



HALSTEAD

PREPARATORY SCHOOL FOR GIRLS

13a 13c 13d First Aid Policy, Including Pandemic and Control of Infection Policies

INCLUDES EYFS

Policy History		
Review Date	March 2016	
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Policy Amended	April 2017	
Review Date	September 2017	MP CW PA
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Review Date	January 2019	MP TB PA
Review Date	January 2020	MP CW TB PA
Date of Next Review	January 2021	

FIRST AID POLICY

Aims

This policy outlines the school's responsibility to provide adequate and appropriate first aid to pupils, staff, parents and visitors and the procedures in place to meet that responsibility. We aim to ensure that first aid provision is available at all times while people are on school premises and also off the premises whilst on school trips.

The care extends to first aid provision, the administration of medicines, dealing with asthma and head-lice. Policies to deal with pandemics and control of infections are included at the end of this document.

Objectives

- To give clear structures and guidelines to all staff regarding all areas of first aid and medicines
- To ensure an appropriate number of staff are suitably trained and the designated First Aider in the school is known by all
- To enable staff to know where their responsibilities lie
- To ensure the safe use and storage of medicines in the school
- To ensure the safe administration of medicines in the school
- To ensure good first aid cover is available in the school and on visits

Guidelines

All staff are given access to this policy. Policies are read and discussed as part of staff induction. The policy is regularly reviewed and updated.

Training

All staff are offered regular first aid training and at all times over 70% of the staff are first aid trained. Fully trained first aiders attend retraining courses as required.

Staff receive update training within 3 years as this is a statutory requirement.

First Aid Kits

First aid items are kept in the following areas in the school:

- Pre-Prep Cloakrooms
- Kitchen See Chef
- Office - there are 3 first aid Kits (2 of which are travel kits)
- Science Laboratory
- Year 6 Building
- Food Tech Room
- Main Hall
- Medical Room
- Library/ICT room
- Art Room

The designated First Aider regularly checks and replenishes first aid kits.

Parental permission

Medicines must not be administered unless we have a completed Prescribed Medication Consent Form from the parents. The signed forms are kept in the pupil record file once medication has been administered.

In the event of a child in school with medicines and without written parental permission, we will attempt to gain consent for the administration by email. If we are unable to contact parents the medicine will not be administered.

Storage and administration of medicine

No medicines should be kept in the class or the child's possession. All medicines are kept in the fridge or in the locked cupboard in the first aid bay, under the responsibility of the office staff. All medicines must be clearly named. Administration of medicine takes place in the first aid bay at the back of the school office. When medicine is administered (usually by the Designated First Aider) a dated entry must be recorded in the first aid log. Before administering medicines staff should read the entry section of the log to check the medicine has not already been administered. Parents are informed of the date and time of the administration of any medicines via a first aid slip being sent home.

Medicines in school

What can be administered?

In school we administer calpol and calpol+ medicines which are kept in school for emergencies. We administer medicines for long term conditions with approval from the Headmistress.

Prescribed medicines

If a child is unwell she should not be in school. There are, however, times when a child is recovering but still taking prescription medicines or she may have long-term medical needs. In these cases it may be possible to give doses of PRESCRIPTION MEDICINES, provided that these are brought to the OFFICE each day by a parent or other adult with the prescribed medication labelling and box/bottle or care plan. A Prescribed Medication Consent Form must be completed and signed.

In accordance with the revised EYFS Statutory Framework (April 2017) 3.45, prescription medicines must not be administered unless they have been prescribed for a child by a doctor, dentist, nurse or pharmacist. (Medicines containing aspirin should only be given if prescribed by a doctor.) Parents of EYFS children are advised of the medicine given, the dose and time, on the day it was administered in accordance with the revised EYFS Statutory Framework 3.46.

The medicines will be kept in the locked cupboard in the first aid bay (or stored in the first aid bay fridge) and should be collected each day. This is at the discretion of the Headmistress. Please note that we will not be able to give the medicine unless it is in the original packaging and the prescription labelling and dosage is clear.

Anti-histamine

A fully trained first aider can administer anti-histamine in school. We will administer these as stated or when required.

Calpol

Calpol or Calpol+ can be administered in an emergency by a fully trained first aider. A check that permission has been granted will always be made before administering it. A first aid slip will be sent home so parents are aware what time the medication was administered.

Creams

Staff are not permitted to use any creams on cuts and grazes, only water should be used. We can administer emollient creams (not steroids) for skin conditions e.g. eczema. However, staff must not rub cream into a child's body unless express permission has been given by the parents. Application of these creams must be made under the observation of another adult.

Inhalers

Inhalers and Epipens for pupils in Y3-6 are kept in the office. Inhalers for EYFS and Pre-Prep are kept in the classroom. Inhalers and Epipens must always be taken to sports afternoons and any off site activity.

Other medication for long term conditions

In the event of long term conditions requiring administration of medication, permission and clear instructions from the parents must be obtained. Administration of medication for certain conditions, e.g. diabetes, epilepsy etc., is only permissible by staff who have received specialist training for that condition and where we have an agreed care plan for the child.

Accidents/illness in school

Practical arrangements at point of need

- If the administration of first aid is required, staff/ pupil should immediately call for/ inform the office. Alternatively, if it is safe for the injured person to walk to the office they will be accompanied by another pupil or member of staff.
- The reporting person (form teacher or other adult reporting the injury) will take charge of the situation, summoning a First Aider if needed.
- The levels of injury to be treated on site are those the First Aider has been trained for.
- In an emergency, or an immediate need before the First Aider can attend, the member of staff at the scene will ensure that an ambulance is called immediately.
- Whilst waiting for the ambulance the reporting person will note important and relevant note information. This information will be shared with the attending emergency crew.
- If the incident involves a pupil, the office will ensure that the parent/carer of the pupil is informed. In the event of a serious injury or accident the Head or SMT member will inform parents and report it to relevant bodies if necessary. The reporting member of staff/pupil and the First Aider should record the incident in the first-aid log and inform the Headmistress of the incident and its outcome. In the event of any injury or for a sick child the child is given a slip so that staff are aware and the parent/carer is notified.

During lesson times the teacher decides when a child should be sent to the office because she is unwell/injured.

The pupil is monitored/treated in the office. If deemed really unwell parents are phoned and the child is collected. All pupils who attend the first aid bay are given a slip to explain the reason for the visit and any first aid treatment given. This is shown to the teacher if the child seems well enough to return to the class so that each teacher is alerted to possible relapses or worsening of the condition. The slip is taken home to inform the pupil's parents. The parents

of EYFS children are informed on the same day, or as soon as reasonably practicable, by either a member of the office team or by a member of the EYFS staff.

ANYONE TREATING AN OPEN CUT OR BODILY FLUIDS SHOULD USE RUBBER GLOVES, WEAR AN APRON AND DISPOSE OF THEM AND ANY WASTE BY PLACING THEM IN THE DESIGNATED BIN WITH YELLOW HAZARDOUS WASTE BAGS IN THE FIRST AID BAY.

This is emptied daily into the yellow 'unspecified clinical waste' bin which is emptied by specialist contractors (PHS) weekly.

Bodily spillage kits are used for larger volumes of such fluids and are disposed of in the same way.

Bumped Heads

Any bumped head, however minor, is treated as serious. Parents are always informed (via a slip being sent home) and a phone call if appropriate.

Vomiting and diarrhoea

If a child vomits or has diarrhoea in school they will be sent home immediately. Children with these conditions will not be accepted back into school until 48 hours after the last symptom has elapsed. The Caretaker will be contacted to clean the affected area.

Headlice

Staff must not touch children or examine them for head-lice. If we suspect a child has head-lice we will inform the parents for them to examine them. When we are informed of a case of head-lice in school we send a standard letter to the class where the case has been identified. The child is sent home to be treated

Chicken pox and other diseases, rashes

If a child is suspected of having chicken pox etc. we will look at their arms and legs. The parents will be informed and asked to seek confirmation from a doctor. The child must stay off school for the recommended period of time.

Accident Reporting

All accidents at school, however minor, must be recorded on the "Accident, Incident and Illness Register" situated in the office.

The reporting slips must be given to the student involved and put in their planners for parents to see.

Pupils with medical conditions/at risk of anaphylaxis

All staff must familiarise themselves with children who are prescribed Epipens and have serious medical conditions. A recent photograph of each girl is on display in the Staffroom, together with photographs of all girls with major medical problems. Lists of these girls are distributed at the start of each school term and updated during the year if necessary.

Specialist Training

Relevant and, in some instances, all staff receive training from outside agencies and specialist nurses e.g. for administering Epipens and medication associated with long term conditions such as diabetes and epilepsy. Anaphylaxis training is regularly updated with all staff.

OUTINGS

When planning an outing, staff should include the following equipment on the trip;

- First Aid Box - checked by the staff in the office
- Sick Bags, Wet Wipes, Tissues, Gloves
- Any inhalers, Epipens or prescribed medicines
- Antihistamine
- Calpol, Calpol 6+
- Mobile phone - in case of an emergency
- (See Educational Visits Policy)

RESIDENTIAL TRIPS

On residential trips the safety of the children is paramount. The guidelines in this policy are followed. Epipens and inhalers are always kept with the adult supervising the child along with any other essential information.

Staff on the trips always make the staff at the destination aware of any issues such as those with food allergies and inform their staff about children with inhalers, Epipens or any other important medical issue.

Before all residential trips parents fill out a medical form containing information containing:

- the names and contact numbers to contact if needed in case of emergency
- the details of the child's doctor
- any allergies the child suffers from
- any medication the child is taking
- latest vaccination dates
- any other information which may be useful to staff on the trip such as things the child is frightened of, bedwetting, sleepwalking etc.
- food allergies

All parents are invited to an information meeting for parents a few weeks in advance of the trip. They are made aware who the designated first aider is for the trip and are welcome to speak to them then or are encouraged to make a separate appointment to see them if medication needs to be given.

If a child needs medication on the trip parents are asked to:

- provide the medicine which must be in date and in the original packaging
- provide accurate information about the dosage and how to administer the medicine
- If the dosage is different from the instructions a medical letter will be asked for.

The staff member will in charge of first aid will:

- Ensure that medication is with the member of staff looking after the child who needs it.
- Ensure that children receive their medication.
- Administer any medication in accordance with the instructions provided on the box at the appropriate times
- Keep a record of the times and dates of medicine administered

- Keep a record of any accidents and action taken. They may not have dealt with the incident first hand should the child have been in another group but the other staff should report it for the record.
- Give the record to the office on return should it be required for future
- Fill in an accident report form if any accident is sufficiently serious
- Keep the school (headmistress if out of school hours) informed should a child need to be taken to hospital for further treatment.
- Ensure that the information from the parents is taken with the child should they need to go to hospital

If a child needs to be taken to hospital the activities of the children remaining will be monitored to ensure that ratios are suitable and the children are safe.

Epipen Policy

The school operates a total nut free policy.

Pupils at risk of Anaphylaxis must have at least two named Epipens in school; one is kept in the office, one in their Form Room. Staff need to take 2 Epipens to all activities outside school. The Epipens kept in the Office and the Form Rooms are taken by the PE teacher or supervisor to any off-site sporting activities. For any other off-site activities the member of staff responsible for First Aid on the trip will carry the Epipens from the PE Office and the Office. A red emergency information card and brief instructions for its use will be kept with each pen.

Epipens are prescribed solely for individual use and should not be administered to another girl. **Parents are responsible for making sure that the pens are named and are not out-of-date.**

Any staff member who is unhappy about administering the Epipen injection must inform the Headmistress at the beginning of each school year.

Epipens are used to administer emergency first aid treatment for Anaphylactic Shock. The symptoms of this include:-

- | | |
|--------------------------|--|
| 1. Airway Obstructed | hoarseness
wheezing
swollen lips/tongue
itching sensation in throat |
| <i>and/or</i> | |
| 2. Breathing Irregularly | breathlessness
noisy breathing
unable to communicate verbally |
| 3. Circulation impaired | pallor
clammy skin
rapid or weak pulse
may be blue around the mouth |

Procedure for using the EpiPen

Once Anaphylactic Shock is identified administer **EpiPen** injection **IMMEDIATELY**.

If in any doubt give the injection.

The procedure is outlined below. Please see instructions on the EpiPens for specific details of that child's EpiPen, e.g. colour of the safety cap.

1. Inform office immediately that anaphylaxis is suspected and an ambulance should be called. You will also need to inform the office as to whether the patient is conscious or unconscious *(The office will telephone for an ambulance stating that a child has collapsed with Anaphylactic shock and is conscious or unconscious.)*
2. Check the epiPen is in date and for the correct pupil. Administer the epiPen. Note time epiPen administered. .
3. **STAY WITH THE CHILD** and ensure the airway is clear.
4. Place in recovery position if necessary
5. Administer the second EpiPen if the child does not respond or symptoms do not improve within 5 minutes
6. Transfer the child to hospital with the emergency card, used EpiPens and details of the time they were administered

Calling an Ambulance Procedure

If a staff member is in any doubt then an ambulance should be called

1. When an emergency is notified to the office contact the Ambulance Service – 999 immediately stating the symptoms and whether a child is conscious/unconscious, breathing or not. Arrange for a member of staff to wait for ambulance to assist on arrival.
2. Inform the Head or acting SMT member. They will contact parents.
3. Ensure that the member of staff dealing with the issue records the time and any other relevant details to be taken to the hospital.
4. Give this information to the Ambulance staff.

RIDDOR

We have guidance notes from Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR). Most incidents that happen in school or on school trips do not need to be reported. Only in limited circumstances will an incident need notifying to the Health and Safety Executive (HSE) under RIDDOR. The information sheet gives us practical guidance about what we need to report and how to do it.

Staff Regulations specifically relating to EYFS

(Taken from the EYFS revised regulations)

(3.19) Practitioners must not be under the influence of alcohol or any other substance which may affect their ability to care for children. If practitioners are taking medication which may affect their ability to care for children, those practitioners should seek medical advice. Those practitioners must only work directly with children if medical advice confirms that the medication is unlikely to impair that staff member's ability to look after children properly. Staff medication on the premises must be securely stored, and out of reach of children, at all times.

**First Aid Trained Staff Members
(The courses included Anaphylaxis & Epipen Training)**

Surname	First Name	Emergency First Aid at Work Training (6 hours) (Valid 3 years)	Early Years First Aid & Anaphylaxis Training (12 Hour) (Valid 3 years)
Allen	Cheryl	03/09/2019	N/A
Austin	Penny	03/09/2019	N/A
Baggaley	Lizzie	03/09/2019	N/A
Baker	Leah	N/A	03/09/2019
Baker	Susie	N/A	03/09/2019
Beard	Tracy	03/09/2019	N/A
Bollons	Elie	N/A	07/01/2019
Brennan	Rob	03/09/2019	N/A
Buchholtz	Camilla	N/A	03/09/2019
Cane	Debbie	N/A	03/09/2019
Connelly	Jennifer	N/A	07/01/2019
Crew	Caroline	03/09/2019	N/A
Deen	Clare	03/09/2019	N/A
Diliberto	Donata	N/A	03/09/2019
Eaton	Melanie	03/09/2019	N/A
Elstone	Natasha	03/09/2019	N/A
Emmerson	Cathy	03/09/2019	05/09/2016
Fahy	Natasha	N/A	03/09/2019
Garman	Sharon	N/A	03/09/2019
Glover	Alex	03/09/2019	N/A
Hemsworth	Sam	03/09/2019	N/A
Inglis	Linda	N/A	03/09/2019
Jackman	Kirsty	03/09/2019	N/A
Johal-Coombs	Avneet	03/09/2019	N/A
Johnson	Lesley	N/A	03/09/2019
Kelly	Katie	03/09/2019	N/A
Larosa	Marco	03/09/2019	N/A
Lytle	Christine	03/09/2019	N/A
Patrick	Michelle	N/A	03/09/2019
Portelli	Louise	03/09/2019	N/A
Redding	Carla	03/09/2019	N/A
Roberts	Brittany	15/07/2018	03/09/2019
Robertson	Sophie	03/09/2019	N/A
Rondeau-Smith	Susan	03/09/2019	N/A
Savill	Lee	03/09/2019	N/A
Scanlon	Diane	N/A	03/09/2019
Shah	Saba	03/09/2019	N/A
Smith	Katie	03/09/2019	N/A
Tighe	Bev	03/09/2019	N/A
Tudoran	Simona	03/09/2019	N/A
Wardle	Chris	03/09/2019	N/A

PANDEMIC POLICY (This Policy also includes the EYFS)

Aim of the policy

To ensure the health and safety of the whole school community in the event of a pandemic and to provide a procedure if a pandemic occurs. Halstead will keep up to date on the effect of a pandemic on schools in the UK by regularly checking the DCFS website at www.dcsf.gov.uk and taking advice from educational bodies e.g. IAPS.

Our SCC contact details are:

Surrey County Council
County Hall
Room 168
Kingston upon Thames
Surrey
KT1 2DJ

Tel 03456 009009

Fax 020 8541 9503

In the event of any identified epidemic or pandemic we would seek information from the NHS and give advice accordingly.

NHS 111 – NHS Choices

General hygiene guidelines

We advise all members of the school community to:

Catch it – germs spread easily. Always use a tissue and use them to catch your cough or sneeze.

Bin it – germs can live for several hours on tissues. Dispose of your tissue as soon as possible. Tissues must be put in the bin. Class bins should be placed near the door so the caretakers have easy access to empty them regularly.

Kill it – hands can transfer germs to every surface they touch. Clean your hands as soon as you can

CONTROL OF INFECTION POLICY (This Policy also includes the EYFS)

Control of Infection: Policy Guidance

This guidance is applicable to all employees and / or contractors of the school who undertake activities associated with infection control.

To ensure that the school prevents the spread of infection by:-

- Maintaining a clean environment
- Practising good standards of personal hygiene

Guidance:

The Headmistress, Bursar and Senior First Aider will be responsible for the implementation and review of this guidance.

Good hygiene practice will be followed by all those involved with:

- General cleaning
- Cleaning of blood and body fluid spillages
- Clinical waste
- Laundry
- Use of personal protective equipment

Bites, injuries and sharps:

- Where skin is broken, make the wound bleed and wash thoroughly with water.
- Report to the School Office for treatment

Animals:

- Animals can carry infections, so always wash hands after any contact
- When visiting farms check hand washing facilities and ensure that children do not eat or drink whilst touring the farm, or put fingers into mouths etc. Use waterproof plasters to protect any cuts or grazes not covered by clothes

Vulnerable Children:

- Some medical conditions make children vulnerable to infections that would not normally be serious by reducing immunity. These may include cancers and those on steroids. Such individuals are particularly vulnerable to chickenpox, Parvovirus B19 (slapped cheek) and measles. If they are exposed contact the Senior First Aider immediately.
- Shingles is caused by the same virus as chickenpox and therefore anyone who has not had chickenpox is potentially vulnerable if they have had contact with a case of shingles.
- If in any doubt seek advice from the senior First Aider.

Pregnancy:

- If a pregnant woman develops a rash or is in direct contact with someone with a potentially infectious rash then the Senior First Aider should be contacted immediately.
Points to consider include:
 - German measles (rubella). If a pregnant woman comes into contact with German measles she should inform her GP and ante-natal carer immediately.
 - Slapped cheek disease (Parvovirus B19) can occasionally affect an unborn child. Any potential exposure should be reported to the ante-natal carer.

- Chickenpox can affect the pregnancy if a woman has not already had the infection. Any potential exposure should be reported to the GP and ante-natal carer.

Immunisations:

Immunisation status should always be checked at school entry and at the time of any vaccination. Any immunisations that have been missed should be addressed via the School Office.

Legal Requirements & Education Standards

References:

- A: Handbook for the Inspection of Schools - The Regulatory Requirements, Part 3 (www.isi.net)
- B: Health and Safety Executive, (www.hse.gov.uk/)
- C: ["Health and Safety at Work" Section H of the ISBA Model Staff Handbook,](#)
- D: ["Health and Safety and Welfare at Work" Chapter N of the ISBA Bursar's Guide](#)
- E: ["Insurance" Chapter K of the Bursar's Guide by HSBC Insurance Brokers Ltd](#)
- F: Vaccines, diseases and immunisations (www.immunisation.nhs.uk)
- G: Department for Health (www.dh.gov.uk)



Ratified by
Simon Brookhouse on behalf of the Governing Body

Date: Monday 16th March 2020