

# First Aid Policy

# **INCLUDING THE EYFS**

(including administration of medicines) 2021-2022

#### Introduction

This policy applies to the whole school, including the EYFS. Reviewed September 2021 Laura French & Kirsty Keep Next review: September 2022

#### **AIMS**

- To identify the first aid needs of the School in line with the Management of Health and Safety at Work Regulations 1999.
- 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 visits.

# **OBJECTIVES**

- To appoint the appropriate number of suitably trained people as Appointed Persons and First Aiders to meet the needs of the school.
- To provide relevant training and ensure monitoring of training needs.
- To provide sufficient and appropriate facilities and resources.
- To inform the staff and parents of the School's First Aid arrangements.
- To keep accident records.

#### **PERSONNEL**

**The Governors** are responsible for the health and safety of their employees and anyone else on the premises. This includes all teaching and non-teaching staff, pupils and visitors.

They must ensure that a risk assessment of the school is undertaken and that the appointments, training and resources for first aid arrangements are appropriate and in place.

They should ensure that the insurance arrangements provide full cover for claims arising from actions of staff acting within the scope of their employment.

The Head is responsible for putting the policy into practice and for developing detailed procedures.

**Teachers** and other staff are expected to do all they can to secure the welfare of the pupils.

**Appointed First Aider(s)** must have completed and kept updated an approved training course. They will:

- Give immediate help to casualties with common illnesses or injuries and those arising from specific hazards at school.
- When necessary, ensure that an ambulance or other professional medical help is called.
- Distribute medication where required. Parents or guardians sign a permission form to confirm that they agree to their child / children being administered with non-prescribed medicine (eg calpol or paracetamol) should it be necessary.

Parents of prep school pupils sign a form to give permission for the school to administer prescribed medicines such as antibiotics.

Parents of pre-prep pupils are consulted directly before administering medication.

# **First Aid Information**

All information regarding First Aid should be treated as confidential. However, certain information is

needed for the safety of those concerned and is provided on a strictly need to know basis from the Appointed First Aiders.

#### **PROCEDURES**

#### **Risk Assessment**

Reviews should be carried out on a regular basis and recommendations needed to prevent risks forwarded to the Head and Governors.

# Re-assessment of first-aid provision

- Head to review the first aid needs following any changes to staffing, buildings etc.
- Deputy Head to monitor the number of trained first aiders and alert them of the need to attend refresher courses.
- Deputy Head also monitors the emergency first aid training received by other staff and organizes appropriate training.
- Pupil Welfare Officer checks the contents of the first-aid boxes on a regular basis.

# **Providing information**

The Deputy Head will ensure that staff are informed about the School's first aid arrangements. He will:

- Provide information for new staff as part of their induction programme.
- Ensure that any allergy information is available to all staff.
- Update the relevant handbook section if changes occur.

#### **PROVISION**

# How many first-aid personnel are required?

The Head will decide on the number of first-aid personnel required. The school is a low risk environment, but the Head will consider the needs of specific times, places and activities in deciding on their provision. In particular they should consider:

- Off-site PE
- Trips
- Science Labs
- DT/Art rooms
- Out-of-hour provision eg clubs

Arrangements should be made to ensure that the required level of first-aid cover is available at all times when people are on the premises.

Lancing Prep has 290 pupils.

There are two appointed first-aid personnel.

Laura French

Emma Macpherson

We have 14 other members of staff that hold Emergency First aid at Work qualifications and 9 members of pre-prep staff including EYFS that hold Paediatric First Aid certificates.

All staff undergo regular training in first aid, including the use of EpiPens and defibrillators.

# **Qualification and Training**

Appointed First aiders will hold a valid certificate of competence issued by an approved organisation.

Lancing Prep train all suitable staff in first aid – this is arranged annually in a three year cycle First-aid materials, equipment and facilities

- First-aid containers are labelled clearly.
- Each school bus should carry a first-aid container.
- First-aid containers should accompany PE teachers off-site.
- First-aid containers should be kept near to hand washing facilities.

Spare stock should be kept in school

Responsibility for checking and restocking the first-aid containers:

- In school, the Pupil Welfare Officer (LF)
- On buses, the Transport Manager (SW)
- For off-site PE, the Pupil Welfare Officer (LF)

#### Accommodation

Lancing Prep has a Pupil Welfare Room situated on the first floor of the school. It has a fridge, sink and 'soft-area' for pupils to recline.

# Administration of medicines

Training is provided for staff where the administration of medicine requires medical or technical knowledge.

Medicine can be administered if it has been prescribed for a child by a doctor, dentist, nurse or pharmacist (those containing aspirin should only be given if prescribed by a doctor). Written permission for the medicine must be obtained from the child's parent/carer via school post. (see Appendix 3).

Non-prescribed medicine, such as paracetamol, can be administered to a child as part of maintaining their health and wellbeing or when they are recovering from an illness. Written permission for medicines such as these is obtained from the child's parent/career on joining the school via the medical form on school post. Any medication that is non prescribed (eg: Ibuprofen) must have written permission. The administration of medicine is detailed in the green medical folder and an email is sent to parents each time it is given.

Medicine (both prescription and non-prescription) is only administered to a child where written permission for that particular medicine has been obtained from the child's parent and/or carer in the EYFS.

#### Arrangements for particular medical conditions

Any member of the College with particular medical conditions e.g. Asthma, Allergies, epileptic seizures etc. are required to provide the necessary personal medication which is stored in the school office medical cupboard by the Pupil Welfare Officer. When a child is taken off site, medication must be signed out using the signing out sheet and signed back in on return. For residentials, parents are responsible for supplying school with at least one spare of each medication. This is to be held by the appointed first aider on the trip.

Guidance on First aid incidents is at appendix 2 to this leaflet.

# Spillage of bodily fluids.

Spillage kits are kept in the first aid room. Minibuses also carry small spillage kits but additional kits may be needed for extended journeys.

#### First Aid Boxes/Kits and equipment

First aid boxes are provided by the College and are distributed and restocked by the Pupil Welfare Officer as necessary. The location of the boxes and any suitable signage is the responsibility of the school's Health

and Safety Committee.

Staff members using items from First Aid boxes/Kits should seek replacement stock from the Pupil Welfare Officer at the earliest opportunity. The Pupil Welfare Officer will periodically (at least annually) check all First Aid Boxes/kits around the school.

#### Main First Aid box locations:

- School office
- Kitchen
- Science Lab
- Art / DT room
- Pupil Welfare Room

#### **Defibrillator:**

A defibrillator is situated in the main reception near the exit on to the playing fields. Most staff and some members of the PTA have been trained to use a defibrillator.

## Vehicles used to transport students

First aid boxes will be provided in all the vehicles used for transporting students. Drivers using any items from the first aid box should inform the transport manager who will provide a replacement immediately the vehicle has returned to school. The actual contents of the first aid boxes within vehicles will be determined by Legislation (The Road Vehicles [C & U] Regulations 1986, schedule 7).

#### **Ambulance access**

Should an Ambulance be required to attend an incident, contact is to be made by the fastest means via the 999 system. Please ensure the Ambulance service is given exact details of where they should go (front or rear of the school) and a guide is to be sent to meet the ambulance at the agreed point to direct it to the casualty by the shortest route

# When to call an ambulance

- If an accident or incident occurs that is thought to be serious, telephone (9)999 and ask for the "Ambulance Service". If you are not near to a phone send another person to the nearest phone to make the call and ask them to update you after the call. Examples of serious incidents could include allergic reactions which require the use of an EpiPen, fits and seizures, fractures and breaks and head injuries.
- If you are in any doubt about whether to call the ambulance, then do so anyway and allow them to decide whether to attend or not. They can advise you if it is not an emergency, but let them make that decision, **not** you.
- Inform the Head of the situation immediately. The First Aider will come and keep the pupil comfortable until the ambulance arrives. Send another person to direct the ambulance to the correct place. Please ensure the Ambulance service is given exact details of where they should go (front or rear of the school) and a guide is to be sent to meet the ambulance at the agreed point to direct it to the casualty by the shortest route
- If an ambulance does attend, arrange for somebody to accompany the injured person to hospital. The accompanying person should be a member of staff known to the child if possible or the pupil's parent.
- If an ambulance is not required then any minor injury or illness should be dealt with by the First Aider.
- Any pupil with a head injury must always be escorted by a member of staff. Parent/guardian must be informed.
- For any loss of consciousness, the child has to go to A&E, escorted by a member of staff and the parent must be informed.

# Hygiene/Infection control

Basic hygiene procedures must be followed by staff.

Single-use disposable gloves must be worn when treatment involves blood or other body fluids.

Care should be taken when disposing of dressings or equipment.

The school runs a "Yellow bag" system where contaminated FA materials and waste can be disposed of correctly and safely.

# **Reporting Accidents**

Certain accidents and injuries are reportable under RIDDOR (Reporting of Injuries, Diseases, Dangerous Occurrences Regulations). RIDDOR reportable injuries include:

- injuries and ill health involving employees
- injuries involving pupils and other people not at work
- dangerous occurrences

Further guidance can be found on http://www.hse.gov.uk/pubns/edis1.pdf (Incident Reporting in Schools Accidents, Diseases and Dangerous Occurrences - Guidance for Employers).

The School keeps a record of all accidents and incidents that occur and grades them on a severity of 1 to 5. Any accident of a severity of 3 or above on the College Accident/Incident (Near Miss) form, is reported to the Health and Safety Manager who will determine if the accident is reportable under RIDDOR.

All accidents/incidents/near misses are recorded electronically and reviewed on a regular basis including at the termly Health and Safety Committee meetings.

See Appendix 1 for Record Sheet.

# **Staff Taking medicines**

Teachers and teaching/nursery assistants must not be under the influence of alcohol or any other substance which may affect their ability to care for children. If they are taking medication which may affect their ability to care for children, those teachers and teaching/nursery assistants should seek medical advice. We ensure that those practitioners 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 ARRANGEMENTS FOR OFF-SITE VISITS AND ACTIVITIES

Leaders or another adult member/s of the party should have adequate knowledge of first aid for the visit or activity being undertaken. The level of first aid cover deemed necessary for the activity or visit should be determined by risk assessment, it should be at an 'EFAW (Appointed Person)' status level as minimum.

# **Categories of Visit and First Aid Requirements**

The level of knowledge, which may be required, will depend on many factors including:

The result of the risk assessment conducted for the activity or visit to be undertaken.

The nature of the visit, and whether it is residential – see below

Those involved, including experience, ability and training.

The extent to which "outside" first aid assistance is available

The environment, and particularly the remoteness or otherwise of the location

Hence after Risk Assessment the activity should be categorised into one of the following levels of risk:-

# Category A: Day trips, visits and sports in the local area

These are activities and visits within the local area which present no special risks and can be safely supervised by a leader judged competent to lead educational visits and sporting fixtures generally and where medical assistance is readily available or can be accessed reasonably quickly. Examples will include:

Walking in parks Field studies in non-hazardous environments Sporting fixtures

# Category B: Outside local area or Overnight but within UK

These are activities and visits outside the local area, but within the UK mainland, which present no special risks and can be safely supervised by leaders who have had more experience of leading these types of activities and are judged competent to lead educational visits and sporting activities generally. There may be need for more formal First Aid experience/qualifications if assessed necessary in the risk assessment connected for that activity. Examples will include:

Visits to museums and galleries in London Participation in a non-hazardous sporting event in another town or location away from Lancing Visits to theme parks Field studies in other towns or cities

# Category C: Hazardous visits or activities and Overnight abroad

These could include some of the following but the Risk assessment will determine the level of First Aid cover required:

Residential trips; and/or Any visit or activity deemed hazardous; and/or Visits abroad Activities or visits involving persons deemed to be vulnerable

On a Category C visit or activity, it is desirable that a fully certificated first aider be included in the party, unless provision is available at the location, and will be accessible to the party throughout their activities. In this case the journey must be covered by someone who is trained to EFAW (appointed person) level as a minimum.

In the 'wilderness', on Category C activities, when the normal emergency services will be more than 30 minutes travelling time by foot or 2.5 kilometres in distance at any time, in that terrain, the party must include a fully certificated first-aider trained for the relevant activity/terrain. The travelling time must take into account uphill sections and precipitous ground conditions, which would need to be traversed by the emergency services.

#### First Aid Equipment

For all visits and associated journeys, an appropriate first aid kit must be readily available and its contents checked and replenished regularly.

Appendix 1 (a representation of the online form)

# Lancing College: Accident/Incident (ornearmiss) Record

**Level of Seriousness** 

Date Received		
ReportNumber	4	:=

1. About the person who received th	e accident
Name	Date of Birth
Address	
	Postcode
☐ Member of Staff ☐ Visitor ☐ Co	ontractor Member of Public Other
2. About the person filling in this rep	ort if different from above
Name	
	Postcode
Position	
3. About the accident, incident or nea	ar miss
	Time Sports injury
a. How did the accident/incident happe	n? Please tick a box below and explain on reverse.
☐ Slipped, tripped or fell ☐ Cuts ☐ Burns ☐ Injured by handling, lifting or carrying ☐ Hit something fixed or stationary ☐ Hit by moving, flying or falling object ☐ Contact with moving machinery or material being machined ☐ Trapped by something collapsing	Hit by a moving vehicle Contact with harmful substance Contact with electricity or electrical charge Exposed to fire/explosion Fell from height - how high was the fall?metres Physically assaulted by a person Injured by an animal Other type of accident (please explain on reverse) Incident (please specify)
injured part of the body:	ncident suffered an injury, say what it was. Please tick
☐ Head ☐ Eyes ☐ Neck ☐ Back and Spir	nal Cord Leg Ankle Arms Hands Other

Please indicate which of the following describes this accident/incident most accurately:
1. No injury or minor injury
2. First Aid/Medical Centre
3. Hospital – detained for Hours
4. Admitted as an in-patient/ off work or school for three or more days
Requires further investigation from the Health and SafetyOffice)
Please continue here
Please sign the record and date it.
Signature/p.p Date/
4. For the pupil/employee/visitor/contractor/member of the public  I give consent to Lancing College to disclose my personal information and details of the accident which appear of
this form to representatives of College safety forums, in order for them to be able to carry out their health an safety functions across the organisation. <b>Yes / No</b>
Signature/p.p. Date/
5. For the Health and Safety Office only
Complete this section if the accident is reportable under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR).
How was it reported?
Date reported/ Signature

# Appendix 2

#### Procedures for when a child becomes ill or has an accident:

#### Illness

- Child leaves lesson with permission from member of staff
- Child goes to school office either alone or accompanied by another child.
- If the child has a headache, sore throat or stomach ache, medication could be administered and the child returns to class. Parents fill in a permission form for this when joining school. Please always check the medical spreadsheet to make sure the child has permission. Not all children can have medication, if you're in doubt call the parents and ask.
- Child's name, time and actions taken to be logged in the green medical folder kept in the school
  office.
- If the child has a temperature or has vomited then the parents need to be informed and requested to take the child home.
- The child must be signed out in the office.
- The form teacher is also informed should the child leave the school.
- Fresh drinking water is freely available to pupils at all times.

#### Accident

- Child is brought to the school office by member of staff or another child.
- First aid is applied and, where necessary, the parents are informed.
- In the case of an emergency the pupil welfare officer is called and takes charge of treatment for that child.
- In the case of a suspected fracture or serious head injury, parents are advised to take the child to A and E. An accident report form is completed and filed by the health and safety manager.
- Parents are informed on the same day or as soon as is reasonably possible.
- For all head injuries, an information form is sent home to parents on the same day.
- For major incidents, complete the accident report form, contact the child's parents and advise the Head immediately.
- If required, the relevant HSE reportable paperwork will also be completed. (The process is that the Injured Person (or their representative) fills in the Accident Report Form. This is sent immediately to the Bursary, and the accident / incident is investigated by our Health & Safety Manager. All accidents/incidents are reported to the Health & Safety Committee for review. (We never use actual names in this report just whether it was a visitor, pupil or employee.)

If there is an injury or incident that should be reported to the Health & Safety Executive, this will be done by the Bursar's PA. We do not want anyone else submitting reports to the HSE.

# **Guidelines for administering of First Aid**

If in doubt about any injury, refer to the appointed first-aid personnel

All incidents must be reported recorded in the school medical folder.

# MINOR INJURIES

Sprains, grass burns, pulled muscles, "dead leg", strained ligaments, tendon damage etc. Treated on site and referred to the Health

# POTENTIALLY SERIOUS INJURIES

Fractures Rest - keep warm - support the injured part.

Eye Injury Minor /Major trauma - cover with clean cloth, refer to

designated first-aider

Head Injury. Stop - <u>do not resume game/activity</u>

Suspect concussion? Any pupil concussed may not play contact sports again for one

week. (Some professional organisations ie International Rugby Board state up to 3 weeks out depending on severity of concussion therefore 1 week is only a suggestion and should be determined by a doctor)

Unconscious patient The <u>vital action</u> is to ensure that patient is breathing easily. Best

position - lying prone with head to one side with fingers holding jaw forward to keep airway clear. Send for Duty nursing sister.

If breathing stops commence resuscitation.

Serious injury.

Spinal Injury to neck or back should be considered if the casualty complains of severe pain at site of injury with loss of sensation below this and inability to move limbs below injury level. **DO NOT MOVE**. Call for the emergency services (9.999). Then send for designated first aider and send guide for the ambulance. Keep warm by covering with available clothes and 'space

DO NOT GIVE DRINK OR FOOD

# **Specific Medical conditions**

Asthma Calm and reassure the casualty and help them to adopt a

blanket'

comfortable breathing position, not lying.

Assist with administration of the casualties own medication. If

no improvement contact the duty nursing sister

Epilepsy Protect the casualty from injury or harm.

Place in recovery position/treat any injuries if necessary send for

welfare officer.

Monitor duration of seizure.

Allergy

Assess the casualty and ask whether they know if they suffer from an allergy.

If yes, assist them to take their medication. Help them to adopt a comfortable breathing position and send for the designated first aider or if not responding to medication call for the emergency

services (9.999) first.

If no, Treat any symptoms and call the emergency services (9.999) then the duty nursing sister.

Assess the casualty and ask whether they know if they suffer from any medical condition or carry any medical information. Assist with administration of the casualties own medication if they have it. If no improvement or no medication contact the designated first aider or the emergency services (9.999) as appropriate.

Diabetes



Head Mistress, Mrs Kirsty Keep, B.Ed (Hons) The Droveway, Hove, East Sussex, BN3 6LU *Telephone*: 01273 503452 *Email*: hove@lancing.org.uk www.lancingcollege.co.uk

Appendix 3

# MEDICATION CONSENT FORM B (a representation of the online form)

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tainer as dispensed by the pharmacy	1
nowledge, accurate at the time of writing and I giving medicine in accordance with the school policy. It is in dosage or frequency of the medication or if the	I will inform
Date	
ı	nowledge, accurate at the time of writing and I giving medicine in accordance with the school policy. In dosage or frequency of the medication or if the

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