

# KENMORE PARK INFANT & NURSERY SCHOOL



## FIRST AID AND EMERGENCY AID POLICY

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### **Purpose**

- To preserve life
- To limit worsening of the condition
- To promote recovery
- To provide first aid as necessary from trained adults
- To promote health and safety awareness in children and adults, in order to prevent first aid being necessary
- To encourage every child and adult to begin to take responsibility for their health needs

### **First Aid Provision**

- The Head Teacher is responsible for ensuring that there is an adequate number of qualified First Aiders.
- Portable First Aid kits are taken on educational visits and are available from the Welfare Room.
- The Welfare Assistant(s) will ensure the maintenance of the contents of the first aid boxes and other supplies.
- All staff will ensure that they have read the school's First Aid and Emergency Aid Policy.
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### **First Aid Boxes**

First Aid Boxes are located in the welfare room

First Aid Boxes should contain: micropore tape, scissors, triangular bandage, wound dressing/bandage and gloves. No medicine/tablets are to be kept in the first aid boxes.

### **Procedures**

In school:

- In the event of injury or medical emergency, the welfare assistants will deal with the situation. If unavailable another appointed First Aider will be contacted.
- Any pupil complaining of illness or who has been injured is sent to the Welfare Room for the qualified First Aider(s) to inspect and, where appropriate, treat.
- Constant supervision will be provided in the welfare room.
- The welfare room has access to a wash basin.
- Parents should be contacted as soon as possible so that the child can be collected and taken home, if appropriate.
- Parents are contacted if there are any doubts over the health or welfare of a pupil.
- IF THE SITUATION IS LIFE THREATENING THEN AN AMBULANCE SHOULD BE CALLED AT THE EARLIEST OPPORTUNITY WITHOUT WAITING FOR THE APPOINTED PERSON TO ARRIVE ON THE SCENE.
- No member of staff or volunteer helper should administer first aid unless he or she has received proper training, except in the case of minor cuts and grazes.

- For their own protection and the protection of the patient, staff who administer first aid should take the following precautions:
  - exposed cuts and abrasions should be cleaned under running water and patted dry with a sterile dressing.
  - hands should be washed before and after administering first aid
  - disposable gloves should be worn.
- All serious accidents should be reported to Head Teacher or First Aider who should call an ambulance and the child's parents ASAP (phone numbers accessible on the PC in the welfare room through SIMS)
- In the event of a serious incident an ambulance is called and a member of staff accompanies the pupil to hospital. Parents are asked to go immediately to the hospital.

### **Out of School**

- Whenever possible take a MOBILE TELEPHONE on trips out of school.
- Teachers to check that pupils who have asthma take their inhalers.
- If the trip is via Minibus or coach teachers/first-aid trained members of staff must take a first aid kit.
- A copy of the welfare log proforma will be taken on all trips to log any incidents that may occur off site.

### **Educational Visits**

The Head Teacher has responsibility for ensuring staff have adhered to the school's 'Educational Visits Procedures' (as set out in the Health & Safety Policy) when organising a visit. All staff should have a copy/a copy be made readily available to consult e.g. saved in Policies folder on Teachers Only drive. A Risk Assessment will need to be carried out as part of an educational trip.

### **Action at an Emergency (To be undertaken by trained First Aider)**

- Assess the situation: Are there dangers to the First Aider or the casualty? Make the area safe, look at injury: Is there likely to be a neck injury?
- Assess the casualty for responsiveness: Does the casualty respond.

IF THERE IS NO RESPONSE:

- Open airway by placing one hand on the forehead and gently tilt the head back. Remove any obvious obstructions from the mouth and lift the chin.
- Check for breathing. If the casualty is breathing assess for life threatening injuries and then place in the recovery position. If the casualty is not breathing send a helper to call an ambulance and give 2 rescue breaths making 5 attempts at least.
- There is also a defibrillator in school and staff have been provided with training on how it should be used.

### **Incident Reporting**

- All incidents, injuries, head injuries, ailments and treatment are reported in the welfare log book, kept on the desk in the welfare room.
- Parents are informed of a head injury via a carbonated slip from the welfare log book. Parents will also be contacted by phone and made aware of the Head injury so that they are aware and can agree on action to be taken in the best interest of the child.
- First Aiders contact parents by phone if they have concerns about the injury.
- Staff should complete the accident book if they sustain an injury at work. An injured member of staff or other supervising adult should not continue to work if there is any possibility that further medical treatment is needed. The member of staff or other supervising adult concerned should seek medical advice without delay.

### **Administration of Medicines**

- Our trained First Aiders administer medicines (stored in Welfare room draw) for cases of epilepsy and anaphylaxis only for pupils who have a medical protocol which has been signed by the parent/medical professional and an Individual Health Care Plan (see Supporting Pupils with Medical Conditions Policy).
- Before any of these medications are given, written permission from parents/carers must be given.
- Guidelines for using an epipen are at the end of this policy.
- A record will be kept of any medicine administered under these circumstances, and parents will be informed.
- Other prescribed medicines are only given when a pupil is otherwise fit for school but needs to complete a course of medication of 7-10 days at such times written permission from parents/carers must be given. If any medications (such as, asthma inhalers) are brought into the school it is a parent's responsibility to ensure that they inform the school. The school will then work with the parents to decide whether an Individual Health Care Plan is required and, if so, will complete an IHCP (see e.g. Asthma/Allergy Policy) which will then be signed by a member of school staff and the parent/carer. (See Supporting Pupils with Medical Conditions Policy).

### **Body Spillages/HIV**

- No person must treat a pupil who is bleeding, without protective gloves.
- Protective gloves are stored in the cupboard in the Welfare Room.
- Sponges and water buckets must never be used for first aid to avoid the risk of HIV contamination.
- All body fluid spillage's (Vomit, Diarrhea and Blood) must be cleaned immediately. This is vital if spread of infections to be reduced. Gloves should be worn when in contact with blood or body fluid is likely.
- Single use latex (or non-latex) gloves should be available for first aid and hygiene care procedures.
- Ordinary rubber gloves (available from the caretaker) are suitable for dealing with spillages. They must be kept for this purpose only. Following use, gloves must be rinsed and left to dry.
- Absorbent granules should be dispersed over spillage and left to absorb for a few minutes then swept up into newspaper. A designated dust pan and brush is available for body spillage's and is kept in the Caretakers Room. Wash the affected area with warm water and detergent and dry. Once spillage's has been put into newspaper, hands must be washed and dried after removal after removal of protective gloves. Once spillage's has been put into newspaper it must then be placed in a sealed black plastic bag and put in the external dustbins for domestic waste disposal.

### **Head Lice**

- A general letter is sent to the parents of all pupils in a class if there is a case of head lice in the class.
- If live lice are noticed in a pupil's hair the parents are contacted by telephone and asked to collect their child and keep them at home until they have been appropriately treated along with the rest of the family.

### **Record Keeping**

- All incidents related to welfare / first aid to be logged in the welfare log book located in the welfare room.
- Guidelines for the completion of the log are attached to this policy.
- The welfare log is to be kept in order and available to all staff.



## **KENMORE PARK INFANT & NURSERY SCHOOL** **GUIDANCE FOR COMPLETING THE WELFARE INCIDENT LOG**

This file could be used as a legal document.

It is not acceptable to leave any of the columns blank.

- DATE:** Enter the date of the incident in this column even when the date has already been entered above
- TIME:** enter the time that the incident was brought to your attention
- CHILD'S NAME:** enter the child's first and second names
- CHILD'S CLASS** enter the child's registered class
- INCIDENT:** this **MUST** detail the injury that the child has **AND** how that injury occurred including any other children involved (e.g.: bruise on leg due to being kicked by Harry).
- ACTION TAKEN:** this **MUST** detail what you did as a first aider to treat the injury **AND** why you did this.  
(eg: ice pack applied to reduce swelling).
- HEAD INJURY:** this **MUST** be filled out in the case of **ALL** head injuries.  
Please tick when the parents have been phoned (this has to be done within half an hour of the injury). Please tick when you have given the child a head injury note to take home (this has to be done before sending a child away from the Welfare Room)
- 1<sup>ST</sup> AIDER INITIALS:** initial the incident so that it is clear who has dealt with an incident even if your initials already appear in the row above.



## **PUPILS WITH SPECIFIC NEEDS**

There are some pupils who require specific individual medical needs and attention. Their needs will be covered by an IHCP.

Parent notes, professional advice/medical advice must be reflected in the IHCP which will detail actions to take in a medical emergency.

Should children be ranked as a high risk of illness/hospitalization/death in the IHCP must have an 'Emergency Protocol' sheet completed. See Appendix 1. These will be on display in the child's classroom; the welfare room; the staff room and a copy will be given to canteen staff.



## KENMORE PARK INFANT & NURSERY SCHOOL GUIDANCE ON THE ADMINISTRATION OF EPIPENS

### **Purpose:**

The purpose is to describe to parent, governors, and staff the measures taken by the school to protect those children who may need to receive the administration of an epipen. This document only describes in outline the causes and symptoms of anaphylaxis.

### **What is anaphylaxis?**

Anaphylaxis can be triggered by foods (nuts, shellfish, dairy products) or non-foods (wasp and bee stings, certain medicines, even exercise). The symptoms of anaphylaxis can be identified by effects on the respiratory system, cardiovascular system, gastrointestinal system, skin, nervous system, genitourinary system. In the event of an attack it is important to administer an epipen as soon as possible and then call 999 for an ambulance.

### **How will I know when and how to administer an epipen?**

The Welfare Assistants are trained by the school nurse about anaphylaxis and the administration of epipens. Each academic year there will be a training session for new and existing members of staff.

### **How will I know which children might need an epipen?**

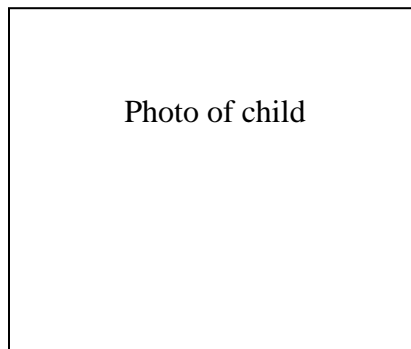
The names and photographs of all children at risk are in the school's Medical Conditions folder in the Teachers Only section of the intranet. A copy of all the children in the year group will be distributed to each class teacher. A copy will also be given to the Head SMSA and the welfare staff.

It is important to recognise that in a large school like Kenmore Park First/Infant School it is very difficult for all members of staff to know all children, and that a leading responsibility for monitoring for anaphylaxis falls to those adults that have most frequent contact with individual children.

### **Where are epipens stored?**

Each child should have two epipens in school, though the school is aware that GPs often prescribe only one for schools. These are stored in the welfare room unless it the classroom is a distance away from the welfare room or if it is likely that the child may require it in which case it may be kept in the classroom. Each epipen is stored in a plastic wallet that also contains the name of the child, a copy of the child's IHCP and emergency protocol featuring his/her picture.

## Appendix 1



The following advice was received via Mrs XXXX, mother, XX/XX/XXXX

**Name:** \_\_\_\_\_ **Emergency Protocol**

**DOB: XX/XX/XXXX Year: XXX Class: XXX**

**Issues:** **Severe asthma; severe allergies** (also eczema)

### What to do:

#### Asthma:

If he is short of breath give to 2 puffs of inhaler (10 count).

Monitor for 10-15 minutes. If he has not responded, give him 5 more puffs and contact mum.

If his conditions worsen/remains the same, contact the ambulance.

#### Allergies:

If he consumes **egg/peanuts/almonds** he may go into anaphylactic shock.

Epi pen to be administered and ambulance called.

Parents to be called.