senior staff first aider) when administering medicines to pupils in cases where a child is prescribed four doses of medicine per day. In these cases the school MUST receive written consent and request, stating dosage and time. In other cases parents may by arrangement visit the school to administer medicines to their own child. All medicines that require refrigeration will be kept in the fridge within the locked staff room. Any staff medication will be kept in a separate labelled container within the fridge.
- Two members of staff must be present when administering any other medication.
- Medication cannot be administered in a school toilet.
- Prescription and non-prescription medicines will only be administered at school when it would be detrimental to the pupil's health or school attendance not to do so and where parents have provided written consent.
- Anyone giving a pupil any medication will first check the maximum dosages and when the previous dosage was taken. Parents will be informed.

The school will only accept prescribed medicines that are:

- In-date
- Labelled

- Provided in the original container, as dispensed by the pharmacist, and include instructions for administration, dosage and storage.

#### Asthma

- Where a pupil or pupils have an inhaler, this is kept on the child where the pupil is considered to be competent to manage their own medication.
- When the pupil attends lessons outside of school, e.g. PE or Games, the inhaler is with the pupil. Accompanying staff will be aware of pupils that regularly carry an inhaler.
- An assessment about the need for the administering of the inhaler is made through liaison with parents and assessment of the pupil.

### **Immediate action following a serious accident or incident on a school visit**

A copy of the following guidelines should be taken by all party leaders and their deputies.

A serious accident is defined as:

- An accident leading to a fatality, serious or multiple fractures, amputation or other serious injury
- Circumstances in which a party member might be at serious risk/have a serious illness.
- Any situation in which the press or media might be involved.

#### 1) Be Prepared

Brief your group on emergency procedures before they set off, including details of communications, so that they know how to deal with these should the party get split up.

#### 2) Care of Group in an emergency

- a) Establish nature and extent of the emergency. Advise other school trip staff of the incident and that emergency procedures are in operation.
- b) Ensure safety from further danger.
- c) Contact local emergency services immediately and follow their advice.
- d) Arrange for one adult to remain at the incident site to liaise with emergency services until the incident is over and all children are accounted for.

#### 3) Communication

- a) Contact the school
- b) Be ready to give the following information:
  - i. Telephone number you are calling from (and an alternative)
  - ii. What happened including details of injuries
  - iii. To whom
  - iv. Where
  - v. When
  - vi. What has happened since.
- c) If a fatality is involved, has this been confirmed? By whom?

#### 4) Next Steps and General Advice

- a) Parents and relatives will naturally be anxious to establish what is happening but do NOT let party members (staff or pupils) telephone home until after you have made contact with the School and this has been agreed. The School will arrange to contact the parents of those involved. In serious incidents the parents of all party members should be informed.
- b) Do NOT speak to the press or media. Refer enquiries to the local emergency services handling the incident on the ground and promise that "an official statement will be made through the school as soon as possible". Under no circumstances should the name of the casualty be divulged to the media.
- c) Do NOT admit liability of any sort to anyone.
- d) Do NOT allow anyone, apart from medical services, to see any party member without an independent witness being present.
- e) Retain all equipment involved in an unaltered condition.
- f) As soon as possible keep a written record of all that happens.
- g) Be as compassionate as possible with anyone involved.

- h) If you change location, remember to let the school/home based contact have the new telephone number at which you can be contacted.
  - i) You should follow the instructions from the local police/emergency services and, unless they request otherwise:
  - j) Keep the party together – if a pupil has to go to hospital, if at all possible, a member of staff should accompany them and stay with them until a relative arrives.
  - k) Keep in close contact with the School so that you can decide jointly what the next steps should be.
- Health Protection (Notification) Regulation 2010 Regulation 2(7)

## **Monitoring**

The execution of this policy will be monitored by the governors and Head of School.

Guidance for Health & Safety of Pupils on Educational Visits checklist (for staff) and <http://www.education.gov.uk/schools/adminandfinance/healthandsafety/f00191759/departmental-health-and-safety-advice-on-legal-duties-and-powers-for-local-authorities-headteachers-staff-and-governing-bodies>

Health & Safety of Pupils on Educational Visits

Health Protection (Notification) Regulation 2010

## **Schedule 1: Notifiable Diseases**

Acute encephalitis, Acute meningitis, Acute poliomyelitis, Acute infectious hepatitis, Anthrax, Botulism, Brucellosis, Cholera, Diphtheria, Enteric fever (typhoid or paratyphoid fever), Food poisoning, Haemolytic uraemic syndrome (HUS), Infectious bloody diarrhoea, Invasive group A streptococcal disease and scarlet fever, Legionnaires' Disease, Leprosy, Malaria, Measles, Meningococcal septicaemia, Mumps, Plague, Rabies, Rubella, SARS, Smallpox, Tetanus, Tuberculosis, Typhus, Viral haemorrhagic fever (VHF), Whooping cough and Yellow fever