

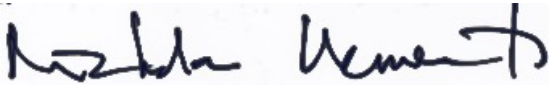


# BRONTE SCHOOL



## FIRST AID GUIDELINES (Including EYFS)

	Date	Signed
Date reviewed	Sept 2019	 (Mrs Katie Hickmott, School Nurse)
Date reviewed	Sept 2019	 (Mrs. Emma Wood, Headmistress)
Ratified by Proprietor	Sept 2019	 (Mr. Nicholas Clements, Proprietor)
Date of next review	<b>SEPT 2021</b>	

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These guidelines were written with reference to the “Guidance on First Aid for Schools” by the DfEE, also with reference to Independent Schools Inspectorate and the Health and Safety (First-Aid) Regulations 1981.

## **Definitions**

“**First Aid**” means the treatment of minor injuries or illnesses. Emergency aid or treatment given to someone injured, suddenly ill, etc., before regular medical services arrive or can be reached. First Aid can save lives and prevent minor injuries becoming major ones.

“**First Aiders**” are members of staff who have completed an approved First Aid course and hold a valid certificate of competence in First Aid at Work (FAW) or Emergency First Aid at Work (EFAW). Both of which are approved by the Health and Safety Executive (HSE). This training is renewed every three years.

**The names of Bronte staff that are qualified in first aid and/or paediatric first aid are listed in Appendix C.**

“**Appointed Persons**” are members of staff who are responsible for looking after the First Aid equipment and facilities and calling the emergency services if required.

“**Staff**” means any person employed by the school, volunteers at the school and self-employed people working on the premises.

The “**School Nurse**” is Katie Hickmott (paediatric nurse) who is registered with the Nursing Midwifery Council (NMC), working part time for Bronte School.

## **Aims of These Guidelines**

- To ensure that the school has adequate, safe and effective First Aid provision in order for every pupil, member of staff and visitor to be well looked after in the event of any illness, accident or injury, no matter how major or minor.
- To ensure that an adequate number of staff are first aid trained and are available on site when children are present and on outings. This training will be renewed every three years.
- To ensure that First Aid is administered in a timely and competent manner following the guidelines set out in this document.
- To ensure that all staff, pupils and parents are aware of the procedures in the event of any accident or injury
- To ensure that a paediatric first aid trained member of staff will be present when children in EYFS are present, and one will always accompany an EYFS trip off-site.

## **Who is responsible?**

The Proprietor and Headmistress of Bronte School has the overall responsibility for ensuring that there is adequate and appropriate First Aid equipment, facilities and First Aid personnel, and for ensuring that the correct First Aid procedures are followed.

The Headmistress is responsible for ensuring that all staff have the appropriate and necessary First Aid training as required, and for ensuring that the school has the minimum number of First Aiders with reference to First Aid Risk assessment, (available on request).

The School Nurse has the responsibility of collating all medical forms, ensuring that the forms and information are accessible to staff as necessary, and to check all First Aid points and keep First Aid resources stocked up.

The main duties of First Aiders are to give immediate help to pupils, staff or visitors with common injuries or illnesses when needed, and to ensure that an Ambulance or other professional medical help is called if required.

The Appointed person for First Aid will take charge when someone is injured or becomes unwell, ensure that an ambulance or other professional medical help is summoned when appropriate, and ensure that First Aid points are known by staff and that they are adequately stocked.

The Headmistress should regularly review the school's first-aid needs (annually), and particularly after any changes, to ensure the provision is adequate.

The guidance states that the minimum First Aid provision is:

- A suitably stocked First Aid container
- An appointed person to take charge of First Aid arrangements
- Information for employees on First Aid arrangements
- This minimum provision must be supplemented with a risk assessment to determine any additional provision. (available on request)

## **First Aid Points and Equipment**

The Medical Room is located on the ground floor of the school, and holds all first aid equipment needed. The School Nurse is also based here.

First Aid boxes are marked with a white cross on a green background and are stocked accordingly to the school's needs, taking into account the recommended First Aid Guidelines.

First Aid boxes are located at various points around the school, as near to hand washing facilities as possible. These boxes can be found at the following locations:

- Main office (also has a spare for off-site activities)
- Orangery
- First floor – on shelf in toilets between Kindergarten and Reception
- Year 1 Classroom
- Year 2 Classroom
- Year 3 Classroom
- Year 4 Classroom
- Year 5 Classroom
- Homework Teas Room
- Basement- kitchen cupboard
- Caretaker Workshop
- Medical Room (big First Aid box is kept for off-site PE/ whole school trips)

If First Aid boxes are used, contact should be made with the School Nurse so that they can be restocked as required. All stock will be held in the Medical Room.

School minibuses also have their own First Aid boxes on board which is readily available and kept stocked as required.

Off-site activities or school trips: Staff should inform the School Nurse of any off-site activities. A spare First Aid box should be collected from the main office, along with the medical forms of the children going and any medication required.

For off-site PE, the big First Aid box should be taken (kept in medical room), ensuring plenty of disposable cold packs are within it

### **Pupil Information**

Parents are requested to complete a medical form prior to admission to the school; this provides consent for the administration of First Aid treatment.

The School Nurse will be responsible for reviewing the medical forms, and liaise with the Headmistress, class teachers and First Aiders if deemed necessary regarding any medical needs. The School Nurse will advise catering of any food allergies. Medical forms will be completed annually by parents to ensure information is relevant and up to date.

For those children that require a care plan, a copy will be given to the class teacher and a copy kept in their file. Those with severe medical needs, care plans will be displayed on a notice board in the staff room to ensure that all staff are fully aware.

The School Nurse will also inform staff and First Aiders of those that require inhalers or Auto-Injectors E.g. Epi-pen. Ideally one will be kept in the child's classroom, and a spare will be kept in the Medical Room, however, in the case of only one being available it will be kept in the Medical room, which is easily accessible from the playground at lunch break. Where appropriate, individuals will be responsible for keeping their own medication with them, and this will be reviewed regularly.

Children who need to take medication during the school day must hand it to the office staff and parents will be required to complete a consent form. Without the consent form medication will not be given. A record will be kept of all medication held and when administered. (Please refer to the Supporting Pupils with Medical Conditions Policy)

### **Procedure in the Event of Illness**

If a child feels ill at school, they must firstly report to their class teacher. If the teacher deems it necessary, they will see the School Nurse or another appropriate First Aider. Arrangements will be made for the child to be picked up by a Parent or Guardian if required.

Children should not be brought to school if they are displaying signs of illness. If parents do bring children to school and staff feel that they are unfit for school, parents/carers will be contacted and requested to come and collect their child and requested not to return until they are symptom free.

If a child becomes unwell with vomiting and / or diarrhoea they must refrain from coming to school until 48 hours after the last episode of illness.

The school does not aim to exclude children unnecessarily. However, the decision is final when requesting the exclusion of a child for illness or infection. The school will seek advice from the School Nurse and follow any advice from the Health Protection Agency.

Designated members of Staff may administer Paracetamol and other homely remedies to the pupils if deemed necessary following the protocol for administering medication to an individual. Consent will be obtained from the parent/guardian prior to doing so. (Please refer to Supporting Pupils with Medical Conditions Policy)

If any medication is given during the school day, the parent will be informed the same day or as soon as reasonably practicable. This will state the time and dose that was administered to the child.

### **Procedure in the Event of Accident or Injury**

Minor incidents and accidents should be dealt with by the first member of staff on the scene, who will assess the situation and take the appropriate action taken. Appointed First Aider or School Nurse can be called for if deemed necessary. Each incident should be recorded in the

duplicate accident book. A copy is given to the class teacher who will give it to parents/guardians at the end of the school day, and a copy kept in the book as a record. The child should return to class or playground as soon as possible.

More serious accidents or injuries must still be recorded in the same way as above, but if they require GP or Hospital follow up, an entry must be made in the appropriate accident book, (Complies with the General Data Protection Regulation GDPR). This can be located in the medical room.

If a child needs hospital treatment in a non-urgent situation, the parent will be contacted to accompany the child to hospital. If the parent cannot be contacted, then an ambulance will be called and a member of staff will accompany the child to hospital. Every attempt will be made to contact the parent or another emergency contact listed by the parent. The accident book must then be completed.

In an emergency a trained First Aider will attend to the casualty. In the event that they feel that they cannot adequately deal with the presenting condition, then they should arrange for the injured person to access appropriate medical treatment without delay by dialling 999. If the casualty shows no signs of life Basic Life Support should be commenced whilst waiting for the Emergency Services to arrive.

If an ambulance is called, then the First Aider in charge should make arrangements for the ambulance to have access to the location on site.

In the case of a pupil requiring emergency services, arrangements must be made for a member of staff to accompany the pupil to hospital. Parents will be contacted as soon as possible.

If a child sustains a bump to the head, it will be recorded in the head Injury accident book, a head injury slip must also be completed (see Appendix A). This will be given to the class teacher who will give it to parent/ guardian at the end of the school day. Parent may also be contacted by telephone informing them of the injury.

If a child has sustained an injury outside of school, for example, a fracture or a burn, an Existing Injury Form (Appendix B) must be completed by the member of staff to whom the injury was reported. The form will then reside in the safeguarding file.

At the Bronte School a “blue star system” may be used in an emergency. Each classroom and area of the school has a blue star. If an emergency happens in any area of the school, anyone (child or adult) can take the blue star to another member of staff which informs them that help is needed immediately. Each star has the name of where it came from on it.

## **First Aid Arrangements for Children with Medical Needs.**

Asthma (Please also refer to the Guidelines relating to Asthma and procedures for use of inhalers). Children with asthma may be required to carry an inhaler on their person if appropriate. Generally, children have an inhaler stored safely in their classroom for easy access, and have a spare inhaler in school which is kept in the medical room. However if the child only has one inhaler in school it will be kept in the medical room.

**Call for help** in the event of an asthma attack, the child should have immediate access to their reliever (blue) inhaler. The following steps are also listed in the Guidelines relating to Asthma and use of inhalers procedures:

- Keep calm and reassure the child
- Encourage the child to sit up and slightly forward
- Use the child's own inhaler- if not available, use the emergency inhaler
- Remain with the child while inhaler and spacer are brought to them
- Immediately help the child to take two separate puffs of the salbutamol via the spacer immediately
- If there is no immediate improvement, continue to give two puffs every two minutes up to a maximum of 10 puffs, or until their symptoms improve. The inhaler should be shaken between puffs
- Stay calm and reassure the child. Stay with the child until they feel better. The child can return to school activities when they feel better
- If the child does not feel better or you are worried at ANYTIME before you have reached 10 puffs, CALL 999 FOR AN AMBULANCE
- If an ambulance does not arrive in 10 minutes give another 10 puffs in the same way
- The child's parents should be contacted after the ambulance has been called
- A member of staff will always accompany a child taken to hospital by ambulance and stay with them until a parent or carer arrives.

Staff will be trained in how to care for children with asthma if any children are present with this condition.

### Allergic Reaction

There are many triggers but should a child have an allergic reaction then staff should:

- Always take treatment to the child
- Stay with the child
- **Call for help**
- For minor reaction give prescribed dose of anti-histamine
- For severe reaction, **administer auto-injector and send someone to get an ambulance**
- Call the parents to inform them of the situation



Staff will be trained in how to administer an auto injector if any children are present with one in the school.

### Epilepsy

Children with epilepsy have a tendency to have recurrent, unprovoked seizures. An individual health care plan will be in place and should be followed. In the event of someone having a seizure staff should:

- **Call for help**
- Stay with the child
- Do not restrain the child
- Do not move the child unless in immediate danger
- Move any objects out of the way
- Do not put anything into their mouth
- Once the jerking has stopped put the child into the recovery position. Check that the airway is clear
- Talk reassuringly to the child
- Call the parents to inform them of situation

### **Hygiene and Infection Control**

All staff should take precautions to avoid infection and must follow basic hygiene procedures. Staff should have access to single-use disposable gloves and hand washing facilities, and should take care when dealing with blood or other bodily fluids and when disposing of dressings or equipment.

- Cover any cuts or abrasions on their own skin with a waterproof dressing.
- Disposable gloves must be worn when treatment involves blood or other bodily fluids.
- Biohazard spill kits are provided by the school.
- Place all soiled paper towels and gloves in a sealed (yellow) disposable bag to be disposed of in an appropriate manner.
- Wash hands after every procedure.
- The areas should be cleaned with detergent and/or disinfectant following manufacturer's instruction.
- House-keeper and/or cleaning staff to be informed.

### **Reporting and Record Keeping**

A record of First Aid must be kept of accidents and any first aid treatment given. Parents are informed of any accident sustained by the child whilst at school and of any first aid treatment given. This will be verbally, by e-mail or a note home on the same day or as soon as reasonably

practicable. This includes:

- The date, time and place of incident
- Name and class of injured / ill person
- Details of the injury / illness and what first aid was given
- What happened to the person immediately after the incident
- Name and signature of the first aider or person dealing with the incident

All injuries, accidents and illnesses involving pupils, however minor, must be reported to the School Nurse and she is responsible for ensuring the accidents are reported correctly and that parents and HSE are kept informed as necessary.

All injuries, accidents and illnesses involving staff and visitors, however minor, must be reported to the bursar and she is responsible (in consultation with the School Nurse) for ensuring the accidents are reported correctly and that parents and HSE are kept informed as necessary.

The school is legally required under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR) to report the following to HSE;

#### Accidents involving Staff

- Work related accidents resulting in death or major injury (including a result of physical violence) must be reported immediately.
- Work related accidents that prevent the injured person from continuing with their normal work for more than 3 days and must be reported within 10 days.
- Occupational diseases when a written diagnosis from a doctor is received stating that their employer has a reportable disease linked to occupational exposure.

#### Accidents involving pupils or visitors

- Accident resulting in death, and arose out of or in connection with a work activity.
- Injuries that arose out of or in connection with a work activity and the person is taken directly from the scene of the accident to hospital for treatment.
- Accidents resulting from failure in the way a work activity was organised, the way equipment or substances were used, and / or the condition of the premises.

For more information on how and what to report to HSE, please see [www.hse.gov.uk/riddor/index.htm](http://www.hse.gov.uk/riddor/index.htm)

## **Monitoring**

The Proprietor will organise regular reviews of the Accident records in order to identify trends and any areas that need improvement. These are discussed termly at a health and safety meeting. The information may help to identify training or other needs and may be useful for insurance or investigative purposes.

**APPENDIX A**

**Head Injury Notification Template to Parents**



Date: \_\_\_\_\_ Class: \_\_\_\_\_

Name: \_\_\_\_\_

Dear Parent/ guardian,

Unfortunately, your child sustained a bump to his/ her head today.

Details as follows:

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This was treated with a cold compress and there did not appear to be any problems. However, if he/she complains of a headache or feeling sick and you are at all worried, you may wish to contact your GP or local casualty.

Signed:

Name (in capitals):

## APPENDIX B



### Existing Injury Form

PUPIL NAME:	
YEAR GROUP	
DATE OF INJURY:	
BRIEF DESCRIPTION OF INJURY:	
WHO REPORTED INJURY (CHILD, PARENT/CHILD)	
TREATMENT GIVEN TO CHILD AND ANY OTHER RELEVANT INFORMATION:	
ACTION NEEDED e.g. exclusion from PE, outdoor playtimes	
DATE FORM COMPLETED:	
ENTERED ON PEN PICTURE Yes/No :	
NAME OF PERSON COMPLETING RECORD:	
SIGNATURE:	

## **APPENDIX C**

### **List of staff with Emergency First Aid at Work Qualification**

Anita Armstrong  
Nikky Botley  
Katherine Barwell  
Yvonne Britton  
Malcolm Collins  
Annette Durkin  
Mark Dickens  
Nav Dhillion  
Anita Ellis  
Gaynor Handley  
Austen Hardwick  
Julie Hilditch  
Anna Hine  
Luke Johnson  
Natasha Kitsell  
Rosemary Lippard  
Rachel Lonergan  
Margaret Parish  
Amanda Prescott  
Alison Salter  
Rummy Singh  
Kate Spain  
Zoe Taylor  
Sammi Walters

### **List of staff with Paediatric First Aid Qualification**

Nicky Mason  
Katie Hickmott  
Shisho Basra  
Jas Beila  
Paige Coker  
Marianne Eggleton  
Sharon Kybert  
Carole Lakha  
Paula Smith  
Julie Wood

### **List of staff with First Aid at Work Qualification**

Katie Hickmott  
Nicky Mason