

FIRST AID POLICY

First Aid is emergency care given to an injured person before professional medical care is available. The First Aiders and appointed persons are expected to attend in an emergency situation in order to secure the welfare of pupils, staff and visitors.

RISKS

A risk assessment of First Aid needs is necessary to ensure adequate provision is available. This should include:

- The identification of pupils with specific conditions e.g. asthma, allergies.
 - The identification of specific hazards in school.
 - When to call for further help.
 - The documentation of necessary treatment given.
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RESPONSIBILITIES

All staff should be aware of available First Aid personnel, facilities and the location of First Aid Boxes, information and the Medical Centre. Lists of staff with First Aid qualifications and/or appropriate training are displayed in the Common Room, classrooms and around the key areas of the School.

Legal responsibilities

The Health and Safety (First-Aid) Regulations 1981 require employers to provide adequate and appropriate equipment, facilities and personnel to ensure employees receive immediate attention if they are injured or taken ill at work.

The Regulations do not place a legal duty on employers to make first-aid provision for non-employees such as the public or children in Schools. However, HSE strongly recommends that non-employees are included in an assessment of first-aid needs and that provision is made for them.

There are no predetermined rules regarding the number of first aiders as this will vary depending on the individual circumstances of each employer.

The School has assessed what is 'adequate and appropriate' and as such provides First Aid at Work training (conducted by an outside individual/organisation) and Emergency First Aid Training (provided by the School Nurse). The type of training to be undertaken will be in accordance with the following requirements:

1. A minimum of one first aider to be located within each building.
2. Where possible, either a first aider or emergency trained member of staff within each department.
3. At least one first aider or equivalent trained member of staff to accompany each School trip

Please note: the School Nurse will assist both pupils and staff.

Once the appropriate number of first aid trained staff has been achieved, the School will provide Emergency First Aid Training. This will be provided by the School Nurse and is aimed at assisting both pupils and staff. Emergency First Aid Training will allow staff to assist in an emergency situation and will cover School specific requirements.

It is important to highlight that the First Aid at Work certificate is a legal requirement on employers to fulfil their duty of care towards employees. While in an emergency situation any qualified member of staff may be able assist pupils, this is not the intended purpose.

Requests for training

In order for staff to undertake any form of First aid training staff should first contact Andrew Westlake, Senior Teacher (Staff) who, in accordance with the above, will assess the requirements of the School and determine the appropriate level of training.

Once First Aid training has been approved by the Senior Teacher (Staff), the school nurse will book the staff member onto a suitable course.

First Aid provision must be available at all times, including out of school trips, during PE lessons and other times the school facilities are used.

First aid kits are available for use in the Main Building (School Office, ICT Office, Reprographics and Science Labs), Oldfield (IRP's office and MFL office), Lyon Building (Staff Common Room and Maths office), Sixth Form Centre (Kitchen), Ernest Young Building (Kitchen), Red House (Medical Centre), Le Beau House (Kitchen) and Sudbury playing fields (First aid room and Pavilion Kitchen).

The automated defibrillators are located on the sports hall corridor and in the pavilion at Sudbury Playing Fields.

First Aid cover is provided during the whole school day. If a staff member is alone on a trip or during a PE lesson, they have access to a telephone in order to summon help. This is best practice when sporting events are being held at Sudbury playing fields.

First Aiders must have attended a recognised First Aid Course approved by the Health and Safety Executive (HSE) and attend refresher courses every 3 years. All staff must have a basic knowledge of what to do in an emergency. The School Nurse provides a First Aid Refresher session at the start of the Academic Year. She also gives specific advice on what to do in case of anaphylactic reaction, Epileptic Seizure, Asthma Attack and Diabetic Crisis. She tells staff about boys with specific medical needs, how best to care for them and what to do in an emergency. Boys with medical conditions are flagged on iSAMS and the lists of boys with medical conditions are available to staff on the school database.

FIRST AID AT WORK FIRST AIDERS

Oldfield Building Mr I Parker Mr P Berry Mr A Hartrup	Main Building Mrs L Plummer Mr S Jones Mr J Bruce	PE Mr A Ling
Lyon Building Mr J McNaughton	Kitchen Mrs S Blithing	Science Mr O Damree Mr B Herman
Art Mr E Collard-Walker	Caretaking Mr M Carrick Mr J Dempsey Mr L Exelby	Sudbury Playing Fields Mr C Lynch
The Red House Mr J Pepperman	The Thomas Blackwell Centre	Le Beau House TBC
The Music School Mr A Furniss		

MEDICINE ADMINISTRATION

The School Nurse will only administer medication that a parent has consented for. Parents will be asked to complete a medical consent form annually, asking for consent to administer basic medications. If a child needs any other medication to be administered in school, the parent will need to complete a medicine administration request form and return it to the School Nurse. The medicine must be in the original container as dispensed by a pharmacist with the child's name and instructions for administration as supplied by the pharmacist on the label.

Medicines are stored in a locked drugs cupboard in the medical centre. This cupboard can only be accessed by the School Nurse. Emergency medication, such as inhalers and EpiPens, are stored in a locked cupboard in the medical centre corridor. The key can be accessed directly from the School Nurse. If the School Nurse is not in the medical centre, there is an emergency cord that can be pulled to alert reception that help is needed urgently in the medical centre. Details of what to do in case of emergency are displayed next to the emergency medication cupboard.

This information will be stored on iSAMS. If no written permission has been given, no medication may be administered.

All staff at the JLS have the opportunity to be trained in how to administer Adrenaline, via an auto injector such as an EpiPen.

FIRST AID CABINETS/KITS

The contents of the First Aid cabinets/kits are to be regularly checked and maintained by the School Nurse. These are also included in the Annual Health & Safety Inspection.

The PE department has a number of more extensive kits including cold compresses and considerably more dressings etc.

During sports on Saturdays at the Playing Fields, the School Nurse/other qualified person provides mobile care with an extensive First Aid kit.

SPORTING INJURIES

If a boy is injured, whilst playing sport, the teacher in charge will assess the injury and provide first aid. If the injury is severe the teacher will contact the School Nurse and ask her to attend. The School Nurse will make her way to the scene. If the incident occurs at Sudbury Playing Fields, the School Nurse will inform Reception that she will be off site and display a notice on the medical centre door.

Once the school nurse has assessed the injury she will treat it and inform the boys' parents, treat it and ask the parents to collect their son and take directly to A&E or protect the injured person from further harm and call for an ambulance. The School Nurse will remain with the injured boy until his parents arrive. Should parents not be able to get to the school, then the school nurse will travel in the ambulance with the injured boy.

All PE staff have a first aid qualification:

Mr K Paradise – Sports First Aid

Mr A Ling – First Aid at Work

Mr R Rice – Emergency First Aid (FA approved)

Once the incident has been dealt with the teacher will send the details of the accident to the school nurse by email. The School Nurse will then record the details in the accident report book, create a PI accident report and report to RIDDOR if necessary. The full accident report is then passed onto the H&S manager.

MEDICAL EMERGENCIES

In case of a medical emergency, the member of staff in charge should contact the School Nurse immediately telling her the nature of the emergency, so that she can bring the appropriate equipment and medication. If the emergency is life threatening, the member of staff in charge should call for an ambulance immediately, without waiting for the School Nurse. The member of staff in charge should contact reception, asking that the AED be brought to the scene and another member of staff be called to look after the rest of the class.

Once the School Nurse arrives, she should take over emergency care of the casualty. The member of staff in charge will inform the school office of the situation and ask the office to contact the casualty's parents.

Should the child need to go to hospital via ambulance, the School Nurse should travel with him, unless the child's parents arrive at school in time. The School Nurse will then stay at the hospital with the child until his parents arrive. The School Nurse should take the annual parental contact details and medical consent form with her to the hospital.

A number of staff are trained in using the AED, but training is not necessary, as anyone can use it by following the verbal commands given by the AED. Staff trained in using the AED are detailed below:

Mrs S Blithing – Catering department

Mr R Rice – PE department

Mr P Sheridan – Catering department

Mr L Pettifer – Hockey Coach

Mr L Parry – Sports Coach

Mr K Paradise – Director of Sport

Mr J Nikolovski – Swimming Coach

Mr J Armstrong – Head of Sixth Form

Mr I Parker – Senior Teacher – Co-Curricular

Mr E Collard-Walker – Art department

Mr A Ling – PE department

Mrs M Harper – Careers advisor

Mrs L Herman – School Counsellor

Mr J Pepperman – Deputy Head

CHRONIC MEDICAL CONDITIONS

When the school is notified that a student has a chronic medical condition, the School Nurse will discuss the details with the boys' parents. She will record the condition on iSAMS and also on the medical information page on the R: Drive.

Any medication that the boy needs to take during the school day will be held in the medical centre and the School Nurse will arrange for him to come to the medical centre at the appropriate time each day. The School Nurse will also ask parents to complete a medicine administration form that parents can download from the school website. If medication is for emergency only, it will be held in the locked cupboard in the medical centre until it is needed.

Boys with conditions such as asthma, epilepsy and diabetes should carry their medication with them at all times and a spare set of medication will be held in the medical centre.

The School Nurse will ensure that any regular or emergency medication is included in first aid kits for trips and will explain when and how it should be administered to the trip leader.

The School Nurse will brief all staff about boys with chronic medical conditions at the start of every academic year and remind staff where the information can be located on the R: Drive

R:\Medical\Medical Conditions 2017-2018\Medical Conditions 2017-2018.pptx

The School Nurse will create an IHP for any boys with a chronic condition. IHP's are kept by the school nurse in the medical centre.

PUPILS WITH ALLERGIES

When the school is notified that a student has an allergy, the School Nurse will contact the boys' parents and discuss the details of the allergy. She will record all triggers and medication required on iSAMS and on the R: drive. She will inform the catering department of boys with allergies, and where appropriate, introduce the boy to the chef. The School Nurse will encourage the boys to ask for help at lunch if they are not sure what is safe for them to eat. A list of allergens is clearly visible at point of sale in the servery.

Any boy who is at risk of Anaphylaxis should carry an EpiPen with him at all times. A spare EpiPen is held by the School Nurse in the medical centre. The School Nurse will also maintain a stock of EpiPens for boys who are not able to provide a spare EpiPen.

Staff are informed, by the School Nurse, about boys at risk of anaphylaxis at the start of every academic year and EpiPen training is provided.

Photographic lists are provided by the School Nurse, for display in the catering areas. There are two lists available, one detailing boys at risk of anaphylaxis: and one detailing minor food allergies: Emergency medication is included in first aid kits for trips involving boys at risk of anaphylaxis.

ACTION FOR WHEN A BOY IS UNWELL IN SCHOOL

If a boy becomes unwell in school he should attend the medical centre. The School Nurse will assess him and where appropriate administer medication. Medication can be administered to boys once parents have completed the annual parental contact details and medical consent form. This gives consent for the nurse to administer simple medications such as Paracetamol, Ibuprofen and Antihistamines.

If the boy is not well enough to return to his lessons, the School Nurse will contact his parents and arrange for him to be collected. The boy will remain in the medical centre until he is collected from school.

Should a boy need to be hospitalised, due to a serious health concern, the School Nurse will travel in the ambulance to the hospital and stay with the boy until his parents arrive.

All visits to the medical centre are recorded, by the School Nurse, in the medical centre day book and in the individual pupil diary on iSAMS.

SPILLAGE OF BODY FLUIDS

In any instance of body fluid spillage the member of staff dealing with the incident should contact the estates team who have a body fluid kit to ensure hygienic disposal of the spillage.

MEDICAL RISK ASSESSMENT FOR TRIPS

All trips must first be approved by AJS. Once a trip is approved a list of boys attending the trip will be passed to the School Nurse. The school nurse will create a medical information sheet which gives details of all boys with medical conditions, any medication they need and what to do in case of an emergency.

Should the School Nurse feel that a boys medical condition would be an added risk on the trip, she should discuss this with AJS. Where possible all boys should be allowed to attend all trips, however, with trips that are far from help, certain boys could be at a greater risk. In this instance the School Nurse should speak to AJS and discuss whether the risk to the boy outweighs the value of the trip. Final decision on this should be made by The Head.

Where appropriate a separate risk assessment should be created for any boy with specific medical needs.

LINKS WITH THE SCHOOL COUSELLOR

The School Nurse should work closely with the counsellor and seek assistance for boys needing extra support from the counsellor. If the School Nurse has concerns about a boys' mental health or wellbeing, she should discuss how the counsellor could help the boy and offer to make a referral. Any discussion about boys, between the School Nurse and the counsellor should be confidential unless the boy is at risk of harming himself or being harmed by another person.

LINKS WITH THE DSL

If the School Nurse has any concerns relating to safeguarding, she should discuss them immediately with the DSL or in her absence the DSL deputy. Should neither be available she should contact Harrow Children's Services using the golden number 020 8901 2690.

All discussions with the DSL will be confidential.

REPORTING AND RECORDING OF ACCIDENTS

The School has a duty to report incidents that involve:

- Health & Safety at Work Act 1974.
- Social Security Regulations 1979.
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR). See [Appendix 2](#)

Breach of the statutory requirement to report specific incidents to the Health & Safety Executive (HSE) may lead to prosecution.

PROCEDURES

At John Lyon School, we make every effort to minimise the risk of accidents but we recognise that accidents may still occur.

All accidents to pupils, staff, parents and visitors no matter how small will be reported to the School Nurse as soon as possible after the accident has taken place.

The First Aider present will deal with the accident and treat any injuries as required.

Once the individuals have been treated, all details regarding the accident will be reported to the School Nurse. An investigation into the accident should be undertaken immediately or at least on the same day. Judgements should be made as to what can be done to reduce the risk of similar accidents occurring again.

The Accident Logbook is kept in the Medical Centre. The First Aider should email all details of the incident to the School Nurse, who will complete a PI form. In the case of staff accidents, the staff member will complete a SI form and pass it to the School Nurse, who will complete the accident book and pass the information to the H&S Manager. Records should be stored for three years in a locked cabinet.

The School Nurse will ensure that accidents that are reportable to the Health & Safety Executive are reported using the appropriate Incident Forms.

The maintenance of the First Aid Cabinets/Kits is the responsibility of:

School Nurse

See [Appendix I](#) for contents.

APPENDIX I - CONTENTS OF SCHOOL FIRST AID KITS

Leaflet for First Aid Advice
Assorted Plasters
Sterile Eye Pads
Triangular Bandages
Safety Pins
Medium Wound Dressings
Large Wound Dressings
Pair of Disposable Gloves
Packet of Antiseptic Cleansing Wipes
Eye Wash Vials

Contents of Travel/PE First Aid Kits

Assorted Plasters
Triangular Bandages
Safety Pins
Large Wound Dressings
Pair of Disposable Gloves
Alcohol Wipes
Eye Wash Vials

APPENDIX 2 – RIDDOR FORM

RIDDOR – Incidents to be Reported

- fracture, other than to fingers, thumbs and toes;
- amputation;
- dislocation of the shoulder, hip, knee or spine;
- loss of sight (temporary or permanent);
- chemical or hot metal burn to the eye or any penetrating injury to the eye;
- injury resulting from an electric shock or electrical burn leading to unconsciousness, or requiring resuscitation or admittance to hospital for more than 24 hours;
- any other injury: leading to hypothermia, heat-induced illness or unconsciousness; or requiring resuscitation; or requiring admittance to hospital for more than 24 hours;
- unconsciousness caused by asphyxia or exposure to harmful substance or biological agent;
- acute illness requiring medical treatment, or loss of consciousness arising from absorption of any substance by inhalation, ingestion or through the skin;
- acute illness requiring medical treatment where there is reason to believe that this resulted from exposure to a biological agent or its toxins or infected material.

Reportable over-seven-day injuries

If there is an accident connected with work (including an act of physical violence) and your employee, or a self-employed person working on your premises, suffers an over-three-day injury you must report it to the enforcing authority within ten days.

An over-seven-day injury is one which is not "major" but results in the injured person being away from work OR unable to do their full range of their normal duties for more than seven days. You can notify the enforcing authority by telephoning the Incident Contact Centre on 0845 300 99 23 or completing the appropriate online form (F2508).

Conditions listed below are examples of occupational illnesses which could require absence from work for seven or more days:

- some skin diseases such as occupational dermatitis, skin cancer, chrome ulcer, oil folliculitis/acne;
- lung diseases including: occupational asthma, farmer's lung, pneumoconiosis, asbestosis, mesothelioma;
- infections such as: leptospirosis; hepatitis; tuberculosis; anthrax; legionellosis and tetanus;
- other conditions such as: occupational cancer; certain musculoskeletal disorders; decompression illness and hand-arm vibration syndrome.

Updated January 2017