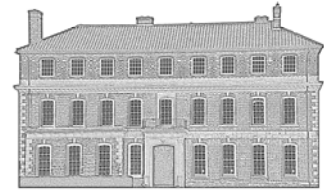


WINDLESHAM HOUSE SCHOOL

FIRST AID POLICY



Windlesham

Reviewed: January 2011

Policy Ref: 021

1) Background

- a) Windlesham House School (including Little Windlesham) is a boarding prep School for up to 350 children aged 4 – 13. In addition there are some 150 Staff in total (the majority engaged in Low Risk activities), approx. half of who are part time and some 40 of whom are resident.
- b) The School's First Aid Policy is designed to comply with best practice and to meet the legal obligations of the School as:
 - i) a boarding School,
 - ii) an educational establishment, and
 - iii) a place of work.
- c) The School operates a Medical Centre which is staffed 24 hours a day, 7 days a week during term time to provide medical care (including First Aid) to Pupils and First Aid to Pupils, Staff and Visitors. The Centre is generally manned by registered nursing Staff. On the exceptional occasions when the person in charge is not a qualified nurse, a registered nurse is available on call. Further details are given in the School's Medical Policy.
- d) A number of Members of the teaching Staff and non-teaching Staff, who are trained and qualified as First Aiders are able to give emergency first aid. The names of First Aiders are published in the Health & Safety Policy Manual and also in first aid notices that are displayed around the School.
- e) One Member of Staff who is a qualified Paediatric First Aider is always on duty when children from our Pre Prep Department are in School.
- f) First aid boxes are in all potentially high risk areas, as well as in the School Office. (The School Nurse regularly checks and replenishes the first aid boxes).
- g) Outside term time, the number of Staff working at the School is typically 12 -15, all involved in Low and Medium Risk activities. The School's policy is to ensure that there is one 'Appointed Person' available at any time to provide basic First Aid cover.
- h) A member of the Medical Centre Staff or an Appointed Person will be present at every School event. However, if there are large number of the general public attending the event (such as Bonfire Night & large sporting events), outside First Aiders will be on duty.
- i) Arrangements for pupils with particular medical conditions, for example asthma, epilepsy, diabetes, are included on Attachments II, III & IV respectively and also in our Medical Policy.
- j) Proper arrangements are in place to ensure that spillages of body fluids are safely and promptly cleared up and hygienically disposed in accordance with safe practice. Personal protective clothing (gloves, aprons) are available for use by all Staff. Details are included on Attachment V (disposal of clinical waste).

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- k) This policy also applies to our Early Years Foundation Stage and after School care arrangements, and specifically:
- i) EYFS requirements include finding out about an EYFS child's specific health requirements;
 - ii) Permission must be sought from the parents of every EYFS child before each and every administering of medicines. Details must be recorded and provided to parents.
 - iii) Written parental permission must be requested at the time of the child's admission of the provision to seek any necessary emergency medical advice or treatment in the future.

2) Administration of Medicines

The Schools' policy of the administration of medicines is included as Attachment I.

3) Policy Guidelines

ACTION	RATIONALE
1 A member of the Medical Centre Staff will be available at all times to deal with any First Aid incidents when the children are in School.	<ul style="list-style-type: none"> ▪ To ensure the safety of the children when at School ▪ To comply with the National Boarding Standards (which permit First Aid to be given by a qualified nurse or First Aider) ▪ To comply with the Department for Schools recommendations
2 All Staff working in the Medical Centre will have a valid Approved Health and Safety Executive (HSE) One-Day Appointed Person's [i.e. person who looks after the first-aid equipment and facilities, can administer 1 st Aid, calls the emergency services when required.] Certificate (updated every three years).	<ul style="list-style-type: none"> ▪ To comply with HSE guidelines¹ during term times ▪ To ensure First Aid knowledge, including resuscitation skills, is up to date and meet DfE recommendations
3 A selection of non-teaching Staff in the School will hold a basic 'Appointed Person' First Aid certificate.	<ul style="list-style-type: none"> ▪ To comply with HSE guidelines¹ during both term time and School holidays ▪ To ensure prompt First Aid treatment in an emergency
4 The School Office will hold a copy of all First Aiders' certificates.	<ul style="list-style-type: none"> ▪ To ensure all First Aiders have a valid First Aid certificate
5 The Medical Centre Staff will be responsible for ensuring First Aid kits are distributed around the School site, particularly in high risk areas and will maintain a list of the locations ² .	<ul style="list-style-type: none"> ▪ To ensure First Aid supplies are immediately to hand in all areas of the School ▪ To ensure First Aid supplies are available when the children are not in School or the Medical Centre is unattended
6 All First Aid kits located around the School site will contain identical supplies and be contained within a green box with a white cross. ³	<ul style="list-style-type: none"> ▪ To meet DfE/HSE recommendations ▪ To ensure Staff are familiar with the contents of the First Aid kit

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| 7 The First Aid kit located in the kitchen will contain blue food-handlers dressings. | <ul style="list-style-type: none"> ▪ To comply with HSE requirements |
| 8 The Medical Centre Staff will keep a supply of First Aid kits for School trips and outings. | <ul style="list-style-type: none"> ▪ To comply with DfE recommendations ▪ To ensure the safety of the children when off the School site |
| 9 All First Aid kits for School trips and outings will contain identical supplies and be contained within a green box with a white cross. ³ | <ul style="list-style-type: none"> ▪ To meet DfE/HSE recommendations ▪ To ensure Staff are familiar with the contents of the First Aid kits |
| 10 Each School Minibus & vehicle will contain a First Aid kit, the contents of which shall be identical. ⁴ | <ul style="list-style-type: none"> ▪ To meet HSE requirements ▪ To ensure Staff are familiar with the contents of the First Aid kits |
| 11 The Medical Centre Staff will be responsible for checking the contents/expiry dates of all First Aid kits at least every term. This will be documented on the First Aid check-list in the Medical Centre. | <ul style="list-style-type: none"> ▪ To comply with HSE/DfE guidelines ▪ To ensure all First Aid kits are well stocked and contents are in date |
| 12 All Medical Centre Staff will know the location of the School Accident Book (kept in the Medical Centre) and be aware of how and when to report an accident. | <ul style="list-style-type: none"> ▪ To meet HSE requirements ▪ Complete WHS Accident data records, to include in every instance, by name (pupil, staff or visitor), the 'what', 'where', 'how' & 'when' of every occurrence. ▪ Parents of children in EYFS must be told of any 1st Aid treatment given. |
| 13 In the event an Ambulance is needed to take a child or adult to A&E, in the first instance it is the responsibility of the on-duty nurse in the Medical Centre to call an Ambulance, but this will also be performed by any 1 st Aider or any member of staff, all of whom have had training in how to manage a medical emergency | <ul style="list-style-type: none"> ▪ To ensure that all children and staff receive professional medical care quickly. |
| 14 The Head Nurse is responsible for reporting any notifiable accident that occurs on School premises to a pupil, member of Staff, parent, visitor or contractor to the HSE in accordance with the Reporting of Injuries Diseases and Dangerous Occurrence Regulations (RIDDOR). | <ul style="list-style-type: none"> ▪ To ensure compliance with HSE RIDDOR |

4) Notes

¹ **HSE Recommendations for First Aid Cover:**

Term Time: 1-2 Appointed Persons (i.e. max 100 workers at any time in Lower Risk Activity, with max 5-6 in Medium Risk activities)

School Holidays: 1 Appointed Person (i.e. max 20 workers in Low/Medium Risk Activity)

² **Location of First Aid kits:** Medical Centre
Kitchens
Front Office

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Bursary
DT Room
Pottery Room
Art Room
New Wing
Denman Building (science labs)
PE Department (blue Bags)
Grounds Hut
Little Windlesham
Minibuses (x5)
Galaxy, Transit Van & Land Rover

³ **Contents of First Aid kits on Site**

A leaflet giving general advice on First Aid
20 individually wrapped sterile adhesive dressings (assorted sizes)
two sterile eye pads
four individually wrapped triangular bandages
six safety pins
six medium-sized (approximately 12x12cm) individually wrapped sterile unmedicated wound dressings
two large (approximately 18x18cm) sterile individually wrapped unmediated wound dressings
10 moist cleansing wipes
two pairs of disposable gloves
selection of gauze swabs for cleansing
three pods of sterile water for irrigation

⁴ **Contents of fist aid kits in Vehicles**

(statutory requirement of content)
A leaflet giving general advice on First Aid
10 antiseptic wipes (foil packaged)
one conforming disposable bandage (not less than 7.5 cm wide)
two triangular bandages
one packet of 24 assorted adhesive dressings
three large sterile unmediated ambulance dressings (not less than 15cmx20cm)
two sterile eye pads with attachments
twelve assorted safety pins
one pair of rustless blunt-ended scissors
Two pairs of disposable gloves

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Attachment I

Administration of Medicines Protocol

1) Policy Statement

- a) By having a policy we are providing a sound basis for ensuring the proper and safe administration of both prescribed and over the counter medications.
- b) The School's Medical Centre is manned by a registered nurse 24/7 during term time excluding long weekends and half term.

2) Over the counter medications.

- a) All over the counter medications are stored in a locked cupboard within the school medical centre. The school works to a homely remedy policy **at all times**. Anything not included in this policy cannot be given out without a prescription.
- b) The list of homely remedy medication stocked in the medical centre with indications for use, contraindications, dosages and side effects is available from the Nursing staff on request.

3) Prescribed medications

- a) All prescribed medication brought into school must be supplied by a recognised pharmacy or by the pupils home GP.
- b) Any child returning to school (boarders) with prescribed medication must provide an accompanying letter. This will then be reviewed by the school Doctor.
- c) Any day children bringing prescribed medication must sign the pro forma kept in the medical centre. Parents of Little Windlesham Pre Prep pupils must also sign a pro forma when any medication is sent into school. Parents are requested to attend the Medical Centre when bringing children in to School to sign the form requesting prescribed medication to be administered. The staff in Little Windlesham Pre Prep are unable to administer any medication (unless the Medical Centre is closed – e.g. Long Weekend).
- d) Medication will only be issued to the pupil for whom it has been prescribed.
- e) Medication must be in its original container and should be childproof.
- f) The original dispensing label must not be altered.
- g) Stocks of prescription medicines are not be held unless they are for a named person.
- h) Please do not supply your own medication to be administered unless prescribed.

4) All medication is administered under a protocol:-

- a) Medication will only be administered by the trained nursing staff within the medical centre if signed permission has been obtained. Parents are asked to sign their permission for medication to be administered on the joining medical forms.
- b) The identity of the pupil must always be checked.
- c) The administration sheet which is updated daily must match the label on the drug.
- d) Immediate initialising of the administration sheet.

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- e) Recording non attendance or refusal.
- f) All day pupils must complete a pro forma for prescription medication.
- g) All medication must not have reached its expiry date.
- h) Day children will be issued with a slip if any medication is given throughout the school day.

5) **Any inaccuracies must be reported immediately to the Head of Department**

Any medicine that requires being stored at low temperatures are put in the locked designated fridge in the surgery. A regular temperature check is kept. The fridge is kept locked at all times.

6) **Homeopathic Medication**

- a) We are not in a position to administer any Homeopathic medication unless prescribed by a registered homeopathic clinic.
- b) A letter from the practitioner must accompany all homeopathic medication. If prescribed homeopathic medication is brought to School, an individual locked box must be provided, be clearly marked and be handed into the medical centre.

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Attachment II

1) First Aid protocol for Asthma – Aims

- a) To enable all pupils with asthma to participate fully in school activities.
- b) To ensure all staff are able to deal with a child who has an asthma attack
- c) To ensure compliancy
- d) To help all pupils staff and parents are well informed about asthma and to adopt a responsible attitude to its treatment.

2) What is asthma?

Asthma is a disorder of the lungs. Underlying sensitivity and inflammation causes air passages or bronchial tubes to become narrowed, making it difficult to breathe in and out. Sudden narrowing produces what is usually called an asthma attack.

3) How does asthma affect children?

- a) Children with asthma may develop episodes of attacks of breathlessness and coughing during which wheezing or whistling noises may be heard coming from the chest. Tightness felt inside the chest is sometimes frightening and may cause great difficulty in breathing.
- b) Individual children are affected by their asthma in different ways. One child may have very occasional, brief and mild attacks whilst another may be forced to not attend school, be unable to participate in games and need regular treatment.

4) What causes an asthma attack?

- a) Asthma is a physical disorder of the lungs which the air passages become sensitive a variety of common stimuli. It is not an infectious disease nor is it a psychological disease, although strong emotions lead to symptoms.
- b) Collecting information on individual pupils
- c) All parents are asked to declare their child's asthma.
- d) Nurses will carry out a baseline peak flow of all new pupils
- e) Any boarder showing signs of asthma will be assessed and referred to the school Dr.
- f) A termly list will be published to all staff of the current asthmatics.

5) Use of inhalers preventative inhalers

- a) These are usually brown or orange and contain steroids. These are taken regularly to reduce the sensitivity of the air passages so that attacks no longer occur or are only mild.
- b) This type of inhaler does not help during an attack.
- c) Relief inhalers
- d) These are generally blue and are used to relieve pupils when breathless, coughing or wheezing.

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6) Use of inhalers in School

- a) All children should have a spare inhaler kept in the medical centre. All pupils have their own labelled inhaler kept in the pigeon holes in the medical centre. All pupils must collect and sign out their inhalers prior to games lessons or outings. Pupils must not share their inhalers.
- b) The asthma attack
- c) Call the medical centre for assistance.
- d) If a pupil becomes breathless wheezy or coughs continually.
- e) Keep calm.
- f) Let the pupil sit down in a position they find comfortable Do NOT let them lie down.
- g) Encourage slow deep breathing. If available use a paper bag.
- h) Loosen any tight clothing.
- i) Ensure the blue reliever is taken promptly and properly if possible via a spacer.

7) Signs of a severe asthma attack

- a) ANY of these signs means it is severe
- b) The relief medication does not work.
- c) The pupil is breathless enough to have difficulty in talking normally.
- d) Blue tingeing around the mouth
- e) Pulse rate is greater than 120 beats per minute.
- f) Rapid breathing of 30 breaths per minute.
- g) Call the emergency services
- h) Stay with the pupil
- i) Keep trying the relief inhaler every 5 – 10 minutes. Do not worry about overdosing.
- j) Inform the parents.

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Attachment III

First Aid protocol for Epilepsy

FIRST AID FOR SEIZURES IS QUITE SIMPLE AND CAN PREVENT A CHILD FROM BEING HARMED DURING A SEIZURE.

- 1) For a known epileptic, a child will have an individualised care plan.
- 2) There are different types of seizures which need different management.
 - a) Tonic – clonic seizure
 - b) The person loses consciousness; the body stiffens, then falls to the ground. This is followed by jerking movements. A blue tinge may appear around the mouth. Loss of bladder/bowel movement may occur. After a few minutes the jerking should stop and consciousness slowly returns.
- 3) **Do**
 - a) Call the medical centre for help
 - b) Protect the person from injury
 - c) Cushion their head
 - d) Aid breathing by placing in recovery position once the seizure has finished
 - e) Be calmly reassuring
 - f) Stay with the person
- 4) **Do not**
 - a) Restrain
 - b) Put anything in the persons mouth
 - c) Attempt to move unless in danger
 - d) Give anything to eat or drink until fully recovered
 - e) Attempt to bring them round.
- 5) **Medical Assistance**
 - a) Call for an ambulance if one seizure follows another, the person is injured or you feel urgent medical attention is required or if the seizure continues for more than 5 minutes.
 - b) Some children have medicine prescribed for this emergency and will be administered by the nurse in the Medical Centre.
- 6) **Absence seizure – daydreaming or switching off**

In the event of a simple partial seizure which can be twitching, numbness, sweating, dizziness or nausea with visual disturbance, hearing loss strong smell or taste or a strong déjà vu.

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- a) Reassure
- b) Guide from danger
- c) Be calmly reassuring
- d) Stay with them until recovered
- e) Call the Medical Centre

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Attachment IV

First Aid protocol for Diabetes

1) Protocol Statement

- a) Windlesham House School supports the RCN policy document of Managing Diabetes in schools and uses this model as their toolkit.
- b) The needs of the children with diabetes are paramount?
- c) Treatment regimes are led by clinical need.
- d) Children with diabetes have equitable access to all curricular and extra-curricular activities.
- e) Where support is required, training is provided by trained healthcare professionals.
- f) Children with diabetes should have sufficient support to ensure optimal glycaemic control within the school environment enabling them to meet their full academic capacity.

2) The management involves

- a) Monitoring of blood glucose levels
- b) Taking medications and supporting changing treatment regimes
- c) Treating emergency situations, such as hypoglycaemia or illness that has an effect on diabetes
- d) Access to a healthy balanced diet
- e) Participating in physical activity programmes and extra-curricular and social activities.
- f) All children have an individualized plan of care formulated with the child, school nurse, diabetes specialist nurse, the parents, school doctor and agreed by the school bursar within the main school and the Early years setting. These plans of care should be updated on an annual basis or whenever there is a change in care.

3) The Care Plan includes

- a) Blood glucose monitoring
- b) Provision of a clean environment
- c) Guidance on interpretation of blood glucose results.
- d) Guidance on the adjustment of insulin
- e) Hypoglycaemic, Hyperglycaemia, illness management, treatment plan and the provision of emergency supplies.
- f) Sport and exercise management including off site activities and sport.
- g) Support of administration of insulin in order to prevent exclusion.
- h) Food and dietary management.

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i) Emergency procedures

4) **Other Matters**

a) Storage of insulin, blood testing kit, needle stick injury risk and correct procedures to follow and safe storage of sharps bins are all managed by the staff in the medical centre.

b) In case of emergency the medical centre staff can always be contacted by telephone or by walkie talkie within the school.

c) Staff should all be aware that the following symptoms could be indicators of hypoglycaemia in a child with diabetes:

- Hunger
- Sweating
- Drowsiness
- Pallor
- Glazed eyes
- Shaking or trembling
- Lack of concentration
- Irritability
- Headache
- Mood changes, especially angry or aggressive

Always refer to the Medical Centre if you are concerned by the child showing these signs.

IF AFTER TREATMENT FOR HYPOGLYCAEMIA THE SYMPTONS CANNOT BE CORRECTED WITHIN 10 – 15 MINUTES OR IF THE CHILD IS UNCONSCIOUS, AN AMBULANCE MUST BE CALLED.

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Attachment V

First Aid protocol for the disposal of clinical waste

1) Aim

To ensure that all clinical waste is disposed of correctly according to current legislation health and safety and infection control policies.

2) **Procedure**

- a) **Urine**; Discard in lavatory, empty container and place in the clinical waste bin in the medical centre. If cleaning up urine from the floor put the contents in a yellow bag and dispose of in clinical waste.
- b) **Vomit**; Clean up with vomit kit – (available around the school in designated areas) – inform member of cleaning staff. Place in yellow bag and dispose of in main clinical waste bin outside dining room – key kept in medical centre. Wash hands and use antibacterial gel.
- c) **Sharps**; Discard needles and sharp objects used in a medical setting in the yellow bin in the surgery. Medical centre arrange collection of these when full. In the event of a needle stick injury report immediately to the medical centre.
- d) **Dressings and blood**; Clean up using appropriate cleaner available from medical centre or cleaning staff – put soiled dressings/plasters in clinical waste bin in medical centre.

- 3) When dealing with clinical waste gloves and aprons must be worn and individuals should take precautions to prevent bodily waste splashing them.
- 4) The key for the main clinical waste bin is kept in the medical centre and the bin is situated outside by the dining room. It should be locked at all times.
- 5) This bin is emptied on a monthly basis.