

FIRST AID POLICY

Background

In accordance with Health and Safety legislation (Health and Safety (First Aid) Regulations 1981 and the amended regulations 2009), it is the responsibility of the governing body to ensure adequate and appropriate first aid provision is provided where there are people on the school premises and for the staff and children during off site visits and activities.

Consent to administer first aid and authorisation for the headmaster to allow hospital treatment, for a sick or injured child is obtained from parents on admission to the school and recorded on Isams.

Head Nurse: Mrs Fiona Lines, RGN

AIMS OF FIRST AID CARE

- Preserve life
- Alleviate suffering
- Prevent Condition from Worsening
- Promote Recovery
- To provide First Aid as necessary
- To promote health and safety awareness in children and adults.

FIRST AID PROVISION

- The headmaster is responsible for ensuring that there is an adequate number of qualified first aiders including arrangements for the EYFS department, where at least one person with a paediatric first aid qualification must always be present, and at least one paediatric first aid trained member of staff must accompany all outings.
- Portable first aid kits are taken on educational and sports visits, available from the medical centre.
- The Medical centre will ensure the maintenance of the first aid boxes and other supplies.
- The Deputy head of operations will maintain a register of first aid training and associated refresher dates to ensure that qualifications are maintained.
- A list of first aiders is available from the Deputy Head of Operations. First aiders are required to attend refresher training within 3 years of their qualified term.
- The school has a medical centre that is staffed by one nurse and two First Aiders. The Medical centre is manned from 08.00-17.00 each day, Monday to Friday. At all other times there are qualified first aiders on site.

- During these hours, the medical Centre staff take the lead in administering first aid. Most clubs and activities coincide with these timings.
- The Nurse will attend pitch side fixtures and sports days. In the Autumn term a Paramedic will be pitch side too.
- All staff will be regularly trained on a regular basis on basic aspects of First Aid. Training will be provided for staff for the administration of medicine (including administering inhalers for asthma, adrenaline auto injectors and diabetic care).
- Spillage kits for bodily fluids are located within the school.
- All staff will ensure that they have read the school's first aid policy and familiarise themselves on location of adrenaline auto injectors, emergency asthma kits, defibrillator and first aid boxes.

All medical centre staff hold a current first aid certificate. In addition, the following employees also hold a valid certificate: **See Appendix 1 for Qualified First Aiders**

FIRST AID BOXES

First aid boxes are in the following places in the school

(See Map for reference on School Web site)

- Sports pavilion
- Day room
- Pre prep Building held in the Kitchen
- Cottage nursery Kitchen nursery
- Middle school staff room
- Upper school staff Room - on the shelves next to the kitchen
- General studies room
- Science In the prep room
- Sports Hall
- Design technology room
- Estate's office - on the table worktop
- School minibuses and people carrier- on the shelf above the front seats.
- Boarding House

Pre prep and nursery have further miniature kits which are taken out at playtime.

- Pre-Prep In staff room: to be taken outside at playtimes
- Cottage Nursery - Hanging on wall by the children's sinks in main room
- Kitchen First Aid box (maintained by Catering Company)
- First Aid Boxes are checked twice termly. All checks recorded and dated
- First Aid bags are taken to away matches and any school trips. First Aid bags checked and restocked on return.

Adrenaline Auto Injectors held in medical centre back room, in the grey cupboard.

Contents of First Aid Box:

First aid boxes are green with a white cross.

First aid boxes should contain individually wrapped sterile hypoallergenic dressings (assorted sized plasters) 6 medium sized wound dressings. 2 Large sized wound dressings, micropore, and, wound dressing/bandage, disposable gloves, eye pads, triangular bandage. First aid Leaflet.

No medicine or tablets are to be kept in the first aid boxes.

Appendix 2 indicates where all the First Aid boxes are located

Defibrillators

- Located outside Medical Centre on wall
- In the Cricket Pavillion
- On the wall of snug opposite the sports centre

Duties of a First Aider

- Respond promptly to calls for assistance.
- Give immediate assistance to casualties with injuries and illness.
- Ensure that an ambulance or professional medical help is summoned as appropriate.
- Ensure ambulance is given correct full postal address of St Hugh's school.
- Ensure front desk is informed by first aider or allocated adult that ambulance has been summoned and direct them to exact location of casualty.
- All serious incidents should be reported to the Headmaster or deputy head and nurses informed.
- Headmaster or deputy head to immediately inform parents of child that ambulance has been summoned.
- Any significant injury should be assessed by the nurse in the medical centre.

Procedures

In School

- Accident or medical incidents should all be reported to the nurse on duty.
- In the event of a significant accident, a member of SLT will accompany the child to hospital and parents will be asked to go to the hospital immediately.
- Parents should be contacted if there are any doubts over the health and welfare of a child.

- If staff are concerned about the welfare of a child – or identify injuries which may not be accidental, they should follow the procedure set out in the schools safeguarding policy and procedures.
- All accidents are recorded on school accident forms.

Calling an ambulance from the medical centre

In most circumstances an ambulance will be called by the staff in the medical centre. There may be times e.g., anaphylactic shock, where an ambulance needs to be called immediately. If an ambulance is required dial 9 999 or 9 112, state you require the ambulance service, answer any questions concerning the incident as briefly as possible, the school address is:

St Hugh's School, Carswell Manor, Carswell, Faringdon SN7 8PT

- Tell the operator exactly where the incident has taken place.
- Ensure member of staff is asked to meet the ambulance at the main gate to direct them to the incident on the school premises.
- Having contacted the emergency services ensure that the Headmaster and medical centre are also informed immediately.

Out of School Excursions

- Educational visits: The Headmaster has responsibility for ensuring staff adhere to the educational visits policy when organising a visit.
- First aid should form part of the risk trip assessment, and one member of staff must be assigned as the person in charge of first aid arrangements.
- A risk assessment will need to be carried out as part of the preparation for an educational visit. The medical centre will require prior knowledge of trips, so the first aider can be informed of pupils with any medical conditions.
- A mobile telephone must be taken on visits and to offsite activities.
- A qualified paediatric first aider must escort trips when children in EYFS are away from the school premises.
- First aid kits must be taken to all outside fixtures/trips.
- First aider will assess situation and once the extent of the injury has been identified, if necessary, dial 999 or 112 for further medical assistance.
- All serious incidents should be reported to Headmaster or deputy head and nurses informed.
- Headmaster or deputy heads to inform parents of a child that ambulance has been summoned.
- The first aider must record accurate details of accident and treatment given to the child and complete an accident form on the day of the accident.
- There are small first aid bags that should be taken on residential and non-residential trips in the UK. Larger medical bags are provided for overseas trips.

- Larger medical bags should contain: first aid kit, antibacterial soap/wipes for handwashing, sick bags, medication for travel sickness, and other appropriate contents for specific trips. Spare Asthma inhalers, Auto injectors where appropriate.
- The Medical Centre should be informed, so that information can be recorded on the child's ISAM's record.
- On return from trip, any First Aid supplies used, must be replaced in the first aid bag.

Accidents and Illness Procedure

All significant accidents to a child, member of staff, visitor or a contractor should be reported and assessed by the medical Centre staff. The staff member who witnesses occurrence of an accident must record the incident on an accident report form for the child. The medical centre staff will then complete the accident form with treatment given and report as necessary to Health and Safety Committee. For staff and visitors, they will be asked to complete an Accident form.

RIDDOR

(RIDDOR means the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 which came into force on 1 April 1996)

These regulations require the reporting of work-related accidents diseases and dangerous occurrences, should an employee have an accident at work which results in:

- over seven days absence from work because of sickness
- A major injury or condition
- A fatality, the Health and Safety Officer should be contacted immediately.

If a non–employee has an accident and requires hospital treatment, this too should be reported to the Health and Safety Officer.

Accident record sheet is available online - Microsoft Teams: All Staff: Welfare: Medical Accident Form

All EYFS accidents/injuries and first aid treatment given should be reported to the parent on the same day. A treatment advice sheet must be completed and given to parents.

Designated Safeguarding lead (DSL) will be notified of any serious injuries of a child whilst in the care of the school.

Guidance on Managing Diabetes within the school

We currently have one pupil with diabetes type 1

Parents are responsible for:

- Providing diabetes equipment for their child in school.
- Providing a detailed health care plan that will be drawn up for the child in conjunction with the paediatric diabetes specialist nurse and the John Radcliffe Hospital/Great Western Hospital team, describing daily

routines for the child's management of glycaemic control (hypo/hyperglycaemia, including signs and symptoms).

Staff are responsible for:

- Attending diabetes training sessions and updates and undertaking two online diabetes modules basic and advanced
- Gaining knowledge on signs and symptoms of hypoglycaemia / hyperglycaemia
- Being knowledgeable on treatment decisions.
- Being alert to signs and symptoms of a hypoglycaemic/hyperglycaemic episodes and managing this as per the child's care plan and knowing when to get further help and assistance.
- Calling the school nurse immediately if there are any concerns about the child.
- The teacher on lunch time duty is responsible for overseeing the child during lunch and reporting to the nurses if lunch is not finished by the pupil.

Allocated members of staff will be responsible for pre-meal blood glucose levels and monitoring what the child has eaten and informing the nurse on duty.

For children with Type 1 diabetes, specific school staff will be trained to supervise premeal blood sugars readings, and insulin delivery, in accordance with the child's care plan Hypoglycaemia (Low blood glucose level)

Signs and symptoms:

- Deteriorating levels of behaviour or response
- Sweaty, cold or clammy skin
- Feeling hungry
- Weakness or faintness
- Pallor, sweating or clammy skin
- Drowsiness or confusion
- Nausea
- Shallow breathing
- Irritable or aggressive behaviour

Treatment of Hypoglycaemia:

- Aim is to raise the blood glucose levels as soon as possible
- Wash hands with soap and water and dry well.
- Blood glucose readings should be supervised or be taken and recorded by a trained member of staff.

Treatment of Mild Hypoglycaemia:

- If the child is alert and conscious then liquid glucose or glycojuice will be given, according to their care plan.

- Blood glucose level should be checked after 10 - 15 minutes (after the child has washed their hand or cleaned their finger) or scanned

Treatment of Moderate Hypoglycaemia:

- If the child is drowsy then glucogel will be instilled into the inside of both cheeks in accordance with their care plan.

Treatment of Severe Hypoglycaemia (Unconscious or fitting):

- Stay calm
- Place child in the recovery position
- Maintain child's airway
- Stay with the child
- Call 999 state "child having a severe Hypoglycaemia"
- Call the medical centre - the nurse will administer Glycogen which is stored in medical fridge

Hyperglycaemia (High blood glucose level)

Signs and symptoms:

- Thirst
- Greater need to go to the toilet
- Tiredness and weight loss.

Treatment of Hyperglycaemia:

- The child should attend the medical centre
- If the child is unwell, vomiting, or giving off a smell of acetone the child needs urgent medical attention.
- The member of staff assisting the child should inform parents.

Dealing with Accidents involving Bleeding, and Body Fluid Spillage

All blood and body fluid spillages should be regarded as potentially infectious, and the same precautions applied to each incident.

All body fluid spillages should be cleaned up immediately.

Precautions:

- Before contact with blood or body fluids any skin lesions – disposable gloves must be worn.
- Splashes of blood or body fluid onto the skin should be washed off immediately with soap and water.

- Ensure all contaminated items are disposed of in clinical waste bag provided by Attack Hygiene Company.

Cleaning Procedure

1. Wear disposable gloves and apron.
2. Never use mops to clear up body fluid or blood but absorb spillage with paper towels/absorbent powder.
3. Contact Estates Manager and refer to Infection Control Policy

Epilepsy

We currently have no pupils in school with Epilepsy.

Parents would be responsible for:

- Providing a detailed health care plan that will be drawn up for the child in conjunction with the paediatric epileptic specialist nurse and the John Radcliffe Hospital/Great Western Hospital team, describing daily routines for the child's management of their Epilepsy.

Boarders becoming ill in the night

The following guidance refers to a pupil who becomes unwell from 17.00 to 08.00 hours

If unwell, boarders are instructed to use the intercom system to contact the resident house tutor. Pupils will be assessed by her, and the house parents informed, if necessary, out of hours service will be contacted. Headmaster will be contacted if appropriate and parents informed if required during the night.

In the case of an illness the following steps should be taken:

- If the illness will continue to hinder the sleep of others in the same dormitory, the resident house Tutor will remove the child from the dormitory and take them to the sick bay provisions.
- The Residential House Tutor will explain the intercom system so that the pupil can call for assistance, if he/she requires.
- The pupil will be given with food and drink when necessary.

Arrangements for pupils with medical conditions on site.

Every child with a diagnosed medical condition that potentially requires care within the school day has a care plan that is written in consultation with the parents of that child.

Prescription medications are kept separately in the medical centre and handed over to residential tutor at 5pm when the medical centre is closed.

Recording of Incidents

All incidents where first aid has been administered should be recorded on ISAM's for each child.

The following incidents should be reported to parents to ensure that they are aware of an incident and any actions or follow up that are required. These may include:

- Head injuries – sport and non-sport
- Significant Bone, joint and muscle injuries
- Severe bleeds
- Vomiting and diarrhoea
- Asthma attack
- Anaphylactic shock
- Foreign object in eye, nose, or ear
- Seizure
- Hypoglycaemic attack

Administering Medicines

Any medicines brought into school by parents of a child, must be clearly labelled with the child's name on the original packaging. The expiry date will be checked. A consent for medication form must be signed and completed by parent/guardian for any medication not listed on original St Hugh's medical consent form.

The nurse on duty or trained Staff who have completed in house training on administering medicine can administer medicines.

A record will be kept on ISAMS of any medicine administered. If a child is administered either Paracetamol or Ibuprofen a white wrist band will be applied to the child's wrist stating the date, time, name of medicine and amount given.

All Medication will be stored in an appropriate locked medicine cupboard or in a drug fridge.

If inhalers are brought into the school, it is the parent's responsibility to ensure that they inform the medical centre.

EYFS

- There will be a qualified paediatric first aider with children at all times.
- All accidents or injuries/illness's and the first aid applied will be reported to parents the same day or as soon as is reasonably practical.
- All administration of medicines will be reported to parent the same day or as soon as is reasonably practicable.
- Parents should not bring children to school ill and should inform the school of any significant infection (see Policy on Returning to School who have been unwell).

Monitoring and Review

Reviewed by Head Nurse: June 2022

Next Review: June 2023

Appendix 1: List of Qualified First Aiders September 2021

Surname	Forename	First aid at work 3 days	Paediatric First aid	Emergency Paediatric first aid	Emergency first aid at work 1 day
Bickell	Charlotte	19.1.23	7.6.24		
Blanchard	Anna		29.9.22		
Blythe	Jessica		7.6.24		
Botsford	Lisa		29.9.22		
Clarke	Katie				19.4.24
Coles	Sarah				19.4.24
Collier	Alice		29.9.22		
Dale	Susan				19.4.24
Dickens	Liz				19.4.24
Du Plessis	Jill		25.2.24		
Dupee	Beth	1.3.24			
Ewins	Sally	21.1.23			
Farrow	Robert	1.3.24			
Farrow	Gill		25.2.24		
Flower	Harriet		25.2.24		
Habberley	Kate		13.5.24		
Hiscock	Anna		29.9.22		
Hobbs	Matthew				19.4.24
Lines	Fiona	15.4.24			
Lings	Netty		7.6.24		
Maitland	Dan		7.6.24		
McCully	Helen		24.2.24		
McInnes	Fiona				8.4.24
Noble	Katharine			21.1.25	
Pargeter	Denise	1.3.24			
Paul	Russell				22.2.23
Perry-Evans	Harriet			21.1 2025	
Perry-Evans	Kevin				
Rundle	Joel				19.4.24
Steenart	Kayleigh		25.2.24		
Thomasson	Virginia				19.4.24
Walsham	Rachel		25.2.24		
Wood	Tabitha				19.4.24
Wright	Jonny				4.6.24

