



ST WENN SCHOOL

FIRST AID POLICY

Reviewed: September 2020

Date of next Review: July 2021

Headteacher: Mrs Sally Berry

Chair of Governors: Dr Tessa Cubitt



COVID 19 ADDENDUM

School Guidance for Parents:

What to do if...	Action Needed	Return to school when....
...my child has coronavirus symptoms	<ul style="list-style-type: none"> • Do not come to school • Inform school • Self-isolate • Get a test within 24 hours • Inform school of the results within 72 hours 	...the test comes back negative
...my child tests positive for coronavirus	<ul style="list-style-type: none"> • Do not come to school • Inform school • Self-isolate for a further 10 days from test result 	...they feel better. They can return to school after 10 days even if they have a cough or loss of smell/taste. These symptoms can last even when the virus has gone.
...somebody in my household has coronavirus symptoms	<ul style="list-style-type: none"> • Do not come to school • Inform school • Self-isolate • Household member get a test within 24 hours • Inform school of the results within 72 hours 	...when the household member test is negative
...somebody in my household has tested positive for coronavirus	<ul style="list-style-type: none"> • Do not come to school • Inform school • Self-isolate for 14 days 	...the child has completed 14 days of self-isolation
...NHS have identified my child as a 'close contact' of somebody with symptoms or confirmed coronavirus	<ul style="list-style-type: none"> • Do not come to school • Inform school • Self-isolate for 14 days 	...the child has completed 14 days of self-isolation
...we/my child has travelled and has to self-isolate as part of quarantine	<ul style="list-style-type: none"> • Consider quarantine requirements and FCO advice when booking travel • Do not request term time leave unless evidenced exceptional 	...the quarantine period of 14 days has been completed



conditions listed by the government	circumstance(adhere to school attendance policy) <u>Returning from a destination where quarantine is necessary</u> <ul style="list-style-type: none"> • Inform school • Do not come to school • Self-isolate for 14 days 	
...my child self isolates for suspected COVID 19 for which a test is negative, but they are still too unwell to return	<ul style="list-style-type: none"> • Normal absence procedures apply 	Feeling well enough to return
...we have received medical advice that my child must resume shielding	<ul style="list-style-type: none"> • Do not come to school • Inform school • Provide evidence to school of request to • Shield until you are informed that shielding restrictions are lifted and shielding is paused again, then inform pastoral staff of the day your child will return to school 	... the shielding restriction has been lifted.

Guidance for Schools:

What to do if a pupil is displaying symptoms of coronavirus (COVID-19)

If anyone in your school becomes unwell with a new, continuous cough or a high temperature, or has a loss of, or change in, their normal sense of taste or smell (anosmia), they must be sent home and be advised to follow the guidance for households with possible or confirmed coronavirus (COVID-19) infection. This sets out that they must:

- self-isolate for at least 10 days
- arrange to have a test to see if they have coronavirus (COVID-19)

Action list

1. In an emergency, call 999 if they are seriously ill or injured or their life is at risk. Do not visit the GP, pharmacy, urgent care centre or a hospital except in an emergency.
2. Call parents/legal guardian to collect pupil and take them home. Advise them that all household members will need to isolate and refer them to the guidance for households with possible or confirmed coronavirus (COVID-19) infection.



3. While the pupil is awaiting collection, move them to an isolated room and open a window for ventilation. If it is not possible to isolate them, move them to an area which is at least 2 metres away from other people.
4. Staff caring for a pupil while they are awaiting collection should maintain 2 metre distancing. If not possible, for example with a young child, they should wear suitable PPE
5. If the pupil needs to go to the bathroom while waiting to be collected, they should use a separate bathroom if possible. The bathroom should be cleaned and disinfected using standard cleaning products before being used by anyone else.
6. From 26 August, all schools and FE providers will have received an initial supply of 10 home test kits. Home test kits should only be offered to individuals in the exceptional circumstance that you believe an individual may have barriers to accessing testing elsewhere.
7. Staff/other pupils who have had contact with the symptomatic pupil must wash their hands thoroughly for 20 seconds.
8. When parents/legal guardian pick up the pupil, advise them to get the pupil tested and notify you of the results.
9. Once the pupil has left the premises, thoroughly disinfect/clean all surfaces and contact points they came into contact with (including the bathroom if used).

What to do if a pupil tests positive for coronavirus(COVID-19)

1. You must take swift action when you become aware that someone who has attended your school has tested positive for coronavirus (COVID-19).
2. You can contact the dedicated advice service, introduced by Public Health England (PHE) and delivered by the NHS Business Services Authority. This can be reached by calling the DfE Helpline on 0800 046 8687 and selecting option 1 for advice on the action to take in response to a positive case.
3. If, following triage, further expert advice is required the adviser will escalate your call to the PHE local health protection team (HPT).
4. The advice service (or HPT if escalated) will work with you to carry out a rapid risk assessment and identify appropriate next steps.
5. With support from the advice service (or HPT), identify close contacts of the symptomatic individual. Contact tracers will inform contacts that they need to self-isolate for 14 days in line with guidance for households with possible or confirmed coronavirus (COVID-19) infection.
6. For pupils who are isolating, ensure access to remote provision so that they can continue to learn remotely.
7. A template letter will be provided to schools, by the advice service or the health protection team, to send to parents and staff if needed.
8. Schools must not share the names of people with coronavirus (COVID-19) unless essential to protect others.



This policy reflects the requirements in Section 3 – The Welfare Requirements - of the Statutory Framework for the Early Years Foundation Stage and the Every Child Matters Agenda

Accidents

An Accident Book is kept and all accidents to staff and/or pupils are recorded. The Accident Book is kept in relevant classes for pupils and in the medicine cupboard for staff.

When to report an accident

If a child is taken to hospital for treatment, it is then a reportable incident for the purposes of the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR). It is also a reportable accident if it has occurred as a result of, conceivably, the school's negligence

The Accident Book

This must be filled in carefully (but where possible concisely) to describe the circumstances of any accident. If a child does have to be taken to hospital, as soon as is practicable (and preferably and if appropriate before leaving with the child) the parent should be asked to sign the accident book report, so that it is clear later on that the parent had indeed been briefed on the circumstances and the action taken by the school thus far in treating the injury. Head injuries must always be handed to the parent, with a copy kept at the school.

RIDDOR Reporting

It is easiest to report reportable incidents on the web at www.riddor.gov.uk/reportanincident.html.

Staff should be concise and always print out and file a copy of any RIDDOR report submitted over the web.

First Aid Training

All support staff are required to undergo first aid training within the first year of their employment. All PE staff are required to have basic 1st Aid training. Staff working mainly in the EYFS must hold a current pædiatric first aid certificate recognised by the school's LA. At least one person who has a current pædiatric first aid certificate must be on the premises, or on an outing, at all times when EYFS children are present.

First Aid Boxes

There are First Aid boxes located in every classroom. The member of staff responsible for First Aid boxes is Rhian Roberts (supported by JO Ward). Please inform either of those staff members if items need replacing.

Minor Accidents to Children



Details of the injury and the treatment given will be recorded in the Accident Book by the member of staff who was on duty when the accident occurred. Plasters are not applied routinely but may be applied to replace an existing plaster or if the child is not known to be allergic. Staff must wear disposable gloves if bleeding is taking place.

Class teachers must be notified if a child in their class has had an accident during the day. This will normally be done by the member of the support staff who has treated the child. It is unacceptable for a child to go home with an injury and no explanation be given to the parent. Class teachers must ensure that minor injuries are mentioned to the adult collecting the child at the end of the day. Please inform parents/carers if a child has a bump to the head.

Children requiring further treatment after a minor accident may be sent home as soon as a parent or other responsible adult (nominated by the parent) is available.

More serious accidents

In the case of accidents to pupils the following procedure should be followed:

- Keep other pupils away and inform a First Aider and the Class teacher immediately. **First Aid Trained staff are:- Samantha Bartlett and Kevin Beer.**
- If you are not qualified in First Aid, a member of staff who is qualified must be called to assess the situation before the child is moved.
- Never attempt to move anyone who may be seriously hurt.
- If the accident is of a very serious nature a paediatric ambulance must be called. Any member of staff may call an ambulance if considered to be necessary. If possible, the Headteacher should be notified if an ambulance is required.
- Parents must be notified as soon as possible of any accidents or injuries sustained by a child whilst in the school's care, and of any first aid given.
- A careful note of the time of the accident should be made and the attending member of staff should be prepared to comment on the child's condition during the minutes before the paramedics arrive. A member of staff should accompany the child in the ambulance if the parents have not been able to get to the school in time.
- If you witness the accident, or were the first person to deal with it, you must complete an accident form as soon as practicable after the accident.
- The Accident Books are kept in the relevant classrooms and are always accessible.

Accidents to staff

The same procedure should be followed with accidents to members of staff as for accidents to children. Any accident to a member of staff involving personal injury must be reported to the office and must be recorded using the staff accident forms.



Staff should ensure that the office has the emergency details of someone who may be contacted in the event of an emergency.

Head Injuries

If there is a head injury of any kind, a member of staff should fill out an accident form and inform the parents by telephone. This is to ensure parents are informed of a bump to the head or an injury to the face in order to allow them to take their child to their own doctor should they wish to do so.

Soiling 'accidents' See Intimate Care Policy

When soiling accidents occur in school, it is upsetting for the child and should be dealt with sensitively by members of staff. Preferably, the child should be attended to by staff with whom they are familiar.

Medical Forms

The parents of every new child are required to complete a medical form, giving medical information. They are also advised to let the school know of any new medical matters.

Within the first week of term medical forms will be checked, a note made of any potential problems and information will be given to all staff, regardless of whether they teach that child. Medical information will be updated when necessary and new information will be given to the staff. Staff must be aware of all children in school who suffer from allergies, not only the children they teach regularly.

Medical forms are kept in a file in the office.

Illness

When a pupil becomes ill at school, the following procedure should be followed :

- The classteacher will deal with minor complaints and make a judgment as to whether to contact the pupil's parents.
- Parents must be contacted as soon as it is judged that a pupil is too ill to stay at school. If it is impossible to contact parents or the emergency contacts whom parents have nominated immediately, regular efforts to contact them must be continued. The child can lie down if necessary, until he or she can be taken home.
- Any member of staff may call an ambulance but the Headteacher should be consulted.

Medicines

(Please see Statutory Framework for the EYFS, May 2008, page 26), for details when children in EYFS classes require medical attention. The usual advice from doctors is that children who are unwell should not be in school. However, children may need medicine while they are at school to cope with an allergy or chronic illness (such as diabetes or asthma) or because they are recovering from a



condition which requires the completion of a course of treatment involving antibiotics. No medicine must be administered at school without a signed and dated consent form from the child's parents/guardian. These are to be kept in the office. If medicines are to be administered at school the following procedures must be adopted :

- No staff should ever give medication of any kind (including Optrex eye lotion, throat lozenges, creams, Calpol or similar) to a child without the prior consent of the parent. In most cases the Class teacher will be responsible for administering medicines.
- The smallest practicable amount of the medicine should be brought to school by the parent, with clear written instructions for administration. This will be kept by the Class teacher. The medicine will then be kept in the school office or in the kitchen refrigerator.
- The medicine will be self-administered if possible, under the supervision of the Class teacher
- When medicines are administered the time and dosage should be recorded.
- In the event of a child feeling unwell, the teacher can request the school office to telephone the parent to obtain permission to administer Calpol.

Anaphylaxis Policy

All medical forms are checked on an annual basis at the start of the September term (or on admission if a child joins the school part way through an academic year).

A record of all children who are known to suffer from anaphylactic shock is kept and displayed on the notice board in the staff room. It is the responsibility of all teaching, lunch, office and peripatetic staff to make themselves aware of any child who is at risk of suffering anaphylactic shock and to be aware of the procedure to follow in the event of a child showing symptoms.

Epipens and other medication of known anaphylaxis sufferers must be readily available, at all times, in case of emergencies. Ideally there should be one pen in the classroom; this should be taken when off site, and a second pen is kept in the 1st Aid cupboard. These pens should be clearly labelled with the name of the child. For children with severe allergy it may on occasion be necessary for the child to carry the pen in a 'bum-bag' or similar.

Staff must ensure that on occasions when children leave the school premises, e.g. sport, field trips, visits etc, the appropriate medication is taken.

Prevention



In order to minimise exposure to triggers (e.g. nuts/egg/wasp/bee stings) staff must be vigilant when :

Having birthday cake/biscuits in class, Cooking/Supervising lunch, Taking children on outings, End of term parties are taking place, Washing hands: it can take only a trace on a sufferer's lips to produce an allergic reaction.

Any child known to have allergies to food products should have his or her own 'safe' bag of treats in school. These can be used to give the child a treat should birthday cake or other foodstuffs be brought into the classroom. Class teachers should ask parents to provide these.

The school has a strict 'no nuts' policy – however staff should still be vigilant as parents can forget and may include items such as peanut butter in packed lunches.

In the event of anaphylactic shock the following protocol should be observed :

For known cases of children who are allergic to nuts/eggs/wasp/bee stings:

- At first signs which may include itchy skin/swelling to tongue/runny nose/ eyes, the member of staff must take the child to the office
- Office staff will notify the Headteacher immediately.
- If the child's face or lips begin to swell or there is any sign of breathing difficulty **DO NOT DELAY – ADMINISTER THE EPIPEN** according to training given. This is in the upper quadrant of the thigh or buttock. The pen must be depressed into the skin for at least 10 seconds.
- Call 999, telling the ambulance service that you have a child in anaphylactic shock. This is the responsibility of a) office b) staff in attendance
- After calling 999 then contact parents/emergency numbers and let them know what has happened and to which hospital the child has been taken if known by then.
- A member of staff must accompany the child to hospital if the parent has not arrived.
- If the ambulance has not arrived and there is no improvement after 10 minutes administer second EpiPen.

All incidents should be recorded in the Accident Book.

Asthma Policy



All medical forms for new children are checked on an annual basis at the start of the September term (or on admission if a child joins the school part way through the academic year). Inhalers of known asthmatics must be readily available, at all times, in case of emergencies. Inhalers are kept in the 1st Aid cupboard and a second inhaler may be kept in the classroom if necessary. All inhalers must be clearly labelled with the child's name and dosage.

They must be taken to games (in the first aid box) and on school outings. On residential trips two inhalers should be taken, one kept in the child's bag and one carried by the child's teacher or group leader.

In the event of a minor attack:

The child

- Will be able to continue with the task in hand
- Can still concentrate
- Does not disturb school activities
- Recognises that he/she is having an attack and may start own treatment, i.e. blue reliever inhaler
- Gets better quickly

In the event of a severe attack, when the following symptoms will be evident:

- Treatment for minor attack does not work
- Distress/ unable to talk
- Breathing fast >40/min
- Coughing and wheezing
- Fast heart rate >120/min
- Blue lips

Do not delay: Dial 999 and say that it is an emergency – child with severe asthma attack

Call parents

- At the same time stay calm and re-assure the child
- Keep child in upright position (do not lie down as this further restricts breathing). The child may feel more comfortable sitting with arms resting over the back of a chair
- Stay with the child until the ambulance arrives
- Member of staff to accompany child in ambulance if parent has not arrived NB It is a frightening experience for the child so try to stay calm to prevent panic in the child thus making the situation worse.

All incidents should be recorded in the Accident Book.



Infectious Diseases

The school follows advice from the health authority. If a member of staff is concerned that a child is suffering from an infectious disease or has returned to school too soon he or she must notify the Headteacher immediately.

Staff should notify the Headteacher of any infectious disease as there may be members of the school community who may be adversely affected. Staff should be vigilant about washing their hands and ensuring that children wash their hands to prevent the spread of disease.

Tissues should be available in classrooms at all times. Children should be encouraged to use them and dispose of them appropriately.

Nits/Headlice

If it is suspected that a child has nits or head lice this should be treated with sensitivity to minimise embarrassment to the child. The Class teacher (or TA) will inform the parent/carer at the end of the day.

If the child has live lice he/she may be sent home and notification will be sent to the parents of the rest of the children in the class.

Signed Headteacher: *S Berry*

Chair of Governors: Tessa Cubitt