

## **First Aid, Health & Hygiene Policy**

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## 1. Policy Statement

Chandlings School has a duty to provide adequate and appropriate first aid cover to pupils, staff and visitors. The procedures are in place to meet those responsibilities and are clearly stated within this policy.

## 2. Aims

- To identify the First Aid needs of the School, both on the premises and for off-site activities, in accordance with the requirements of the Health and Safety Executive.
- To ensure that First Aid cover is available at all times while people are on school premises.

## 3. Objectives

- To appoint the appropriate number of suitably trained people as First Aiders to meet the needs of the School.
- To provide relevant training and to monitor the training needs of staff, as an ongoing process.
- To provide and maintain sufficient and appropriate resources and facilities, including a specific room for First Aid treatment.
- To keep staff and parents informed of the First Aid arrangements in place.
- To keep accident records and to report relevant information to the HSE as required under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR).

## 4. First Aid Policy

In the case of first aid emergency staff must adhere to the following procedure:

- Contact the office who will immediately summon the School Nurse or her deputy.
- Depending on the nature of the injury, the School Nurse may send a pupil or staff member to Kennington Health Centre, (e.g. a scratched eyeball), the number being 01865 730911. The Kennington Health Centre is responsible for dealing with general practitioner matters. Alternatively, the School Nurse may contact the parents to take the child to seek medical attention.
- The School Nurse ensures the appropriate first aid is given, i.e. a sling to a suspected broken arm.
- School Nurse to decide whether a parent or an ambulance is required, and will then log details of the accident or incident on the School's Management System, iSams.
- In line with EYFS regulations (3.50) 'Providers must inform parents and /or carers of any accident or injury sustained by the child on the same day or as soon as reasonably practicable of any first aid treatment given.'

## 5. Staff Providing First Aid Cover

Our School Nurse is Sinead Ferramosca. There are, in addition a number of certified first aiders: Hayley Hurford (paediatric first aider), Jessica Willsher, Teresa Masih, Mary-Cait Love, Hana Uvirova, Hannah Waldron, Megan Wootten and Connor Blakey.

Hayley Hurford and Jessica Willsher are currently Teaching Assistants in EYFS and are on site together with Sinead Ferramosca.

Most teaching and administrative staff have received “emergency paediatric training” and epipen training.

If an accident/injury happens away from Chandlings School, i.e. at an away match or school trip, then the senior person is responsible for ensuring the child receives medical treatment. The school should be informed as soon as possible and on return all details must be given to the School Nurse for documentation.

*The ‘Minibus, Travel and Matches’ Policy has further guidance.*

All staff providing First Aid cover must hold a valid certificate of competence, issued by an organisation approved by the HSE. First aid training should be tailored to working with children, where possible. As the School is not considered a high risk area, Appointed Persons may also provide first aid cover provided they have had appropriate HSE recognised training.

The School has a Registered School Nurse on site who is responsible for providing First Aid cover to pupils, staff, parents and visitors to the School. She is on site from 08.00 until 16.00 every day. She always carries her “Bleep” through which the Office contacts her. If she is unavailable, her deputy will carry the “Bleep” and deal with any emergencies. Teaching staff attend First Aid training sessions and Games staff are qualified to give First Aid. All staff responsible for providing First Aid must be prepared to give immediate help to casualties with common injuries or illnesses and those arising from specific hazards at school. They must ensure that an ambulance is called, when necessary, or other professional medical help is requested. Staff and pupils are aware that the Registered Nurse on duty is the first person to call in the event of an accident, although Games staff are usually first at hand for sporting injuries. The Registered Nurse may then be sent for if further attention is required.

A risk assessment of the site shows that the site is low risk and it was determined that the School Nurse was the only member of staff that required the 2 day first aid qualification and that all other staff members should have the 1 day qualification. The Paediatric first aiders require a two day qualification course.

The Registered Nurse is responsible for ensuring that all members of staff are aware of pupils who pose a potential medical emergency, including asthmatics, diabetics and those with anaphylactic allergic reactions. Information on these particular pupils is posted in the Staff Room and in their medical records.

Any child who has a fluctuating conscious level following an injury to the head must be taken to hospital to exclude serious head injury. Parents of children going out of school must always be made aware if the child has received an injury to the head during the school day. They should be advised of the action taken at the time and any further action that may be required.

IN THE EVENT OF A LIFE-THREATENING SITUATION, AN AMBULANCE SHOULD BE REQUESTED IMMEDIATELY BY THE FIRST RESPONSIBLE PERSON TO ARRIVE ON THE SCENE. FURTHER ASSISTANCE SHOULD THEN BE SOUGHT.

**The School phone number is 01865 730771. The School postcode is OX1 5ND.**

## 6. First Aid Equipment and Facilities

A separate private room is available for anyone requiring medical treatment. A locked medical cabinet is available for storing provisions. There is also a washbasin located in this room. First Aid kits are available in various locations throughout the School including:

- Staff room
- Kitchen
- Swimming pool
- Boys' Games room
- Girls' Games room
- Art room
- Woodwork room
- Science Lab
- Groundsman's Shed
- Laundry
- Playing Fields
- Pavilion, Lantern Hall and Main Hall
- Shed in the playground

There are also First Aid and sporting injury bags available for staff to take off site for school trips and sporting fixtures. The Registered Nurse is responsible for checking and restocking first aid kits.

### Arrangements for pupils with particular medical conditions

In the event of a child joining the school who has a pre-existing medical condition, the school will identify the level of support required for the child and an individual day plan will be devised.

This should have details:

- Of the child
- Parent contact numbers
- An additional emergency contact name and telephone number
- Doctor's reports
- What constitutes an emergency
- Action to be taken in an emergency
- Who to contact
- Staff who need to be informed
- Dietary needs, medications and activities

## 7. Reporting Accidents to the HSE (RIDDOR)

In accordance with the Health and Safety General Policy, the Bursar is responsible for reporting any notifiable injuries, diseases or dangerous occurrences to the school doctors as well as Accident/Incident Reporting Centre.

Members of staff have a duty to alert the Bursar to such incidents and must complete an Accident Form, which should then be submitted to the Bursar. A record of any First Aid given by first aiders should be kept including the following information:

- The date, time and place of the incident
- The name of the injured person
- Details of their injury and what first aid was given
- What happened to the person immediately afterwards

- Name and signature of the person requesting First Aid and the first aider or person dealing with the incident.

The Accident Forms are kept in the Nurse's Office at Chandlings and it is the responsibility of the School Nurse to ensure that these records are correctly maintained. Details of any accidents/injuries should also be recorded in the appropriate medical notes by the School Nurse.

In line with EYFS guidelines (3.51) registered providers must notify Ofsted, (child protection agencies if applicable) of any serious accident, illness, or injury to, or death of, any child while in their care, and of the action taken. Notification must be made as soon as is reasonably practicable, but in any event within 14 days of the incident occurring. A registered provider, who, without reasonable excuse, fails to comply with this requirement, commits an offence.

## **8. Emergency Procedures**

In the event of an accident to a pupil, it is the responsibility of the senior person present to ensure that the procedures outlined below are fully observed, whether the accident occurs at Chandlings School or elsewhere.

Full details of the incident should be reported to the School Nurse as soon as possible.

### ***Unconsciousness and Broken Bones***

If a pupil suffers a serious injury of any description, causing for example, prolonged unconsciousness or an obviously broken limb:

He should not be moved (apart from being turned carefully into the recovery position if unconscious)

He should be kept warm

A responsible adult should inform the Nurse to tell her where the pupil is, the suspected injury and the name of the pupil. If the pupil can walk he/she may be taken to the Nurse. If the accident is on the playing fields, a member of staff should be sent to the main gate to direct the ambulance.

### ***Head Injuries***

If a pupil suffers a blow to the head and subsequently loses consciousness (for however short a period of time), appears dazed or confused or suffers any disturbance of vision:

- They should not resume any game or activity in which he might have been engaged.
- They should be taken to the Nurse's room as soon as possible, accompanied by someone who saw the incident and can give some account of it to the Nurse. An ambulance will be summoned if necessary and parents informed.

### ***Spinal Injuries***

If a fracture of the neck or back is suspected (one common symptom being pains or 'pins and needles' in the arms or legs), the pupil must on no account be moved until he is seen by a paramedic or doctor, who may wish to apply a cervical collar to immobilise the neck. Should the pupil become unconscious and the airway be in risk of obstruction, he should be placed in a modified recovery position, protecting the neck and back.

### ***Eye Injuries***

If a pupil is hit in the eye and experiences pain or mistiness of vision, even if only temporary, he/she should be referred to a doctor that same day, since any delay in treatment may seriously endanger recovery. Pupils playing football should not wear glasses; contact lenses are permissible.

### ***Bleeding***

If a pupil suffers from a nose-bleed or any other form of bleeding, he should not continue with any game or other activity in which he might have been engaged until the bleeding has stopped and the wound has been covered.

Note: Bleeding from the ears or a clear discharge from the ear indicates the possibility of spinal injury and a pupil must not be moved until the arrival of the emergency services.

### ***Away from Chandlings (offsite)***

If an accident happens at another school or away from Chandlings, procedures similar to those outlined above must always be followed: an ambulance should, if necessary, be summoned, and full details of any accident should be reported to Sinead Ferramosca, the School Nurse, who will then inform the parents, as soon as is practicable.

### ***Sporting Fixtures***

First Aid cover is provided for all teams, both home and visiting. The games teacher is trained in First Aid and will assess whether further aid is necessary. Pupils may then be sent to see the Nurse if appropriate. Medical attention should always be sought when serious injury is suspected, and the casualty should not be moved in this instance. Parents must always be informed if a child has been taken to hospital as the result of an injury or accident, so they may choose to meet the member of staff and child at the hospital.

*The 'Minibus, Travel and Matches' Policy has further guidance.*

### ***Agreed Protocol for Health & Safety Issues in Sport***

Designated First Aid Co-ordinator: School Nurse and in her absence, Head of Games.

### ***Accidents to Pupils on the Games Field***

Procedure to follow when there has been an accident:

- Teacher in charge of game/referee to stop match immediately
- Players who are concussed - if only for a moment - should be taken to the Nurse's room and may be taken to hospital for observation. Unresponsive casualties must be seen by the School Nurse before further action is taken.
- The staff member is responsible for the injured pupil until the arrival of the School Nurse or trained First Aider.
- The staff member is responsible for contacting the main building to inform the School Nurse.

### ***Major Injuries***

1. Call for assistance: School Nurse explains suspected injury, i.e. spinal, limb, head.
2. If suspected spinal injury protect airway, call an ambulance and leave on the pitch.
3. Call Paramedics on 999.

4. Basic observations: keep patient immobilised until arrival of First Response/Paramedics. Keep warm.

*Only after the Doctor is satisfied, should the staff member allow the game to restart.*

All accidents must be reported to the Nurse using the appropriate report procedure. First Aid bags are available to be taken out to games and should always be taken to away matches.

Staff members to be aware that there are First Aid kits in set locations.

All members of Staff are required to have knowledge of the uses and application of equipment in First Aid bags. Questions or problems should be addressed to the Nurse, and all injuries reported.

### **Away Games**

The School Nurse is to inform attending staff at away matches of any pupils with allergies/epipens/hearing aids etc. before away matches.

### **School Matches**

First Aid kit with School Nurse to deal with any injuries. In emergencies there is an additional First Aid kit in the main building. All staff must report to the School Nurse any serious injuries or asthma attacks that occur during Games.

All accidents must be reported, using an Emergency Incident Report Form. Blank forms are available from, and should be returned to the Nurse.

The Nurse or senior member of staff will inform parents of serious accidents or injuries as soon as possible.

A copy of the BAALPE Safe Practice in Physical Education is available from RAS and all games Staff are expected to be familiar with this document

Regular First Aid courses are run for Staff, usually as part of the Pool Attendants' Course. Staff have completed The STA Level 2 Certificate as NaRS Pool Attendant. This qualification includes an element of First Aid training in dealing with unconscious casualties and CPR. These qualifications are renewed every two years.

## **9. Illness Policy**

On entry to the school, the parent of each child completes a Health Form and from this form the School Nurse and School secretary are responsible for maintaining a list of children with medical conditions or problems. The Nurse shares this information where appropriate.

Any child who has vomited or has diarrhoea will be sent home, and should not come back into school until they have been clear of symptoms for 48 hours.

Public Health England guidelines state: '48 hours exclusion from school for diarrhoea and vomiting is recommended'. However, we understand that this presents difficulties for working parents. In an incident when a child has had only one episode of diarrhoea/vomiting the 24 hour policy on absence remains applicable at the discretion of the School Nurse.

## **10. Infection Control/Hygiene**

Basic good hygiene procedures should be followed by all staff, at all times. Disposable gloves should be worn when treatment involves blood or any other body fluids. Dressings and contaminated equipment should be disposed of in an appropriate manner.

## 11. Health Policy

1. All medicines to be kept in a locked cupboard. Key holders: School Nurse only.
2. Prescribed medication should only be used for the pupil for whom it was prescribed.
3. Pupils should only be given medication in line with any relevant parental consent, and only by an authorised member of Staff, or the School Nurse.
4. Easy Access to Asthma Medication – under supervision.
5. Individual pupil records should show main known drug reactions and major allergies, and should be checked before medication is requested or given. (Allergy lists are available in the School Nurse's Office, the Kitchen, and the Staff Room). Parental requests regarding medication are kept in the surgery.
6. Strict record keeping of all medications, creams etc. administered to the pupils – plus incident form.
7. All medical records kept safely and accessible only by the School Nurse.
8. Unused prescribed medication should be promptly and safely disposed of, or returned to Pharmacy/Chemist.
9. First Aid bags available at designated areas of school. Regularly checked and updated by School Nurse.
10. First Aid bags held by Games staff and are available for away matches.

## 12. Storage and Administration of Medicines

- Prescribed and non-prescribed medicines must be stored in locked cupboards/storage in the Nurse's room.
- Pupils do not self-medicate. On school trips and for away matches, inhalers, epipens etc. will be carried by a member of staff. Household remedies (i.e. non-prescription medicines) are not used. The exception to this rule would be for severe asthmatics, who may be permitted to carry their own inhalers on runs, etc. The school nurse can provide more details on which pupils may fall into this category.
- Ideally medicines should be administered by the School Nurse. In an emergency a member of staff may administer medication, in the case of an epipen, for example.
- Staff may administer medication under the guidance of the School Nurse.
- A record must be kept of any medication given. The Nurse will check the records periodically.
- No Chandlings School pupils are considered Gillick competent.
- In line with the EYFS guidelines (3.19) 'staff medication on the premises must be securely stored and out of reach of children at all times'.

If staff are in any doubt as to how to handle/administer medicines, advice should be sought from the School Nurse.

### **13. Treatment and Prevention of Head Lice**

- Please make sure your son or daughter has a nit comb.
- Please inform us if your son or daughter ever returns to School with head lice.
- Regular haircuts will help us to detect the presence of lice.

### **14. Guidance Notes for All Staff: Anaphylaxis (Anaphylactic Shock)**

Symptoms:

- Apprehension
- Sweating
- Feeling of faintness
- Headache
- Dizziness
- May be a burning sensation around the mouth
- A sensation of lump in the throat which may progress to hoarseness indication swelling of vocal cords.
- Airways may be obstructed

Immediate treatment is required:

- Stay calm – get help – contact a trained member of staff
- Place child on floor in a sitting position to help relieve any breathing difficulties
- **Call an ambulance**
- Requires Adrenalin Injection – to be administered by a trained member of staff

Storage, administration and disposal of adrenalin:

- Parents to ensure supplies are maintained
- Storage in a place known to all staff
- Dosage as specified by GP
- Dispose of syringe in jar or sealed container, Nurse or other designated First Aider will collect
- Record date, time and action taken

Alert arrangements:

- All staff to receive information with photograph and instructions
- Copy to be displayed in the medical room, staff room and dining room at Chandlings

### **15. Asthma Policy**

Pupils with asthma are encouraged to take a full part in all activities at school.

- All children have immediate access to their inhalers.
- Each pupil has their own labelled, zipped, plastic wallet with a labelled inhaler and spacer in an unlocked cupboard in the Nurse's Office.
- All children in the Prep department have an extra inhaler in the Pavilion on the sports field with access during games and matches,
- Some of the older children prefer to carry their own inhalers but are advised to keep a second inhaler with the School Nurse.
- A list is kept of the children who are asthmatic and the expiration date on their inhaler.
- A record is kept of the times a child uses his/her inhaler.

- Staff are made aware of children who have asthma when going on School trips and sports matches.
- Pupils with asthma take part in all activities at School.
- The school is aware of all children with asthma as this is kept on their medical record on the School database (iSams) which is accessible to all staff.
- We have introduced asthma cards for parents to complete on admission to the School.

### **EMERGENCY ASTHMA INHALER KIT**

On the advice from the UK's Commission on Human Medicines Committee, following an evaluation of risks and benefits, it has been recommended to the Department of Health to allow schools to hold a salbutamol asthma inhaler for emergencies. The government guidance for the use of these emergency inhalers can be found at:

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/360585/guidance\\_on\\_use\\_of\\_emergency\\_inhalers\\_in\\_schools\\_October\\_2014.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/360585/guidance_on_use_of_emergency_inhalers_in_schools_October_2014.pdf)

The emergency kit is kept in the Front Office for use in an emergency only if the child has an acute asthma attack and the Nurse is unavailable at the time. In addition, the emergency salbutamol inhaler should only be used by children, for whom written parental consent for use of the emergency inhaler has been given, who have either been diagnosed with asthma and prescribed an inhaler, or who have been prescribed an inhaler as reliever medication. This is only for children already diagnosed as having asthma or who have been prescribed a salbutamol inhaler. Normally on admission to Chandlings, the parent would have already given consent for the administration of the emergency inhaler.

Inside the kit there is a log which needs to be completed if the inhaler is used. There is a list of all the children prescribed inhalers along with the expiration dates of their inhalers. Any child who is given the emergency inhaler must be recorded and the parent informed.

Both Susan Brennan and Ashley O'Regan are trained in the administration of the emergency inhaler and ensuring that the protocol is followed.

The content of the emergency inhaler kit is as follows:

Salbutamol Inhaler

Two spacers

Log to record the children's names

A list of children on prescribed inhalers along with the expiration dates.

### **16. Swine Flu Policy**

1. Send staff members who become unwell at school home immediately, and not to return until fully recovered.
2. Any child who becomes unwell should be sent home as soon as possible. The child should be cared for in a separate area (isolation room) while awaiting collection. Staff caring for the child should keep at least one meter away from the ill child or use PPE (Personal Protective Equipment) if needed, i.e. disposable gloves, aprons and masks.

3. Make sure the school has an up to date contact details for all parents, guardians and staff.
4. The school GP should be informed of any suspect cases.
5. Health Protection Agency (HPA) should be contacted particularly if any staff/child requires hospitalisation.
6. Reinforce general education/staff about washing hands and respiratory hygiene. "CATCH IT, BIN IT, KILL IT"
7. Ensure liquid soap and disposable paper towels are available at each hand washing facility.
8. Maintain supplies of alcohol gel, where hand washing facilities are not available e.g. entrances/exits, for visitors/delivery.

## **17. Common Infectious Diseases Policy**

### ***Diarrhoea and Vomiting***

- Keep children at home until free of symptoms for 48 hours.
- Public Health England guidelines state: '48 hours exclusion from school for diarrhoea and vomiting is recommended'. However, we understand that this presents difficulties for working parents. In an incident when a child has had only one episode of diarrhoea/vomiting the 24 hour policy on absence remains applicable at the discretion of the School Nurse.

### ***Fever***

- Children to remain at home until 24 hours free of fever without the aid of medication. When a child has Calpol, or a similar medication, this artificially lowers their temperature temporarily making the child appear fully recovered. However, the child must remain at home until fully recuperated, without the aid of medication.

### ***Impetigo***

- Confirmation by doctor and to remain at home until treatment has commenced and lesions have crusted.

### ***Conjunctivitis***

- Does not require time off school once treatment has commenced. At least 2x2 hourly treatments.

### ***Slap Cheek***

- Confirmation by doctor, does not require time off school unless unwell.

### ***Hand Foot and Mouth***

- Does not require time off school unless unwell.

### ***Head Lice***

- Does not require time off school, hair needs to be checked, treated and tied back.

**Chicken Pox**

- May return to school no sooner than 5 days after the first spots appeared and when the child feels well.

With all infectious diseases, a notice is placed on the doors of the relevant classroom so that parents are informed, in case of pregnancy.

**18. Document Information**

Version Number	1.2
Reason for Version Change	Annual Review
Name of owner/author	Anna Poole
Name of individual/department responsible	Anna Poole, Admissions
Target Audience	Public
Date issued	12 <sup>th</sup> January 2017
Where available	School website / Console
Review Date	January 2018