

Bickley Park School

First Aid Policy

The Prep **School Matrons** are Mrs James and Miss Johnson who are based in the medical room at The Lodge and Mrs Boulton who is based in the medical room at Pre Prep. These three staff members above are the school appointed persons.

Mrs James, Miss Johnson, and Mrs Boulton will be responsible for:

- Ensuring that all required medical provisions for the school are properly in place and adequately maintained.
- Ensuring that the Headmaster and Bursar are made immediately aware of any potentially reportable accident.
- Checking at the start of each term (and more frequently as may be necessary) the contents of the first-aid boxes throughout the School and in the minibuses. *However, it is the responsibility of Heads of Subject* in which first aid kits are kept, to alert the Matron when replenishment is required.
- Providing first-aid kits for any study excursions and recreational outings.
- Maintaining a record of designated first aiders (see below), and ensuring refresher training is undertaken as required.
- Ensuring designated and appointed first aider notices are kept updated throughout Prep and Pre Prep.

Other designated **First Aiders** are:

Pre Prep- Paediatric first aiders-**Mrs L Stocks, Mrs J Shepherd, Mrs A Chalmers, Mrs J Ling, Miss H Showell, Mrs A Wenham, Mrs S Barnes, Mr G Love and & Mrs S Ursell. Prep-Mrs D Wheeler, Mr A Hyslop, Mrs M Feridun**

It is a school requirement in EYFS that at least one person with a current paediatric first aid qualification is on the premises at all times when children are present.

(Notes: A **designated first-aider** is a person trained and holding a current first aid certificate with a three year duration).

All staff are trained in first aid as a matter of course and this is renewed every three years at a staff inset training session.

LOCATION OF FIRST AID BOXES

The Preparatory Department

School Minibuses	Woodlawn Kitchen	Lodge Kitchen
Brandram Staff Toilet	Tidman Staff Toilet	Tidman Laboratories
D T Room and art room	Matron's office (x 3)	Sports Hall and pool
After school club	Theatre	Groundsman's hut

The Pre-Preparatory Department

Medical Room ground floor main school	Nurseries (x 3)	Main Playground Hut
Kitchen	Reception	Medical Room
Food tech room ground floor	Staff room first floor	School hall
DT/Art room second floor	Nursery outside play area/mud kitchen	Reception staff toilet
Dining room		

There is no mandatory list of items for a first-aid container. However, the school's **minimum** provision of first-aid items is:

- A leaflet giving general advice on first aid;
- Ice packs
- Individually wrapped sterile adhesive dressings (assorted sizes); blue detectable plasters are in kitchen first aid boxes
- Sterile eyewash files
- Individually wrapped triangular bandages (preferably sterile)
- Safety pins
- Scissors
- Medium sized (approximately 12cm x 12cm) individually wrapped sterile un-medicated wound dressings
- Large (approximately 18cm x 18cm) sterile individually wrapped un-medicated wound dressings;
- Disposable gloves.
- Equivalent or additional items are acceptable.
- Foil heat retaining blanket.

First aid rooms

Medical First aid rooms are provided at Prep and Pre Prep and contain a hand washing sink and a bed, or convertible chair/bed. Toilet facilities are in close proximity.

ACCIDENT & ILLNESS

In case of accident to children, the teacher in charge (or the duty teacher) should secure the child against further injury. In extreme cases, this requires that the child should not be moved until specialist help has arrived by ambulance.

In minor accidents and sickness, the child should be taken to Matron in the medical room at The Lodge or at Pre Prep. In an emergency, any teacher or staff member faced with a serious accident, or in doubt, should call an ambulance without delay. Remember to stress whether the location is at the Preparatory or Pre-Preparatory

Department in order to prevent ambulances wasting time going to the wrong section of the School.

Parents should be notified of all accidents and of illness which is more than a headache or bilious condition. Parents should be asked to come to School to fetch the child. In special circumstances, members of staff may need to consult the Assistant Heads or Headmaster about appropriate action.

Particulars of any accident must be recorded by the teacher in charge, and/or Matron as soon as possible after the accident.

All accidents to teachers or visitors should also be entered into the Accident Book.

THE SPILLAGE OF BODILY FLUIDS

All bodily fluids are cleared to ensure hygiene is maintained at all times. Staff wear gloves and wipe small spillages with disposal paper towels, which are then placed in medical bags and disposed of in medical waste bins. Larger spillages are treated with bio man 999-emergency compound powder before clearance in the same manner. All surfaces are then cleaned thoroughly with an anti-bacterial cleaner. Spillages on the astro turf, pirate ship or timber trail are to be cleaned with hot water and then sanitised accordingly.

MEDICATION IN SCHOOL

The administration of medicines is the responsibility of parents/carers, and there is no requirement for BPS staff to undertake these responsibilities. However, as GPs often advise that pupils should attend school while still needing to take medicines, such as antibiotics, and as some pupils are on long term medication, for example for asthma, staff will be made aware of the issues involved in administering medication.

General

Information of a medical nature, as it affects pupils, is routinely sought on admission and at the beginning of each academic year. This is input to the SIMS system. All staff will also be advised, through email, announcements in meetings and information on the notice boards, of pupils suffering from the following conditions which are potentially life threatening;

- Asthma
- Epilepsy
- Diabetes
- Food Allergies (Anaphylaxis)

Administration of Medicine

With the exception of those suffering from the above four conditions, all medication should be delivered and administered in the following way:

1. Parents (Pre Prep) must complete a “Request to administer medication form” (available from matron or the Pre Prep office)
2. Prescribed medication must be handed into the matron each morning in the original box/bottle in which it was dispensed with the prescription details by the Parent.
3. Boys should report to the appropriate medical room at those times when medication is to be taken/or be physically found on site by the matrons.
4. Medication should be administered then retained by the Matrons.
5. Medication should if necessary be collected by the parents at the end of the day to take home.
6. All medication and medical appliances should be removed from the school and given to parents at the end of each term.

CARE A daily record should be maintained in the medical room of all children who come for medication, so ensuring that no child receives an overdose. For children who are on regular medication, such as asthmatics, the name, dose and administration times of any prescribed drug should be noted.

It is the responsibility of parents to ensure that staff are made aware of the need for a child to take medication. Pupils are not allowed to take medication of any kind without authority from the parent/carer, but school matrons have permission to dispense OTC products at their discretion.

Sufferers from Asthma, (inhaler), Diabetes (glucose or glucose rich food) or Food Allergies (Epipen) will normally deposit their medication with the matrons, and matrons or first aid trained staff should be allowed to administer it immediately symptoms appear. The nature of a food allergy attack means that the victim may be incapable of using the Epipen (a device that injects a quantity of adrenaline into the thigh). Training is given to all staff through first aid inset days ran by specialised training companies every three years. Care Plans are in place as applicable.

OTHER POINTS TO NOTE

- All staff are expected to administer to pupils or colleagues very basic `common sense` first aid in those circumstances that merit it. This might involve dressing a minor wound or treating a minor burn with cold water. Care should be taken to avoid contact with bodily fluids and, if necessary, gloves should be worn. If in any doubt staff will seek help from the Matron. In emergency circumstances where staff judge an ambulance may be required they will make that phone call and alert the Matron as quickly as possible – if necessary by sending a pupil with a message.
- On those occasions when a pupil or member of staff is suffering from a notifiable disease or infection, a general announcement will be made to all staff and parents (school post/email/meeting) Of particular importance to female staff is early notification of rubella (German Measles) and Slap Cheek amongst pupils or staff.

Proprietary analgesics such as **Anadin** or **Panadol** are not available to pupils under any circumstances. If a pupil is at a stage where he or she is so poorly that such

medication is required, parents should be asked to collect the child from school. Pupils who request such medication at the School Office will be refused. In the event of a pupil returning to School following an injury or illness which will require them to take pain killers for a short time, then this must be under the direction of the Matron after the parent`s authority has been given in writing (*see above – administration of medicine*)

Emergency inhalers

From 1 October 2014 UK schools have been allowed to purchase a salbutamol inhaler without a prescription for use in emergencies when a child with asthma cannot access their own inhaler.

Keeping an inhaler for emergency use has many benefits. It could prevent an unnecessary and traumatic trip to the hospital for a child, and potentially save their life. Parents are likely to have greater peace of mind when their child is at school.

The school keeps one emergency inhaler in the medical rooms in both sites. The school has a more detailed policy surrounding emergency inhalers (First aid emergency inhalers in school pdf)

Defibrillator

The school has purchased two defibrillators and these are in place on the wall outside the Prep sports hall entrance and on the wall outside the Administration office at Pre Prep. The mechanism will guide users through the revival process. The most recent training was received by staff in January 2018.

Medical Conditions Policy

The school maintains a medical policy. (First Aid medical conditions policy 2016pdf)

School Trips

A risk assessment including an analysis of all pupils medical conditions is carried out prior to all school trips to ensure all medicines, inhalers and Epipens are carried on such trips

Appendix 1

ANNUAL CHECKLIST FOR COMPLETION BY THE SCHOOL MATRON

FIRST AID & MEDICAL MATTERS	Y (date)	N
Has an assessment been carried out to determine the number of appointed first aiders?		
Does the School have the statutory minimum number of First Aid at Work trained first aiders (i.e 1:50 employees = fully trained first aider)?		
Is all training up to date?		
Is there a register of trained first-aiders?		
Have all certificates been renewed within the last 3 years?		
Do all leaders of trips to isolated locations have basic first aid training?		
Are there adequate numbers of appointed persons? 4 appointees.		
Do all minibus drivers have basic first aid training?		
Is there a system for checking first aid boxes on a regular basis?		
Are records of first aid administered kept?		
Are accident books kept indefinitely?		
Are arrangements to report accidents in place?		
Are employees briefed on arrangements for first aid and accident reporting on induction?		
Are accident records analysed and recommendations made to reduce accidents occurring?		
Are notices displayed around the school giving the names of first aid personnel and their locations, & locations of first aid boxes?		
Are daily logs maintained to record fridge temperatures for medicines?		
Has a termly check of the defib and batteries taken place and logged		
PUPILS MEDICAL CONDITIONS		
Have matrons sent all staff a list of all pupils with medical conditions requiring possible staff intervention? (SIMS report)		
Are all relevant staff appropriately trained?		
Are all staff aware of pupils` conditions and who to call in an emergency?		

Appendix 2

ACCIDENT REPORTING PROCEDURES

(including the requirements of Riddor 1995)

- 1 Introduction
- 2 Definition
- 3 Reporting Procedure
- 4 Records
- 5 Investigation of Accidents

1 Introduction

The purpose of this instruction/code of practice is to:

- 1 Clarify the reporting of injuries, accidents, certain industrial diseases, and dangerous occurrences in the School.
2. Make clear the responsibility of the Headmaster or staff member in charge of the premises, and to set out the action to be taken. In general, the responsibility for reporting accidents etc. must be left with the person in charge of the premises, eg Headmaster, Assistant Heads, or someone on his behalf eg the Bursar.

2 Definitions

“Accident” – An “accident” is defined as an unplanned or uncontrolled event which may or may not result in personal injury or damage to property.

If in any doubt, the following should be referred to the Bursar, who has full details from the Health & Safety Executive:

- Major Injury
- Reportable Accident
- Reportable Dangerous Occurrence
- Reportable Disease

Any other accident is one in which anyone is injured, or put at risk of injury, as a result of School activities, but is not so serious as to meet the definitions above.

3 Reporting Procedures

All accidents, whether sustained by employees, members of the public, pupils, contractors, visitors etc., are to be reported on the School Accident report form. This form is to be completed fully by both the member of staff responsible for that child at the time and the matron on the same day as the accident so as to provide a complete

record and avoid the need for further enquiries. Descriptions of the occurrence and details of the activities that led to it must be specific. All accidents forms where hospital treatment is required should be completed and sent to the Bursar without delay.

It is not appropriate for such procedures to be followed for injuries or accidents of a minor nature, but it is wise to keep a record of such occurrences. A book should be kept for this purpose in the Medical Rooms in which the name of the person, date, time and nature of the occurrence and injury, together with the action taken should be noted by the Matron. In deciding what constitutes such a minor injury, staff (including Matron) should use their discretion. Minor cuts, abrasions, grazes and bruises would fall into this category. However, **any injury to the head, eyes, or neck or where the person has gone to hospital should be reported and recorded in full, and the parent / carer informed immediately. Head injuries should be reported to parents on the head injury card.**

It is the school's policy and duty to inform parents of any accident or injury sustained by the child on the same day, or as soon as reasonably practicable, and any first aid treatment given. This is either by telephone in cases where the parent is requested to attend the school or when it is deemed necessary by the matron in less urgent cases, or by discussing the issue with the parent at the end of the day and providing a copy of the accident form or head injury card.

Under Riddor, pupil accidents must be reported if a major injury is sustained either:

- a) during a supervised activity.
- b) At any time, if sustained as a result of a defect in the premises.
- c) If the pupil is taken to hospital by any means e.g ambulance, taxi, private car.

Death, major injury, or reportable dangerous occurrence -in the event of a reportable accident or dangerous occurrence the Headmaster and Bursar are to be informed immediately.

The accident form AR is to be completed in the usual way, (these are available in the matrons office on both sites) but in addition HSE Form 2508 will be sent by the Bursar online to www.hse.gov.uk/riddor

4 Records

The Bursar will maintain permanent records, using the report forms submitted from the Matron, and provide a report to the Buildings Health and Safety Committee each term.

For injuries and accidents of a very minor nature, it will be sufficient to make a book record as mentioned earlier.

There is a further legal requirement to maintain a record of injuries, diseases, and dangerous occurrences reported under Riddor, but it will be sufficient to retain a copy of the HSE Form 2508. These will be kept in the Bursar's office.

5 Investigation of Accidents

Except in the case of a reportable dangerous occurrence, the Bursar will take whatever steps are necessary to investigate the cause of any accident and to prevent its recurrence. These are discussed at the termly Buildings, Health and Safety meeting of Governors and trends investigated.

In the event of a major accident or dangerous occurrence, the site is to be left undisturbed as far as possible until an investigation has been completed – if necessary with the assistance of specialist advice.

Sickness prevention

Parents in EYFS are advised of our policy concerning sick children each term. The text below is the message that is currently approved to be issued. This message is also included in the medical data sheet that is sent to parents each year. (from Summer Term 2015).

“Please be advised that if your child is unwell, and you have given medication at home, then staff should be informed on arrival, when and why it was given. If your child has a fever and is clearly unwell then they should remain at home and not be sent to school. In the following cases, strict guidelines must be followed:

- If your child is suffering from a high temperature or fever, sore throat, rashes, discharges from the eyes or ears they should not attend school until all symptoms have cleared or medical advice has been sought.
- If your child is suffering from sickness and or diarrhoea, they must not attend school until they are recovered and symptom free for 48 hours.
- If your child bumps or bruises him/herself at home, please speak to a member of staff on arrival. It is important that we have information of potential medical issues.
- If your child is suffering from an infectious illness such as chicken pox, mumps or whooping cough, medical advice should be taken and the school informed.

The school reserves the right not to admit, or send home a child, should there be concerns over that child's wellness, at the start of, or during, any time of the school day. In these instances, parents, or child minders, will always be consulted. In the interest of the good health of fellow pupils and school staff, parents are asked to adopt a common sense attitude towards illness, erring on the side of caution where necessary. If unsure, please telephone to discuss before arriving. Please ensure your child is recovered and has had **at least 48 hours** free of symptoms before returning to school in line with public health advice.

Infection Control

1 Scope

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

2 Objectives

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

2.1 Maintaining a clean environment

2.2 Practising good standards of personal hygiene

3 Guidance

3.1 The Bursar and School Matrons will be responsible for the implementation and review of this guidance

3.2 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

3.3 Bites, injuries and sharps:

- Where skin is broken, make the wound bleed and wash thoroughly with soap and water.
- Report to the School Nurse / Medical Centre for treatment

3.4 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

3.5 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 and measles. If they are exposed contact the School Matrons 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 School Matrons.

3.6 Pregnancy

- If a pregnant woman develops a rash or is in direct contact with someone with a potentially infectious rash then the Matrons 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.

Sharps

Any needles used must be disposed of in the “Sharpsguard” collection box, this is collected termly by Bromley Council. This facility is currently available at Pre Prep where needles are used for one pupil.

Author	JJ/VJ (+CB/NW)	
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