



First Aid and Medicines Policy and Procedure

This policy applies to all sections of Charlotte House School including EYFS due attention has been paid to the DfE document Guidance on First Aid.

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|---------------------------------|---|
| Staff responsible: | SMT |
| Last review/update date: | September 2019 |
| Review cycle: | 3 years |
| Reviewed by Committee: | Health & Safety |
| Approved by Board of Governors: | 27 November 2019 |
| Next review date: | September 2022 |
| Related policies: | Child Safeguarding Policy Health & Safety Policy |
| This document also appears on: | Website ISI Portal |

Introduction: The First Aid procedure at Charlotte House School endeavours to ensure that every pupil, staff member and visitor will be well looked after in the event of an accident. Our staff consists of **qualified first aiders** and not trained doctors or nurses.

1. First Aid Information

First Aid boxes are checked regularly – by a Teaching Assistant and contain basic items for dealing with injuries. First aid boxes are located in the following places:

- Sports Hall
- Dining Room
- Inside Reception and Nursery cloakroom
- Outside Form VI
- Staff-room (1 permanent, 1 travel kit)
- Science room
- School office (1 permanent and 1 travel kit)
- Main kitchen
- Minibus (x 1)
- School car (x 1)

All staff (See appendix 1) are trained in first aid and renew their training every three years so therefore there is always a qualified first aider on site when children are present and also on educational visits. In the case of EYFS pupils there is always a paediatric first aider on-site and/or accompanying them on trips. All members of Early Years staff have paediatric first aid

qualifications. In addition Mrs Mulligan who is our chief First Aider has attended an Emergency First Aid at Work course which is valid until January 2021.

All minor injuries and treatments are logged, a book, containing tear-off slips, is kept in each first aid box. Once completed, these are to be passed to School Office. Parents are informed of any accidents causing concern straightaway. In the event that a child bangs her head, a letter advising of concussion symptoms is sent home on the same day.

The Bursar is responsible for reporting of injuries, diseases and dangerous occurrences (RIDDOR) to the Health and Safety Executive (telephone 0845 300 99 23).

RIDDOR applies to all work activities, but not to all incidents. Further information and advice about RIDDOR reporting requirements can be found in the HSE Information Sheet EDIS1: "Incident Reporting in Schools (Accidents, Diseases and Dangerous Occurrences)". A copy of this document is included in the School's Health & Safety Policy.

2. Information regarding children's illnesses

All staff must be aware of existing allergies and medical conditions. At the beginning of each academic year, a list of girls with conditions requiring attention is updated and kept in the 'battle box' in the school office and also in each of the First Aid boxes. This is further updated as and when new information is received.

In addition, information about other potentially difficult medical circumstances is discussed at Pupils' Concerns meetings every other week. The Catering Department is informed by the School Office of pupils with specific allergies, food intolerances and religious regimes.

The Parents Handbook details our school policy on children returning to school after infection or illness.

3. Administration of Medicines

Charlotte House does not hold a supply of any medicines.

A request to administer medicine to pupils including EYFS must be made in writing using the Medication Form available from the school office and to download from the School's website. Each request will be considered on an individual basis. Medication must be prescribed for the individual child, clearly labelled with the pupil's full name and instructions for administration. All medication must be recorded in the School Secretary's log book. In general, it is the School Secretary's responsibility to administer medication; however occasionally the Form Tutor may administer on her behalf.

4. Medical Conditions / Allergies

Anaphylactic Shock.

We ask parents/guardians to ensure that Pupils are aware of their allergy. All staff should be aware of the location of epi-pens and the administration procedures.

Epi-pens are kept securely stored in red & blue coloured boxes on a high shelf in each form room, appropriately labelled with the pupil's name, and are removed and returned to parents at the end of each term. Spare Epi-pens are kept securely stored in the staff room.

Diabetes - Epilepsy - Asthma

Parents must inform the school about these conditions through the Essential Information Form to be completed at the start of each academic year.

Asthma inhalers for Pre-Prep girls are kept in the form room, severe asthmatics in the Prep school are encouraged to carry round their own inhalers and a spare is labelled up in the staff room for emergencies.

The school must be informed of all recent attacks and related symptoms.

Diabetic girls carry supplies in their bags which are to be with them at all times or to be handed to the teacher in PE and at break-times. Spare items are stored in the staffroom.

See appendix 2 for advice on procedures to be followed in the case of dealing with an asthma attack, epileptic fits and/or diabetic incidents.

5. Medical Emergencies

In School:

In the event of injury or medical emergency the School Secretary should be contacted on Ext.202. If the School Secretary is not available, most teaching staff are able to administer first aid. If in any doubt, teaching staff should not delay calling an ambulance. The Head must always be informed in the event of an emergency. The child's parents will also be contacted as a matter of urgency. If they are not contactable the emergency contact will be called.

If the situation is life threatening – asthma attack, cardiac arrest, anaphylactic shock etc – then an ambulance should be called immediately from the nearest school phone without waiting for the School Secretary to arrive on the scene. No child casualty will go to hospital from school unaccompanied.

Out of School:

Staff members taking pupils off site will carry a first aid kit with them. There is a first aid box in the mini-bus and extra boxes can be obtained from the school office. The teacher in charge will check lists of girls going out of school for special medical conditions and ensure girls have their inhalers or epi-pens with them. Any medical special considerations are listed on the risk assessment for the trip.

6. Procedures for dealing with spillage of body fluids

Protective, disposable gloves must be worn when dealing with any bodily fluids (blood, vomit, diarrhoea) or as a precaution when contact with blood or body fluid might be likely. These may be found in all First Aid kits. They should be disposed of immediately after use, double bagged if soiled and put in the external dustbins for domestic waste disposal.

Any body spillages must be cleaned immediately. Absorbent granules should be dispersed over a spillage and left for a few minutes. The spillage should then be swept, using a designated dustpan and brush onto newspaper, double bagged and put in the external dustbins for domestic disposal. (Containers of sani-dri absorbent granules are kept in the Early Years

lavatories in a locked cupboard together with nappy sacks, disinfectant & a dustpan & brush). The affected area should then be cleaned with warm water/ disinfectant and left to dry. Following contact with any body fluids, hands should be washed.

As agreed with Three Rivers District Council, Charlotte House does not generate enough waste from matters regarding First Aid to warrant a separate clinical waste collection by the Council. Any used dressings or soiled items should be double bagged and put in the external domestic waste containers.

7. Storage and declaration of staff medication.

Staff who require any medication themselves must ensure this is kept securely where children cannot access it either in a locked drawer or in the staffroom.

If a member of staff is taking any medication which may impinge on their ability to supervise children (eg. Cause drowsiness) they must alert the Bursar.

8. Rashes, Diarrhoea, Vomiting, Respiratory and other Infections & Good Hygiene Practice

Please refer to the 'Guidance on infection control in schools and other childcare settings' at the following website.

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/353953/Guidance_on_infection_control_in_schools_11_Sept.pdf

9. Rest Room

There is a meeting room off the main reception area in the office block with a foldaway camp bed which may be used for an unwell pupil or member of staff. It is near to a lavatory/hand wash basin.

10. Immunisation

Parents advise us of the immunisation status of their children by completing the essential information form. We encourage parents to have their child immunised. For the most up to date immunisation advice go to www.immunisation.nhs.uk

Appendix 1 - First Aid Training

| | ALL STAFF | | | | EY & Pre-Prep STAFF | | OFFICE | |
|---------------------|-------------------------------|------------------------|------------------------------------|-----------------------------|--|---------------------------------------|-----------------------------|--------------------------------------|
| | Epipen Video (not compulsory) | Mental Health Training | First Aid Training (Every 3 years) | First Aid Training Next Due | Paediatric First Aid including Epi-Pen training (Herts) (every 3yrs) | Paediatric First Aid (Herts) Next Due | Emergency First Aid at work | Emergency First Aid at work next due |
| ARCH, Kate | | 04Sep17 | 08Jan18 | | 2Sep19 | 2Sep22 | | |
| BROWN, Nicola* | 09Feb16 | 04Sep17 | 08Jan18 | | 2Sep19 | 2Sep22 | | |
| COWEN, Hannah | 02Feb16 | 04Sep17 | | | 2Sep19 | 2Sep22 | | |
| CRAMP, Caroline | | | | | 2Sep19 | 2Sep22 | | |
| DAVISON, Nicola | | 04Sep17 | 08Jan18 | | 2Sep19 | 2Sep22 | | |
| EDWARDS, Margaret | | | 08Jan18 | Jan21 | | | | |
| FILER, Gill | | 04Sep17 | 08Jan18 | Jan21 | | | | |
| FRANCIS, Charlotte | | 04Sep17 | 08Jan18 | Jan21 | | | | |
| GILLAM, Samantha | | | 08Jan18 | Jan21 | | | | |
| GUISE, Caroline | | 04Sep17 | 08Jan18 | Jan21 | | | | |
| HOLROYD, Susannah | | | | | 2Sep19 | 2Sep22 | | |
| HUGHES, Shelley | | | | | 2Sep19 | 2Sep22 | | |
| INGLES, Ana | 11Feb16 | 04Sep17 | 08Jan18 | | 2Sep19 | 2Sep22 | | |
| JOINER, Loraine* | 22Feb16 | 04Sep17 | 08Jan18 | | 2Sep19 | 2Sep22 | | |
| MUCHMORE, Michelle* | 03Feb16 | 04Sep17 | 08Jan18 | | 2Sep19 | 2Sep22 | | |
| MULLIGAN, Sarah * | 02Feb16 | | | | 2Sep19 | 2Sep22 | 3Jan18 | Jan21 |
| O'DELL, Sallyann | 02Feb16 | 04Sep17 | 08Jan18 | Jan21 | | | | |
| PARKER, Annette | 09Feb16 | | | Jan21 | | | | |
| PATEL, Reena * | 02Feb16 | 04Sep17 | 08Jan18 | | 2Sep19 | 2Sep22 | | |
| RILEY, Kay | 02Feb16 | | 08Jan18 | Jan21 | | | | |
| SUTTON, Lizzy | | | | | Jan 19 | Jan 22 | | |
| WILDMAN, Nathalie * | 10Feb16 | 04Sep17 | 08Jan18 | | Jan19 | Jan 22 | | |
| WOODCOCK, Penelope | 02Feb16 | 04Sep17 | 08Jan18 | Jan21 | | | | |
| WOODING, Laura | 02Feb16 | 04Sep17 | 08Jan18 | | 2Sep19 | 2Sep22 | | |
| YIACOUMI, Eva | 09Feb16 | 04Sep17 | 08Jan18 | | 2Sep19 | 2Sep22 | | |

- * Have also received Diabetic Training

Appendix 2

Epilepsy/Diabetes/Asthma

When a child has a known medical problem several steps are taken:

- The parents advise details of the child's symptoms and a detailed care plan is drawn up.
- In the event of an epileptic fit, objects around them that could hurt the patient should be removed, the patient's airways should be checked and cleared if necessary and following the seizure, they should be placed in the recovery position. Parents will be contacted to inform them of the seizure. If they request an ambulance to be called the school will do so.
- In the event of a major asthma attack or severe hypoglycaemia leading to unconsciousness, the child should be placed in the recovery position and an ambulance called immediately. Parents will be contacted.

COVID-19 Appendix to First Aid Policy

Guidance on what to do if someone becomes unwell during the school day

If anyone becomes unwell with a new, continuous cough or a high temperature, they must be sent home and advised to follow the [COVID-19: guidance for households with possible coronavirus infection guidance](#).

If a child is awaiting collection, they should be moved to the downstairs meeting room in the admin offices where they can be isolated behind a closed door, depending on the age of the child and with appropriate adult supervision if required. A window should be opened for ventilation and once the child has been collected the room should be cleaned and disinfected using standard cleaning products before being used by anyone else.

If they need to go to the bathroom while waiting to be collected, the bathroom should be cleaned and disinfected using standard cleaning products before being used by anyone else.

A mask and disposable apron and gloves should be worn by staff caring for the child while they await collection if a distance of 2 metres cannot be maintained (such as for a very young child).

In an emergency, call 999 if they are seriously ill or injured or their life is at risk.

If a member of staff has helped someone who was unwell with a new, continuous cough or a high temperature, they do not need to go home unless they develop symptoms themselves (and in which case, a test is available) or the child subsequently tests positive. They should wash their hands thoroughly for 20 seconds after any contact with someone who is unwell. Cleaning the affected area with normal household disinfectant after someone with symptoms has left will reduce the risk of passing the infection on to other people.

Should the school feel the family of the unwell child will be unable to access a test they can offer the family one of the home tests provided to the school.

AKP/13.5.20