**FIRST AID POLICY**

Note: This policy applies to the Early Years Foundation Stage as well as to the whole school.

**Introduction**

This policy has been drawn up with reference to RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations) under which schools are required to report to the Health and Safety Executive. It is drawn up with reference to the DfEE’s ‘Guidance on First Aid for Schools’.

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19. **Aims of the First Aid Policy**

The Governors and Senior Management Team at Chesham Preparatory School (“the School”) take every precaution to guard against accidents and injuries at the School, both for pupils and adults. However, it is recognised that no plan can provide for every eventuality, and that minor or major incidents can take many forms and can happen without warning.

The protocols within this policy exist to deal with all first aid issues which may arise during the day-to-day running of the School. In the event of illness or an accident the pupil or adult concerned should be taken to Matron (or, in her absence, to the relevant trained first aider, and only if they are safe to be moved). The first aider will decide if the patient requires hospital treatment and will, if necessary, call for an ambulance. In such instances, if the patient is a pupil, the parents will be contacted, in the case of a member of staff their emergency contact with be notified. If hospital treatment is not deemed necessary Matron or relevant first aider will attend to the patient on site. All incidents will be recorded.

This document sets out the policy and practice to be followed for the provision of first aid within the School during term time. It also gives general guidance for the provision of first aid on visits away from the School.

1. **General information for parents**

* Matron deals with accidents or emergencies and is based in the surgery, which is located next to the school office. Parents, staff and pupils should refer to Matron as the first point of reference for all medical matters.
* A number of other members of staff are also qualified first aiders and are capable of giving first aid in the event that Matron is not available or a child is injured or becomes unwell during sport or on a school trip.
* At least one qualified first aider is in attendance when children are present, either on or off the school site. With regards to the Early Years Foundation Stage (EYFS) pupils, when children of this age group are present at least one qualified paediatric first aider will be in attendance. First aid in EYFS is further detailed in section 14.
* All new pupils (and staff) are given information on where to go for help in the event of illness or an accident as part of their induction into the school, which is conducted by the Deputy Head, heads of year and form teachers.
* First aid boxes are placed in all the areas of the school where an accident is considered most possible or likely to occur (such as the sports hall). First aid boxes will always be taken when groups of pupils go out of school on organised trips or to participate in sporting events. Matron refreshes and updates the school medical supplies in the various first aid boxes and bags located around the school. The Sports Department are responsible for their own.
* The school has two defibrillators. One is stored in the surgery and one in the sports hall office. A number of members of staff are trained to use them.
* Parents are always contacted if a child suffers anything more than a trivial injury, if they become unwell, or if we have any worries or concerns about a child’s health. Parents should contact Matron at any time if they wish to discuss any concern that they may have relating to their child’s health. The School will contact parents/guardians prior to providing any medication to their child.
* The school keeps records of all accidents and injuries, and has a procedure in place for ensuring that they are reviewed regularly in order, where possible, to minimise the likelihood of recurrence. They are reviewed by the governor responsible for first aid and by the Health and Safety Committee.

**3. The role of first aiders**

The role of the first aiders is to provide effective care after an accident or injury, including preserving life, minimising further damage and making the patient as comfortable as possible until professional medical or nursing help is available.

A number of teaching and non–teaching staff are trained and capable of giving first aid. Many other staff also undertake basic first aid training, the details of which are held by the Bursar.

First aid training is provided by the St John Ambulance organisation. This training gives attendees the minimum level of competence required to save a life in an emergency. A certificate of attendance is awarded, which is HSE accredited, and the qualification lasts for three years.

The Health and Safety Officer (the Bursar) and Matron make arrangements for re-training and re-certification for each first aider as and when required. First aid provision is reviewed regularly to ensure that it is adequate.

**4. The role of Matron**

Matron is based in the surgery, which is located next to the school office. It is a staffed ‘drop-in’ facility and is open from 8.00am until 4.00pm on Mondays to Fridays during term time.

The surgery is located next to the School Office and the secretaries deputise for Matron.

Matron provides, as a minimum, the medical cover listed below for pupils, employees and visitors during normal school hours:

* + Assessing and treating sick and injured pupils, staff and visitors.
  + Contacting parents/guardians/family members.
* Referring/taking pupils to hospital as appropriate and follow up/liaison with parents/hospital.
* Holding and dispensing medication prescribed for pupils by their doctors or authorised by parents.
* Maintaining records of those treated in the surgery and/or requiring attention outside the surgery.
* Keeping medical records up to date.
* Ensuring that every pupil has a completed Pupil’s Health Record.
* Ensuring that every relevant pupil has a Health Care Plan.
* Ensuring that the accident book is kept up to date to comply with health and safety regulations.
* Ensuring that Accident Report forms are completed by pupils and staff as appropriate.
* Ensuring that the School’s first aid boxes and bags at all sites are kept fully stocked.
  + Maintaining and updating a record of pupils’ medical information.
  + Ensuring that staff are aware of any special needs pupils have, bearing in mind the need for confidentiality.
  + Organising first aid training for staff.
  + Liaison with the Catering Company regarding special diets and food allergies.
  + Keeping an audit of the medication used.
  + Keeping a record of the medicine fridge temperature.
  + Ensuring that each month both the defibrillator batteries are fully charged.

**5. First aid boxes**

The surgery is the main first aid station in the School, with two others located in the sports hall and in the EYFS area. In addition, first aid boxes are placed at key locations around the School:

* Art/DT room
* T1 and T2 (Year 1)
* T3 and T4 (History and Science)
* Top Corridor (Years 5-8)
* Music room
* M3 (ground floor music block)
* Year 3 corridor
* Sports hall
* Learning Support (inc Geography and LRC)
* Year 2 rooms
* Science Lab
* Stable block (upstairs - MFL)
* Surgery
* Reception classrooms
* Nursery
* Kitchen
* Adlington Hall
* All mini buses

The contents of the first aid boxes are readily available to anyone wishing to use them and are regularly checked and replenished by Matron.

The Science Lab has eye irrigation equipment in situ should it ever be required.

All injuries are recorded in one of the accident books in one of the three main first aid stations.

**6. Pupil medical records**

On entry to the school, all parents complete a Pupil’s Health Record, giving details of their child’s medical history. This form also seeks parental consent for a member of staff to administer over-the-counter medication (such as Paracetamol, Ibuprofen and cold remedies) as well as some homeopathic remedies such as Arnica.

This information is collated onto a master list of medical conditions which is made available to all members of staff. Staff are required to familiarise themselves with the list of pupils with serious medical conditions. This is regularly updated on the arrival of new pupils or as new information comes to our attention. Any new information will be flagged with the relevant staff. Information highlighted includes:

* A list of asthmatics
* A list of serious medical conditions
* A list of EpiPen users
* A photo of all pupils with dietary requirements (also displayed in the service area of the dining room for the catering staff)

**7. Health Care Plans**

A personal Health Care Plan must be submitted if a pupil suffers from severe asthma, epilepsy, diabetes, allergies or any other serious condition where more information may be required. Parents are required to complete a Health Care Plan in consultation with their child’s GP or consultant.

All medical records are confidential and are securely stored in the surgery. Medical information may be provided to the Headmaster or specific teachers if necessary (ie if the child is going out of school on a visit).

**8. Allergies**

Any food or other allergies are recorded in each individual pupil’s medical file and discussed at staff meetings to ensure that all staff are aware of the details. A full list and photographs of pupils with allergies are displayed in the surgery and the dining room.

Schools have a legal responsibility to provide the correct allergen information about the ingredients that are in the food and drink served on the premises. There are fourteen allergens that need to be clearly identified and displayed so that all those eating the food can see and understand them. Children with food allergies will be taught how to identify the food and drink that contains ingredients that they need to avoid. Staff should be aware of the allergens list and advise parents/pupils when necessary, eg for planned lessons involving cooking/tasting etc.

The fourteen allergens are:

1. Celery (including celeriac)
2. Cereals containing gluten (such as wheat - including spelt and Khorasan, rye, barley and oats and their hybridised strains)
3. Crustaceans (eg prawns, crab and lobster)
4. Eggs
5. Fish
6. Lupin
7. Milk
8. Molluscs (eg clams, mussels, whelks, oysters, snails and squid)
9. Mustard
10. Nuts (namely almonds, hazelnuts, walnuts, pecan nuts, Brazil nuts, pistachio nuts, cashew, macadamia nuts or Queensland nuts)
11. Peanuts
12. Sesame
13. Soya
14. Sulphur Dioxide/sulphites (preservatives used in some foods and drinks) at levels above 10mg per kg or per litre

**9. Procedure for trips and visits away from the School**

At least one qualified first aider will always accompany pupils on trips or visits off-site and in the case of EYFS children a paediatric first aider will always be present.

All staff supervising pupils on visits will check the records for pupils with medical conditions and take any necessary medication.

A small first aid box is taken on all trips including sporting fixtures.

A copy of the school contact book with parent’s contact details is taken on every school outing.

**10. Action in the event of accidents and injuries**

Any casualty judged capable of moving by a first aider will be accompanied to the surgery and transferred to the charge of Matron or other first aider on duty. In the case of a more serious injury, Matron should be called to the casualty.

Casualties with suspected fractures or back or neck injuries will not be moved unless instructed by an ambulance person to do so. The only exception to this is if their location cannot be made safe and remaining there would leave them in danger.

If the casualty is unconscious, their airway is at risk and they should be placed in the recovery position regardless of suspected spinal injury.

Should a pupil’s condition be a cause for concern an ambulance will be called and the school office staff will immediately notify parents/guardians.

**11. Action in the event of illness**

Any child who feels unwell should report immediately to their teacher and, if necessary, Matron.

Matron will assess and treat the child as required and if the child recovers sufficiently they will return to lessons.

Occasionally, it may be necessary for a child to be sent home or to receive medical care outside the school. If a child is unwell and awaiting collection to be taken home, a quiet place is provided for them to lie down and rest. The surgery is used for any medical examination and treatment of pupils, and for the short term care of sick or injured pupils. It includes a washing facility and adjacent toilet. There is also a bed and medical blanket for the child’s additional comfort.

**12. Transport to hospital**

Transport to hospital from the School, if not an ambulance emergency, is arranged through the surgery. The casualty will always be accompanied by two members of staff, one of whom will be first aid trained. One of them will sit in the back of the vehicle with the casualty. A photocopy of the child’s Pupil’s Health Record will be taken with the casualty for use at the hospital.

**13. Administering of medication (including for specific medical conditions)**

If it is necessary for the school to administer medication during the school day, parents are required to fill in an ‘Administration of medication requested by a parent/guardian’ form. These forms are kept in the school office.

Parents should send all medication into school in the original container/bottle with the pharmacist dispensary label attached, for the attention of Matron. Only the exact dosage should be sent, so that it does not pose a problem if the child forgets to collect their medicine to take home at the end of the day. Matron or a qualified first aider will only administer medication with the written permission of parents/guardians.

Parental consent is required for non-prescribed (over the counter) medication to be given to pupils if required during the school day. Pupils are given over-the-counter remedies only if prior consent from parents has been given. Even though there is a written consent form for Calpol for example, parents will be contacted prior to the medication by telephone or email to ensure that Calpol can be given at that time. This is to inform the parents of the time it is given, to ensure they haven’t already been given it at home, or for any other reason that would prohibit the school from administering it at that time.

All medicines (except inhalers and EpiPens) are kept in a locked and designated cupboard/fridge.

A record is made of all medicines received and administered.

**Anaphylactic shock: serious allergies (nut, bee stings, animals’ fur etc)**

A list of children with serious allergies, together with photographs, is kept on display in the surgery, the staffroom and the dining room.

EpiPens for pupils in Nursery to Year 2 are kept with the form teacher. EpiPens for pupils in Years 3-8 are kept in the surgery. Staff receive EpiPen training annually, with further instructions on the staff notice board, and will administer the medication if required.

**Asthma inhalers**

All inhalers brought into the School should be clearly labelled and the expiry date checked.

Inhalers for children in Nursery to Year 2 are held by the appropriate form teacher. Inhalers for children in Years 3 to 8 are kept in the surgery. Matron is responsible for ensuring that the inhalers kept in the Surgery are returned after school trips and visits.

An emergency asthma inhaler is kept in the surgery in case of loss of a pupil’s own inhaler, to be used by Matron and trained members of staff as per the 2014 Human Medicines Regulations which allow schools to hold for emergency purposes only.

The use of inhalers will be supervised by Matron or another qualified first aider.

**Diabetic medication**

Any medicines for a pupil with diabetes will be detailed on the Pupil’s Health Record which is completed by a parent or guardian prior to the pupil commencing at the School and any changes subsequent to that.

Medicines for pupils in Nursery to Year 2 are kept with the relevant form teacher. Medication for children in Years 3 to 8 is kept in a locked fridge in the surgery. The School will ensure that someone (other than the pupil themselves) present on site will be able to administer the medication, although the majority of the time the pupil themselves will do so.

**14. Early Years Foundation Stage**

A number of EYFS staff hold the Paediatric First Aid Certificate and at least one person with this qualification will be on the premises during School/Nursery hours and at least one will accompany any off-site trip.

All accidents, injuries and first aid treatment given are recorded and parents informed on the same day or as soon as is reasonably practicable.

The School will notify local child protection agencies, as appropriate, of any serious accident or injury to, or the death of, any child whilst in their care and act on any advice given.

The School will notify Ofsted of any serious accident, illness or injury to, or death of, any child whilst in their care, and of the action taken in respect of it. Notification will be made as soon as is reasonably practicable, but in any event within 14 days of the incident occurring.

**15. School exclusion times for common infectious illnesses**

In cases of sickness, childhood diseases, contagious diseases etc a child’s return to school should be in line with medical guidelines.

|  |  |
| --- | --- |
| Diarrhoea and/or vomiting | 48 hours from the last bout of illness |
| Coughs and colds with a temperature | 24 hours after the temperature has settled |
| Chickenpox | Once all the spots have scabbed; 5-7 days  from onset of the last spots |
| Slapped Cheek | A child is no longer infectious once the rash has appeared |
| Impetigo | Preferably 48 hours after starting treatment |
| Conjunctivitis | Preferably 24 hours after starting treatment |
| Hand, foot & mouth disease | None |
| Head lice | Once the child has been treated with the appropriate shampoo or lotion |
| Measles | 4 days after the onset of the rash |
| Scarlet fever | 24 hours after starting antibiotics |
| Mumps | 5 days from the onset of the swelling |
| Cold sores | None |
| Shingles | Until blisters have dried up unless rash can be covered with a dry dressing or clothing so that others are not exposed |
| Glandular fever | None |
| Whooping cough | 5 days from starting antibiotics or 21 days from onset |
| *The school reserves the right to exclude a pupil for any other potentially contagious diseases not listed above.* | |

If, during the holidays, a child is exposed to anyone suffering an infectious disease, eg chickenpox or mumps, they may return to school when term begins but Matron should be informed. In the event of contact with diphtheria, poliomyelitis, typhoid or paratyphoid fever, bacillary dysentery, meningococcal infection, TB, Avian/Swine Influenza, hepatitis A, B or C, Ebola or HIV infection, or any other notifiable disease, the child should remain at home until Matron has been consulted.

**16. Dissemination of information and confidentiality**

This policy is in the staff admin drive.

**Confidentiality**

Medical information about pupils, regardless of their age, will, in principle, remain confidential. However, in providing medical care for a pupil it is recognised that, on occasions, Matron may liaise with parents or guardians, the Headmaster or other academic staff and that information, ideally with the pupil’s prior consent, will be passed on as appropriate.

With all medical matters, Matron will respect a pupil’s confidence except on the rare occasions when, having failed to persuade the pupil or their representative to give consent to divulgence, Matron considers that it is in the pupil’s best interests, or necessary for the protection of the wider school community, to breach confidence and pass information to a relevant person.

**17. Parental responsibility**

Parents must accept responsibility for their child’s welfare and are asked not to send them into School if they are infectious. In cases of sickness, childhood diseases, contagious diseases etc a child’s return to school should be in line with medical guidelines above.

Parents will be informed and asked to collect their child if they become ill or sustain an injury and are unable to continue with lessons. Children may not go home unless permission has been given by the Headmaster for them to leave. Such a decision may be delegated to Matron or Deputy Head.

Any parents who are unsure regarding any medical procedure relating to pupils should ask either Matron, the Bursar or seek assistance at the school office.

In relation to issues about Safety at Work procedures, the Bursar or Deputy Head should be contacted.

**18. Reporting accidents**

The School conforms to the statutory requirements and will report to the HSE (Health and Safety Executive) in accordance with Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR).

Further details can be found at [www.hse.gov.uk/riddor](http://www.hse.gov.uk/riddor).

**Policy reviewed: January 2018**

**Next review: January 2019**