



## St Michael's Prep School First Aid policy

<b>Date of Last Review:</b>	10.01.17	<b>Review Period:</b>	Annually
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<b>Type of Policy:</b>	Statutory	<b>Governors Approval</b>	

# First Aid Policy

## 1. Introduction

St Michael's School aims to provide a safe and healthy working environment for its pupils, staff, parents and visitors. It is a large campus spread over two distinct buildings: The Pre-Prep and Prep School. This policy applies to the Prep, Pre-Prep and Early Years sections of the school.

The school has a risk assessment of our First Aid and Health Care provision throughout the school to ensure compliance with current legislation and guidance. First Aid can save lives and prevent minor injuries becoming major ones and we are committed to making every endeavour to administer first aid in a timely and competent manner.

### 1.1 Objectives

This policy aims to ensure that all members of the school are:

- \*informed of the standard policies and procedures to follow to ensure safe good practice
- \*given guidance and details of the provision made for first aid and health care in the areas in which they work.
- \*given training relevant to their roles and responsibilities

The policy requires full compliance by all Heads of Department/Line Managers and all individual staff members to ensure that the standard practice throughout the school is excellent. It should be read in conjunction with our First Aid procedures.

This policy and the associated risk assessment is reviewed every two years or earlier if necessary.

### Policies that inform this document include;

Administration and Storage of Medicines Policy (Pre Prep and Prep)  
Educational Visits Policy  
Pre-Prep and Prep Accident Procedures  
Health and Safety Policy  
Hygiene Procedure  
Safeguarding Policy

## 2. Legislative Overview

This policy takes account of the following legislation and advice:

Health and Safety at Work etc. Act 1974 (HSWA)  
Health and Safety (First Aid) Regulations 1981,  
Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR)  
First Aid in Schools guidance (DfE) (updated Feb 2014)

The legal requirements set out in the **Health and Safety (First Aid) Regulations 1981** are for the school to provide:

**2.1** An adequate number of trained First Aiders to act as the first responders in any situation where First Aid is required including:

- day to day school activities;
- sports activities (home and away)
- school trips;
- school transportation

Our First Aid risk assessment determines the level of first aid provision required for each of the above categories.

**2.2** HSE recognised training courses for all First Aiders:

Training is carried out regularly to ensure we have a sufficient number of adequately trained staff. There is a register of first aid qualifications held so that renewal training is kept up to date.

**2.3.** Well maintained first aid kits and equipment for the provision of First Aid and health care to be made available in all locations including for off-site trips, sports activities and transport. At least one qualified person is on each site of the school when children are present, including a paediatric-trained person for the Early Years Foundation Stage (EYFS).

### **3. Roles and Responsibilities**

**3.1 The Governing Body**, by delegation to the Headteacher, is responsible for health and safety matters within the school and developing this policy based on a suitable risk assessment which will inform the appropriate level of First Aid training for staff, taking into account staff absence and staff turnover.

**3.2 The Health and Safety leader** is responsible for overseeing, updating, implementing and reviewing this policy and maintaining an up to date record of the qualified first aiders in the school.

**3.3 The Office Manager** is responsible for organising for the First Aid kits to be checked and replenished each half term, ensuring all supplies are in date and safely disposing of any which have expired or are no longer required. Any concerns should be reported to the office immediately.

**3.4 All staff** are responsible for delivering first aid in a timely and competent manner, if trained to do so and the need arises. **Staff must return first aid kits used and/or highlight if the kit is missing or items are missing from it.**

**3.5 School Trip Leaders** are responsible for planning for the provision of first aid on their school trip, signing out and taking a first aid kit with them and allocating specific responsibilities to the accompanying staff. All EYFS staff must have a paediatric trained member of staff on the trip. (see Appendix 1).

**3.6 Sports Staff** are responsible for planning for the provision of first aid for the fixture for which they are responsible, signing out and taking a first aid kit with them and allocating specific responsibilities to any accompanying staff. They should familiarise themselves with the location of the nearest hospital to the venue.

#### 4. Training of First Aiders

First Aiders act in accordance with policies set by the Governors, Head teacher and the Health and Safety Committee.

Having assessed the risk, and taking into account the location of the school, size of the site, and number and ages of the children we have agreed the following:

- The majority of staff are trained to a minimum level of Emergency First Aid at Work Level (1 day) or First Aid in Schools
- A number of staff across the school hold the First Aid at Work (3 days) qualification
- At least 4 members of staff working in the Early Years are trained as paediatric first aiders
- At least 6 members of staff across the school are Appointed Persons

First Aid certificates are renewed every 3 years and interim refresher training is organised as required.

First aid is reviewed regularly at our Health and Safety Committee meetings and pupils and staff are given information about first aid at their induction.

When a member of staff who has been trained as a First Aider leaves, the school arrangements will be made by the Head teacher for another person to be trained to replace them.

#### 5. First Aiders

A list of qualified first aiders is displayed at various points around the school and updated regularly. **Appendix 1** shows the names of first aiders including details of when their qualification expires and denoting those who have a paediatric first aid qualification.

#### 6. First Aid Room

There is a medical room in each building. In the Pre-Prep School this is situated behind the main office and in the Prep School, pupils are treated in the reception area or First Aid Room on the ground floor.

#### 7. First Aid Kits

First Aid equipment is clearly labelled and easily accessible. First Aid kits are kept at various locations throughout the school as detailed in **Appendix 2**.

**Prep School:** The Office Manager is responsible for organising for the First Aid kits to be checked and replenished each half term or as needed with the exception of the one located in the kitchen which will be the responsibility of the Catering Manager. The Health and Safety Leader will monitor that these checks are done and update the record.

**Pre Prep School:** The Pre Prep Secretary is responsible for organising for the First Aid kits to be checked and replenished at the end of every term or as needed

##### 7.1 Missing Equipment or First Aid Kits

Any person finding that a First Aid kit is missing or not containing the prescribed equipment should notify the Office Manager or the Pre-Prep Secretary who will arrange for it to be replaced.

## **8. Defibrillators (Automated External Defibrillators (AEDs))**

The school has three AED's located as follows:

Pre Prep Office  
Prep School Staff Room  
Pavilion

An AED delivers a high energy electric shock to a victim in sudden cardiac arrest to restore the heart's normal rhythm.

The AEDs we have purchased (recommended by the NHS) are very reliable and analyse precisely the victim's heart rhythm and will not allow a shock to be given unless it is needed. Clear, spoken instructions and visual illustrations guide users through the process. They are extremely unlikely to do any harm to a person who has collapsed in suspected cardiac arrest. They are easy and safe to use and present minimal risk to the rescuer. These features make them suitable for use by anyone with modest or even no training. They have been used by untrained people to save lives.

The Estates staff carry out regular maintenance checks on the AEDs and log these by the device.

Further guidance for schools [T:\Whole School\Health and Safety 2017\Defibrillators\Defibrillator \(AED\) guide for schools.pdf](T:\Whole School\Health and Safety 2017\Defibrillators\Defibrillator (AED) guide for schools.pdf)

Training Video can be found here: [https://www.youtube.com/watch?v=QZR\\_3U5iESE](https://www.youtube.com/watch?v=QZR_3U5iESE)

**9. Personal Emergency Evacuation Plans (PEEPs)** are put in place for anyone with reduced mobility who requires it. Pupils with a significant injury, which requires physical assistance and care from others, e.g. broken arm, wear a brightly coloured sweater or top in school and are offered assistance to evacuate in the event of an emergency. The original PEEP form is kept on the pupil file and a copy is given to all relevant persons.

### **9.1 Who is responsible for completing the PEEP forms?**

The following people are responsible for completing the PEEP and ensuring it is communicated to relevant persons

For Pupils- the Form Tutor assisted by the Health and Safety Leader as required

For Staff - the HR Administrator or Director of Finance & Operations

For Visitors - the Office Manager or Pre-Prep Secretary as appropriate

## **10. Procedure in case of an Accident or Injury**

Accidents can happen at any time and in any place so prompt and appropriate action is essential.

If you witness an accident you should contact a first aider or deal with it yourself if you are a first aider. Do not leave any pupil unattended.

In the event of a medical emergency, the first aider must summon or give instructions to summon an ambulance using the procedure below.

An ambulance should be called when someone is seriously ill or injured and their life is at risk. Staff offsite and on the pitches carry a mobile phone for this.

## **10.1 Medical Emergencies**

Medical emergencies can include:

- loss of consciousness
- an acute confused state
- fits that are not stopping
- persistent, severe chest pain
- breathing difficulties
- severe bleeding that cannot be stopped
- severe allergic reactions
- severe burns or scalds

## **10.2 When to summon an ambulance**

Summon an ambulance by dialling 999 as soon as possible if:

- you cannot stop the bleeding or it continues for longer than 20 minutes
- the casualty is bleeding heavily or from an artery – blood from an artery comes out in spurts with each beat of the heart, and is bright red and usually hard to control
- the casualty experiences persisting or significant loss of sensation near the wound or is having trouble moving any body parts
- the casualty has lost a lot of blood
- the casualty has swallowed a lot of blood that makes them vomit
- the casualty has received a severe cut to the face
- the casualty is having difficulty breathing
- the casualty has received a cut to the palm of their hand and it looks infected – these types of infection can spread quickly
- the casualty experiences persisting or significant loss of sensation near the wound or is having trouble moving any body parts
- there's a possibility a foreign body is still inside the wound
- the wound is very large or the injury has caused a lot of tissue damage
- the casualty has suffered a chemical or electrical burn
- the casualty has suffered a large or deep burn – any burn bigger than your hand
- the casualty has suffered a burn that cause white or charred skin – any size
- the casualty has suffered a burn on the face, hands, arms, feet, legs or genitals that causes blisters

## **10.3 Procedure for summoning an ambulance**

In the event of a medical emergency, if you are unsure whether an ambulance is required, if possible, seek a second opinion of either another First Aider or a member of the SLT. DO NOT delay unnecessarily however. If the decision is made to call an ambulance to the school, the following should be followed:

### **Summoning an Ambulance**

- Dial (9) on an internal telephone and then 999
- When asked what service is required state clearly “Ambulance”
- When put through to the ambulance control room, state clearly what the emergency is and whether or not the casualty is breathing
- Listen to the operator and follow the instructions given. Do not hang up unless told to do so.

- Give the operator your exact location i.e. the school address and postcode and location on site e.g. the Prep School
- Give your phone number or the school office telephone number to the operator
- Inform the school office, who will contact the casualty's parents/ next of kin
- A member of the Estates Team should be appointed to wait by the road to direct the ambulance. This staff member must collect the key for the gate to the drive from the nearest office, wear a high vis vest, have a phone and unlock the gate to the school grounds before proceeding to the road junction to attract the attention of the ambulance. Sat navs show St Michael's Drive as the access to the school, so the ambulance may need to be re-directed.
- A member of the office team should take a copy of the student details from SIMS and the Personal Care Plan (if there is one) to the member of staff waiting to meet the ambulance.
- The accompanying adult should remain at the hospital as long as necessary.
- If the casualty's condition worsens, prior to the ambulance arriving, or if the ambulance has not arrived after a reasonable time has elapsed, ring the emergency services again.
- If the decision by the ambulance control is to send an air ambulance, ensure that the school office informs the Estates Team so a suitable area can be prepared for a helicopter landing.

#### **10.4 Priorities for very serious injuries:**

- 1. Summon an ambulance**
- 2. Look after the injured person-** if suitable and safe to do so, move the person indoors, if not keep the person warm and comfortable in situ. Remove wet clothing and try to screen the area to protect the casualty's dignity and modesty
- 3. Look after any other children-** pupils should be cleared from the ambulance route especially if on the playground
- 4. Communicate with the Office, Senior Leaders and parents-** if an ambulance is called parents or next of kin should be informed as soon as possible.
- 5. Accident investigation** If the accident has occurred whilst equipment of any sort was in use, then an inspection of the equipment should be recorded and the time of the accident and any faults should be noted. A review of the area, supervision and staff training will be undertaken in order to prevent such an occurrence from happening again. Any serious injury, relating to faulty equipment or misuse of equipment is likely to be reportable to RIDDOR.
- 6. Recording and reporting** –after a serious injury, the protocol will be to undertake a new risk assessment which should reflect the added risks if any. If there are is no further action, this too should be noted. Serious accidents must be reported in the accident book, the health and Safety Officer, Headteacher and DFO must all be informed. Parents must receive a copy of the accident report. Report to RIDDOR if appropriate.

#### **10.5 Hospitals**

There is a list of hospitals detailed in **Appendix 3**.

#### **10.6 Minor Injuries**

Minor injuries, such as cuts and grazes should be cleaned and washed in cold water and, if necessary, advice should be sought from any first aider. In the Pre-Prep minor accidents that have required any treatment are logged in carbon copy books and the copy is sent home with the child. In Prep, they are logged and parents will be informed if it is deemed necessary.

More serious cuts which may require dressing or stitches should be cleaned and stabilized while parents are called to take the child to hospital.

### **10.7 Major or more serious Injuries**

For major injuries or any injury which causes concern, or requires professional medical assistance the parents/guardians will be contacted, to inform them of the situation, and to assess the feasibility of the parent taking the pupil to hospital. If the school is unable to contact parents/guardians, then the child should be taken to the nearest A & E department (**for locations see Appendix 2**).

Whoever accompanies the child to hospital (normally a member of staff) should take with them the child's contact details printed out from SIMS which includes medical information. If the child has a Personal Care Plan this should be copied and given to ambulance staff as well.

The events should be logged and any statement of treatment received from the hospital should be passed on to parents/guardians to pass on to the G.P.

Details of the incident are recorded in the accident book situated in the school office. The time the accident occurred must be recorded together with statements from witnesses. An account of action taken should be accurately recorded in case it needs to be referred to at a later date. The white copy of the report from the accident book is sent home to parents.

If there appears to be no immediate cause for concern the child may return to class but the class teacher must be informed so that the child can be monitored. Should symptoms develop later then a member of the office team or a first aider should be called to re-assess the child.

### **10.8 Head/facial injuries**

All accidents involving knocks on the head should be treated as serious. The first aider should be called to look at the child. If necessary, the parent/guardian should be called at once and informed of the circumstances. If parents/guardians cannot be reached and there is real concern, then the child should be taken to casualty as above. Parents must be informed if a child has bumped their head. This is to prevent concussion. A child whose head has been bumped is given a badge (pre-prep) sticker (prep) to wear to enable all staff to keep an eye on that child in the case of concussion. Parents should be phoned and emailed if you cannot get through.

## **11. Spillages**

The Estates team should be contacted initially so that they can arrange for a member of the team to clean the area appropriately. If spillages occur in the Science Department, staff will implement their risk assessment procedure.

### **11.1 Hazards**

Body fluids (e.g. faeces, vomit, saliva, urine, nasal and eye discharge) may contain viruses or bacteria capable of causing disease. It is therefore vital to protect both yourself and others from the risk of cross infection.

### **11.2. St Michael's Hygiene/Infection Control Advice**

All staff should take precautions to avoid infection, follow basic hygiene procedures and be aware of the procedure for dealing with spillages of bodily fluids

- We provide single-use disposable gloves and hand washing facilities for staff to use
- Wash your hands before eating or drinking, and after touching any surface or object that might be contaminated.
- Use soap and warm water, and soft paper towels or hot air for drying

- Caution: 'Barrier creams' or 'liquid gloves' do not provide a full barrier
- Particular care should be taken when dealing with blood or other bodily fluids and when disposing of dressings or equipment.
- Be aware of any skin conditions you may develop e.g., dermatitis and impetigo which may be contagious
- If you have gastric illnesses including vomiting and diarrhoea you should stay away from school for a period of 48 hours from the last episode of vomiting.

### **11.3 Initial Clean up procedure**

The person(s) who is at the scene of the accident should carry up an initial clean up following the procedure below:

- Disposable gloves should be used and these are contained within the nearest first aid kit.
- Place absorbent towels over the affected area and allow the spill to be absorbed. Wipe up the spill using these and place in a bin which has a bin liner.
- Put more absorbent towels over the affected area.
- The bin that has the soiled paper towels in should then be tied up, double bagged if necessary and placed in a yellow bin or an outside bin
- Any articles of children's clothing that has been contaminated from the spillage should be put in a plastic bag and tied up for the parents to take home
- Ensure that waste from the cleaning of body fluids is disposed of safely
- The area then needs to be cordoned off until cleaned and appropriate safety signage/barriers
- If the spillage has been extensive, the area may need to be closed until it can be cleaned thoroughly.

## **12. Medicines at School see Administration and Storage of Medicines policy**

<T:\Whole School\Policies\3. Welfare, Health and Safety of Pupils\Administration and storage of medicines.pdf>

If a child has to bring prescribed medication or over the counter medication into school, the medication must be brought directly to the office in its original packaging on which the prescription will be, together with a permission form (available from our office and on our website) stating dosage, times, any known side effects and authorisation to administer medicine.

Although every endeavour will be taken to give the medicine at the correct time, there might be occasions where this does not happen, because either the child forgets or cannot be located at the correct time by a member of staff. Should this occur the office will inform the parents by phone or email before the child goes home.

## **13. Ongoing Medical Conditions**

Special arrangements and training where necessary are put in place for pupils who have particular ongoing medical conditions or requirements which include Asthma, Epilepsy, Cystic Fibrosis, Diabetes and Anaphylactic medication. The arrangements made for such pupils are in Personal Care Plans (PCPs) which are drawn up in partnership with parents.

In accordance with the provisions in the Human Medicines Regulations 2012 the school will stock emergency Salbutamol asthma inhalers. These will only be administered where we hold consent from the parents/guardians and in the event that their inhalers cannot be located or is out-of-date.

#### **14. Infectious Diseases**

There is a list of infectious diseases in the Pre-Prep parent handbook and information to help parents to understand when it is inappropriate to send their child to school. A guide is kept in the office and staff room in the Prep School.

#### **15. School Trips**

If any accident occurs whilst on school trips, the designated first aider will accompany the child to hospital and inform the parents and school of the accident as soon as possible.

If a child becomes sick during the school trip appropriate action will be taken and parents informed.

##### **15.1 Administering Medicines on School Trips**

A Permission for Administering Medicines form is to be sent to parents before the trip. A record of the Administration of Medicine form is to be kept by the teacher on the trip and returned to the office after it.

Once the form is received, medicines should be handed directly to the teacher in charge of First Aid on the trip with clear instructions for administration.

On the trip, the teacher will administer the medicine in the presence of another teacher/ adult. A written record will be kept of time and dosage. This will be signed by both the teacher and the witnessing adult.

Medicines that can normally be bought over the counter without a prescription, e.g. Calpol, may only be administered if the parents have consented to this on the parental consent form, unless the parents have been contacted by telephone for their consent.

Pupils who use inhalers may keep them and use them as normal, but teachers must be aware that they are doing so.

#### **16. First Aid for the Public**

The School considers its responsibilities towards members of the public using our facilities in our first aid risk assessment. For those who hire our facilities, it is the organiser's responsibility to ensure the availability of medical, ambulance and first-aid assistance as appropriate for all those involved. This is set out in our Lettings policy.

#### **17. First Aid for Travelling, remote and lone workers**

Staff who need to work or attend training far from the site should discuss any potential issues with the health and safety leader. It is recommended that members of staff who travel long distances carry a personal first-aid kit as well as a mobile phone.

Updated March 2014

Amended November 2015 JAI

Reviewed and amended January 2017 JAI/JBO/KTA/DBI

Reviewed and amended March 2015 DVS

Reviewed and amended October 2016

Appendix 1

<b>Qualified First Aiders in Prep School</b>	
<b>Emily Aisher-28.10.2019</b>	<b>Helen Grogan-02.07.2018</b>
<b>Rosemary Baisch-20.04.2018</b>	<b>Lou Heslop-18.04.2019</b>
<b>Tabitha Barratt -18.4.2019</b>	<b>Win Inkson-18.4.2019</b>
<b>Carol Bent-18.4.2019</b>	<b>Carlos Lopez-18.4.2019</b>
<b>Susan Billings-18.4.2019</b>	<b>Rhys Morgan-28.01.2018</b>
<b>Di Birmingham – 20.04.2018</b>	<b>Anna Murch-20.04.2018</b>
<b>Jamie Booth - Paediatric First Aid -03.03.2018</b>	<b>Rosy Newman-31.01.2019</b>
<b>Mary Bridges- 20.04.2018</b>	<b>Nicolette Paizes-20.04.2018</b>
<b>Steve Brightman-02.06.2018</b>	<b>Lauren Pearce-20.04.2018</b>
<b>Jason Brown *-12.01.2019</b>	<b>Laura Shield-18.4.2019</b>
<b>Ali Chugg- Paediatric First Aid- 03.03.2018</b>	<b>Joel Thomas -18.4.2019</b>
<b>Darryl Edwards-18.4.2019</b>	<b>Sally Worby-18.4.2019</b>
<b>*Including Outdoor First Aid</b>	
<b>Appointed Persons in Prep School</b>	
<b>Di Birmingham</b>	<b>Kathryn Taylor</b>
<b>Jamie Booth</b>	<b>Joel Thomas</b>
<b>Helen Dudman</b>	<b>Fraser Wiseman</b>
<b>Ian Smith</b>	

<b>Qualified First Aiders in Pre-Prep</b>	
<b>Joss Barton- Paediatric First Aid- 21.10.2018</b>	<b>Rachel Jeffery- Paediatric First Aid-03.03.2018</b>
<b>Julie Barnes-Paediatric First Aid- 17.11.2017</b>	<b>Mandy McCracken-Paediatric First Aid -20.10.2018</b>
<b>Sally Beesley- 18.4.2019</b>	<b>Naomi Rose- Paediatric First Aid -20.10.2018</b>
<b>Debbie Clarkson-20.04.2018</b>	<b>Nicky Smith- Paediatric First Aid-03.03.2018</b>
<b>Ceri Crane- Paediatric First Aid-10.03.2019</b>	<b>Kâren Stibbons- Paediatric First Aid-03.09.2018</b>
<b>Frankie Elsey- 05.06.2018</b>	<b>Jo Wilkinson- Paediatric First Aid -01.06.2018</b>
	<b>Fran Wintour- Paediatric First Aid- 01.06.2018</b>
<b>Appointed Persons in Pre-Prep</b>	
<b>Zerrin Leech</b>	<b>TJ Smith</b>

## Appendix 2

### Location of First Aid Kits

	<b>Michaelmas Term</b>	<b>Lent Term</b>	<b>Trinity Term</b>
	<b>Date Checked &amp; Initial</b>	<b>Date Checked &amp; Initial</b>	<b>Date Checked &amp; Initial</b>
<b><u>Pre-Prep</u></b>			
High shelf next to Y1/2 entrance door			
Pre-prep office			
Kindergarten			
The Nursery			
First Aid room – travel first aid bags x2			
First Aid room – large bag x1			
<b><u>Prep</u></b>			
The Office			
The Pavilion			
Kitchen			
Sports Office			
Science Prep Room			
Maintenance Department			
Staff Room			
First Aid Room			
Swimming Pool			

The locations, contents and expiry dates of the First Aid Kits and that the list of trained First Aid Staff is up to date – checked by **Office Manager & Health Safety Leader**.

### **Appendix 3**

#### **Hospitals**

The nearest hospital Minor Injuries department is at Sevenoaks Hospital. Tel: 01732 470200  
(we have been advised that a parent must accompany a child under 16 for treatment)

The nearest Accident & Emergency departments are:

#### **Princess Royal University Hospital**

Farnborough Common

Kent BR6 8ND

Tel. 01689 863486

**Distance from school: 10 miles**

#### **Darent Valley Hospital**

Darenth Wood Road

Dartford

DA2 8DA

Tel. 01322 428100

**Distance from school: 13 miles**

#### **Maidstone Hospital**

Hermitage Lane

Maidstone

Kent ME16 9QQ

Tel. 01622 729000

**Distance from school: 16 miles**

#### **Tunbridge Wells Hospital**

Tonbridge Road

Tunbridge Wells

Kent TN2 4QJ

Tel. 01892 823535

**Distance from school: 17 miles**

Call **NHS 111** if you need health information or reassurance about what to do next.