

# SPRATTON HALL

## **First Aid Policy and Medical Procedures**

September 2022

## SPRATTON HALL FIRST AID POLICY AND MEDICAL PROCEDURES

Title: First Aid Policy and Medical Procedures	Responsible: SJC / Senior Matron
Date implemented: March 2011	Last Review: February 2022
	Next Review: September 2023

**Spratton Hall takes the welfare, health and safety of our pupils very seriously and as such, we aim to administer first aid in a timely and competent manner as detailed in the policy set out below on first aid and medical procedures.**

**There are two qualified nurses / matrons in school - Mrs. D. Hadfield (responsible for running the department) and Mrs. S. Appleby, one of whom is on site at all times during the school day.**

### 1. Medical Room

Extension no. for medical room – **228**

Mrs Hadfield is on duty Monday, Wednesday and Friday from 7.45am – 5.30pm and Tuesday and Thursday from 7.45am – 12.45pm. Mrs Appleby is on duty Tuesday and Thursday from 12.30pm – 5.30pm and Saturday home matches. If Matron is not in her room she will have indicated on the medical room door where she is. Matron will also be contactable **on her mobile 07774 556382.**

Most first aid treatment will be carried out in the medical room. This room is unlocked throughout the day when Matron is in attendance. If Matron is absent, the room can be accessed by members of staff via a coded lock (15), to pick up First Aid bags, EpiPens and Inhalers. The room is well equipped including first aid equipment, medicines and materials, a fridge for the storage of medicines and ice/cold packs. A small selection of clean clothes (boys and girls) is also available.

Children who have an accident or who are unwell should be sent to the medical room accompanied by another child, unless the member of staff feels it is more appropriate for them to take the child. Children should not be sent on their own. This will ensure that there is someone to take a message back to the teacher if needed.

Any minor injuries dealt with in the classroom should be recorded on the same day in the Accident and Incident book kept in the medical room.

The school has members of staff with full 'First Aid at Work' and 'Paediatric First Aid' certificates and others who have undergone training in 'Emergency Aid for Appointed Persons'.

A list of staff and their qualifications is provided in Appendix 1.

Spratton Hall Accident Procedure is provided in Appendix 2.

## 2. First Aid Boxes

First Aid boxes are provided in each building. They are available for use by anyone in an emergency.

The contents comply with current Health and Safety recommendations and will be checked each term.

Any use of the kit should be recorded in the Accident and Incident Book (kept in the medical room) and the items replaced.

## 3. Recording and Reporting

**ALL ACCIDENTS AND/OR TREATMENTS, HOWEVER MINOR, SHOULD BE RECORDED.**

There is a grey folder to report all Accidents and Incidents; this is kept in the Medical room. Also all medical bags have a First Aid for Schools Accident book. Anyone can make an entry in these books – it does not have to be a first aider.

Matron will transfer all information to the school's computerised database (Engage). The information will be recorded as confidential to the relevant staff as needed.

Matron records all visits of pupils/staff to the medical room following accidents and incidents and for medicines administered. These are recorded on the form in the grey folder in the medical room, also on the school's computerised database (Engage).

There are also additional forms that may need to be completed – (all the following are kept in the Medical Room). These include;

- a) Notes to parents – Medical Department Notification/Treatment Sheet
- b) Accident and Injury Report – this form is used for significant occurrences – physical, emotional etc. a copy of which is sent to the Head Master and entered into the pupils file. This will also be recorded on Engage.
- c) Concussion Report, care plan, information leaflet, treatment sheet to accompany parents in the event of a head injury

### HSE Accident Report Book – Reporting Accidents for 'RIDDOR'

Entries are to be made into this book for the recording of accidents and injuries which involve adults i.e. staff, parents or visitors on the school premises. There is one copy of this book in the main office and one in Mr Will Fowler's office in the catering department.

When you are injured at work, the law states that you must tell your employer as soon as you can. You can do this by detailing your accident in this book or by asking someone else to do so on your behalf.

This book satisfies the regulations regarding the keeping of records of accidents to people at work:

- RIDDOR '95 (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995)
- Social Security Administration Act 1992

The Health and Safety Officer (Mrs Clare Cull) is responsible for the completion of RIDDOR forms and for reporting to the Health and Safety Executive.

#### **4. Hygiene**

Wear disposable gloves to protect yourself. These can be found in all First Aid Boxes and are available from the Medical Room.

Care should be taken when dealing with any incidents especially, involving blood or vomit, to prevent cross infection to other children or staff and to protect oneself. Use caution when moving the child to avoid any unnecessary spreading of the hazard – try to contain it in one place. Isolate areas until they can be properly cleaned.

There is a container of 'Emergency Spillage Compound' which can be sprinkled over any indoor or outdoor 'accidents'. This is kept in the medical room and Dining room (Bio Hazard box).

Make sure caretaking or cleaning staff are informed of the hazard.

It is good practice for everyone to cover cuts and wounds if they are bleeding.

#### **5. Serious Incidents and Referrals**

In the unlikely event of a serious incident, it may be necessary to deal with a child 'in-situ' rather than risking transfer to the medical room. For clarity, serious injuries may include, suspected fractures, severe bleeding or changes in levels of consciousness.

Should a child remain distressed or need medical attention/hospital treatment, parents will be contacted by telephone to collect their child from school. Only in serious emergencies will children be accompanied to hospital.

In an emergency situation an ambulance should be called for by the Medical Room staff or the Reception staff who will state clearly, for example – 'child with severe allergic reaction, paramedic needed'.

## **6. Head/Facial Injuries**

It is important that bumps to the head and face are checked thoroughly. The injury may not have seemed particularly severe at the time but symptoms can be delayed. The brain can be affected by a blow anywhere on the head not only that covered by hair.

It is important that detailed information is documented so it can be passed on so the child can be monitored. 'Head bump' notes and staff emails will be sent after checking/treatment in the medical room and should be read by teachers on return to the classroom. Matron will notify parents.

A child showing any signs of head injury – i.e. confusion, impaired vision, dizziness, vomiting, changes in consciousness, will not be returned to the classroom but kept under observation in the medical room until the parent/guardians arrive.

## **7. Lunchtimes**

Children hurt or feeling ill at lunchtime will be sent to the medical room by the lunchtime supervisors. The injured/ill child must be accompanied by another child or if a more serious incident has occurred, by a member of staff.

All accidents involving a bump to any part of the head (incl. face, eyes or nose) should be sent for checking and recording.

## **8. The Pre-Prep Department**

Minor injuries to the Pre-prep children are dealt with by the staff in that department but head bumps and more serious injuries and illnesses should be dealt with by Matron in the medical room.

A first aid box, for minor injuries, is kept in the Middle Area of the main Pre-Prep building, Year 1 building and Room 22.

## **9. Sports Injuries**

Sports injuries will be assessed by PE/Sports Staff and may be treated on the spot before sending to the medical room.

A first aid kit will be taken to all away games/matches and be available on the field and Astro turf during lessons.

Any treatments given must be recorded in the Accident and Incident book. Reported to Matron who will record all details on the school's computerised database (Engage).

## **CONCUSSION**

The health of our pupils is of the utmost importance. Spratton Hall is committed to providing a healthy and safe environment using the latest information and guidance available. A very big topic at the moment is the diagnosis and management of concussion in sport. Spratton Hall has decided to take a very firm and clear stance on any suspected concussion during sports activities.

### **Suspected concussions**

Any child suspected of having a concussion during sports activities will be removed from play and taken for Head Injury Assessment (HIA). The child will NOT be allowed to return to play on the same day under any circumstances. Matron will conduct an assessment and then decide upon the next course of action, which will include a doctor referral or a visit to A&E.

### **The first 24 – 72 hours**

It is important that the child is monitored closely over the 24-72 hours post the suspected concussion as this is the most likely time for problems to arise. The child should not be left alone and must go to hospital if they develop any of the following;

- A new headache or a worsening of an existing headache
- persistence of increasing neck pain
- becomes drowsy or cannot be woken up
- cannot recognise people or places
- has nausea or vomiting
- behaves unusually, seems confused or is irritable
- has seizures (leg or arms jerk uncontrollably)
- has weakness, tingling or numbness in limbs
- is unsteady walking or standing
- has slurred speech
- has difficulty understanding speech or directions

Remember, it is better to be safe and always consult your doctor after a suspected concussion.

Other important points to consider;

- The child should rest fully for the first 24 hours
- The child should avoid computer, internet or electronic games
- The child should not be given any medications unless prescribed by a medical practitioner

### **Return to school**

Concussion may impact the child's cognitive ability to learn. This must be considered in assessing a child return to school. Extended absence is uncommon but it is expected that one to two days absence/rest will be required.

The child should not return to school until they have been medically cleared. The child will NOT be allowed to recommence sports activities until he/she has successfully returned to school with no adverse effects. When returning children to play, they must be medically cleared and then follow a stepwise programme with stages of progression through to normal participation. (2 weeks rest and symptom free followed by a gradual return to play over 7 days). This programme will be designed in consultation with parents, coaching staff, the child's GP and Matron.

Should you need any further information, please contact Matron.

### **Return to play after concussion**

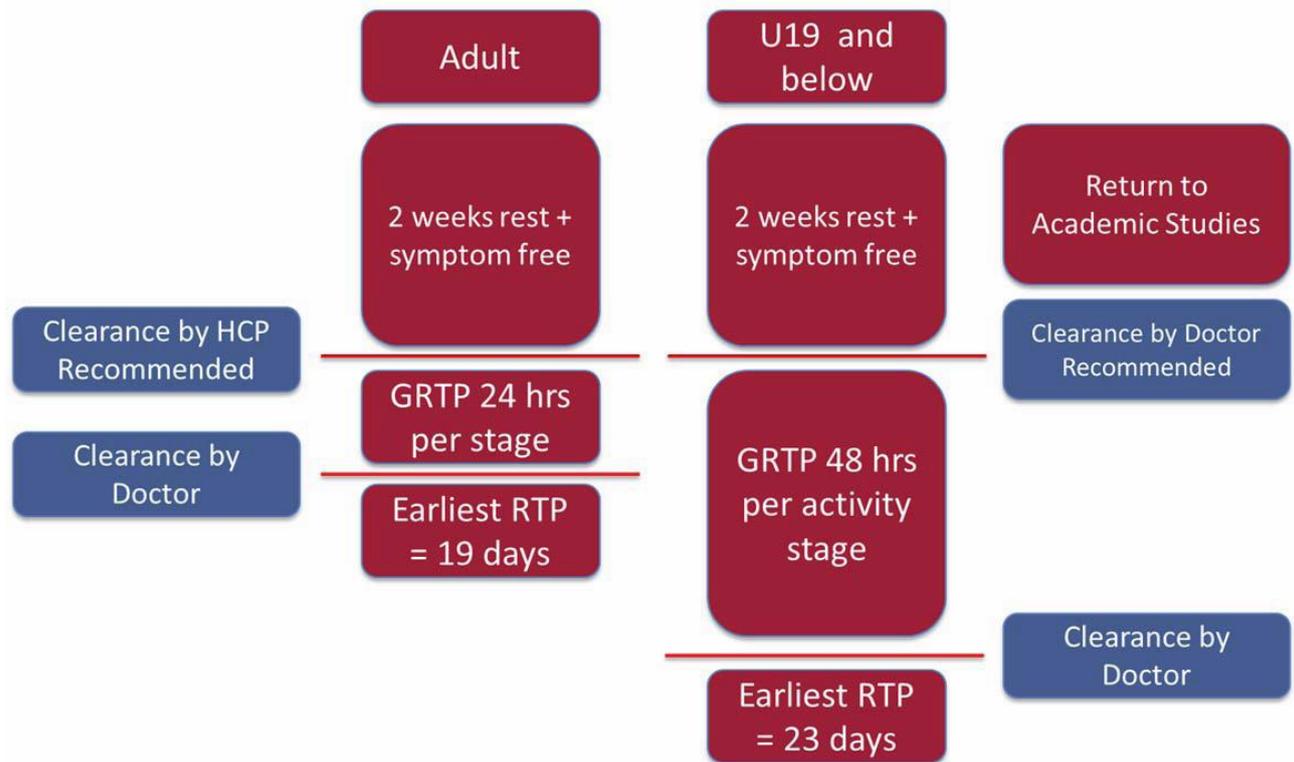
Concussion must be taken extremely seriously to safeguard the short and long term health and welfare of players, and especially young players.

The majority (80-90%) of concussions resolve in a short (7-10 days) period. This may be longer in children and adolescents and a more conservative approach should be taken with them. During this recovery time however, the brain is more vulnerable to further injury, and if a player returns too early, before they have fully recovered this may result in:

- Prolonged concussion symptoms
- Possible long term health consequences e.g. psychological and/or brain degenerative disorders
- Further concussive event being FATAL, due to severe brain swelling – known as second impact syndrome.

### **What should players do to return to play (RTP)?**

The routine return to play pathway is shown in the diagram below:



A player's age is deemed to be their age as at 1st September.

## 10. Illness

If a child becomes unwell during the day they will be sent to the medical room.

Attempts will always be made to send a child home if they have: a raised temperature; severe pain; vomiting; diarrhoea or are known to be unwell before school.

Sometimes for minor pain or headaches a suitable pain relief medicine will be given with parental consent. Parental consent is obtained from the Medical Information form which is filled in on admission to the school. A completed Medical Department Notification Treatment sheet is sent home with the child.

## 11. Medicines

The school will try to co-operate with parents in the giving of medicines during the school day where it is necessary. Guidelines on this subject are contained in the information booklet given to parents. This facility is intended mainly to help where a child needs to complete a course of medication (i.e. antibiotics) or where treatment for ongoing conditions are needed.

Medicines should be collected at the end of the day and parents will receive a completed Medical Department Notification Treatment form stating the date, time and dosage.

## **12. Severe Allergies and Illnesses**

There are several children at Spratton Hall with severe allergies.

For some children contact with the allergen can be life threatening and where this is known to be likely an automatic injection pen 'EpiPen' containing adrenalin will be prescribed. These injection pens are kept in the medical room. The cupboard is labelled 'EPIPENS' and each container is clearly marked with the child's name and photograph. This cupboard is NEVER locked.

Photographs of these children are pinned on the notice board in the Staff Room in the main building.

The school may have to deal with children diagnosed with Epilepsy, Diabetes or Cystic Fibrosis. Each child will have its own procedure details of which will be kept in the Medical Room. Photographs of these children will be pinned on the notice boards in the Staff Room in the main school.

## **13. Inhalers**

Pupils should have access to their inhalers at all times. The child's medication should always be freely available and never locked away in a cupboard. Each pupil's inhaler is clearly marked with the child's name.

Pre-prep children will be carefully supervised in the taking of their asthma medication. As children progress through the school they will be encouraged to become more independent in the management of their asthma, both in terms of self-administration of medication and recognition of their need for the reliever.

A copy of the register of children in school that have been diagnosed with asthma or prescribed a reliever inhaler is kept in the cupboard with the prescribed inhalers and the emergency inhaler.

A completed 'Medical Department Notification Treatment Sheet' is sent home with the child informing parents that their child has used their own inhaler or used the emergency inhaler whilst at school.

For details of signs and symptoms of an asthma attack and what to do in the event of an asthma attack please see Appendix 2.

## **14. Health Information Forms**

Health Information Forms are sent out on admission to the school. Parents are asked to inform Matron of any changes to medical information. These forms ask for details of known medical conditions. The parents sign consent at the end of the form for their child to receive emergency treatment in their absence. These forms must go with the child to casualty, doctors etc., if anyone but their own parent takes them.

A Data Review Sheet is sent annually to parents, so that any changes can be made accordingly.

Details are extracted from these forms and written onto The Medical Register supplied to each member of staff on a 'STRICTLY PRIVATE & CONFIDENTIAL' basis.

The forms for the whole school are kept in the medical room.

## **15. First Aid on Trips**

When travelling on school trips/visits 'trip buckets' are taken which contain vomit bags, gloves, wet wipes, paper towels and a first aid kit.

Travel first aid pouches and first aid bags are also available. The size and contents should be appropriate for the activities to be undertaken. Any injuries treated should be written in the Accident and Incident Book which is kept in the First Aid bag. All injuries/incidents should be reported to Matron on return to school.

Matron will prepare items for trips.

## **Swine Flu**

### **Background and Symptoms**

Swine influenza is a respiratory disease that has some elements of a virus found in pigs. The current swine flu incubation period ranges 1-7 days (more likely 1-4 days). Swine flu presents two or more of the following symptoms; fever, runny nose, cough, sore throat, limb or joint pain, headache, vomiting or diarrhoea.

### **Prevention & Precaution**

It is clearly incumbent on Spratton Hall to minimise the chances of spreading Swine Flu within the school and its local environment. Prevention is the single most effective way to slow the spread of diseases such as swine flu. Accordingly the following instructions have been issues to all staff and pupils;

- Ensure everyone washes their hands regularly with soap and water
- Clean surfaces regularly to get rid of germs
- Use tissues to cover your mouth and nose when you cough or sneeze
- Place used tissues in a bin as soon as possible

### **Outbreak**

At all times the School will be guided by information issued by the Government Chief Medical Officer. The current general advice to schools is that they should seek to continue operating as normally as possible during a pandemic outbreak. Should closure be subsequently advised,

the Governors and Headmaster will ultimately be responsible for deciding when to close the School if the need arises.

### **Further Information**

Further information regarding Swine Flu can be found via the following links;

- Department for Children, Schools & Families - [www.dcsf.gov.uk](http://www.dcsf.gov.uk)
- National Health Service - [www.nhs.uk](http://www.nhs.uk)

## Appendix 1

### Members of Spratton Hall Staff with First Aid Training

#### First Aid

Mr Gareth Barnard	-	Head of Boys' Games
Miss Sarah Blason	-	Head of Girls' Games
Mrs K Gardham	-	Assistant Head of Catering
Mrs Kate Garner	-	FDT, Games, PE
Mr Drew Harte	-	Estate Manager
Mr Lee Ellington	-	Estate Team
Mr James White	-	Head of FDT, Head of Year 5, Computing, Games, PE
Mrs Cath Williams	-	Head of PSHCE, Year 8 Tutor, RS, PE, Games
Mrs F Woodman	-	Office Manager
Mrs Sally Alexander	-	Librarian, Games

#### **Paediatric**

Holly Alexander	-	Pre-Prep Teaching Support
Kathryn Anscorb	-	Pre-Prep Teacher, Year 2
Georgie Dixon	-	Pre-Prep Teaching Support
Debs Hadfield	-	Head Matron
Caroline Humphries	-	Pre-Prep Teaching Support
Yvette Pearce	-	Pre-Prep – Teaching Support
Fiona Sanchez	-	Head of Pre-Prep
Liz Waller	-	Pre-Prep Teaching Support

## **Appendix 2**

### **Spratton Hall Accident Procedure**

#### **Playground**

If an accident occurs on the playground, please follow the procedure below:

- Make sure the area is safe, onlookers are controlled and the casualty remains calm.
- Identify the seriousness of the injury.
- Minor injuries, cuts, grazes etc. escort to Matron.
- If unable to move due to suspected broken bones, spinal injury, dislocation, loss of consciousness or shock do not try and move the casualty.
- Send for help i.e. Matron. Mobile 07774 556382.
- School Office to telephone for an ambulance (if required).
- School Office to telephone parents and Headmaster giving clear details of the incident.
- Matron or first aider will stay with the casualty until help arrives.

### **Spratton Hall Accident Procedure**

#### **Classroom**

Illness and Injury

If an incident occurs in the classroom, please follow the procedure below:

- Identify the seriousness of the illness or injury.
- Minor injuries, cuts, grazes, headaches and stomach upsets etc. escort to Matron.
- If unable to move due to fall (suspected broken bone), do not move. Send for help i.e. Matron.
- School Office to telephone for an ambulance (if required).
- School Office to telephone parents giving clear details of the incident.
- Make sure pupils in the classroom are controlled or removed.
- Matron or the first aider will stay with the casualty until help arrives.
- School Office to inform Head Master or Deputy Head Master

### **Spratton Hall Sports Injuries Accident Procedure**

If an accident occurs on the sports fields, please follow the procedure below:

- Make sure the area is safe, onlookers are controlled and the casualty remains calm
- Identify the seriousness of the injury.
- Minor injuries, cuts, grazes etc. escort to Matron or treat the injury with first aid supplies at hand.
- Identify whether child needs to use his/her Inhaler.

- If unable to move due to suspected broken bones, spinal injury, dislocation, loss of consciousness or shock do not try to move the casualty from the field. Call for an ambulance giving clear details of the injury.
- Send for help i.e. Matron.
- Telephone the parents giving details of the accident.
- Cover with a blanket or coat and stay with the casualty keeping them calm until help arrives.
- Be ready to resuscitate. 30 chest compressions to 2 breaths until the ambulance arrives. Defibrillator to be used if no signs of breathing or pulse. The school defibrillator is kept in the Medical Room (Code 15).
- DO NOT give anything to eat or drink

### **Spratton Hall Accident Procedure** **Science Laboratories / Classroom**

#### Illness and injury

If an incident occurs in the classroom, please follow the procedure below:

- Identify the seriousness of the illness or injury.
- If it is a chemical based injury or burn, then immediate action must be taken by the member of staff following the immediate remedial measures seen on the attached sheet.
- Minor injuries, cuts, grazes, headaches and stomach upsets etc. escort to Matron.
- If unable to move due to fall (suspected broken bone), do not move. Send for help i.e. Matron.
- School Office to telephone for an ambulance (if required).
- School Office to telephone parents giving clear details of the incident.
- Make sure pupils in the classroom are controlled or removed.
- Matron or the first aider will stay with the casualty until help arrives.

### **How To Recognise An Asthma Attack**

The signs of an Asthma attack are:

- Persistent cough (when at rest)
- A wheezing sound coming from the chest (when at rest)
- Difficulty breathing (the child could be breathing fast and with effort, using all accessory muscles in the upper body)
- Nasal flaring
- Unable to talk or complete sentences. Some children will go very quiet.
- May try to tell you that their chest 'feels tight' (younger children may express this as tummy ache)

## **CALL AN AMBULANCE IMMEDIATELY AND COMMENCE THE ASTHMA ATTACK PROCEDURE WITHOUT DELAY IF THE CHILD**

- Appears exhausted
- Has a blue/white tinge around lips
- Is going blue
- Has collapsed

### **What to Do In The Event Of An Asthma Attack**

- Keep calm and reassure the child
- Encourage the child to sit up and slightly forward
- Use the child's own inhaler – if not available, use the emergency inhaler
- Remain with the child while the inhaler and spacer are brought to them
- Immediately help the child to take two puffs of salbutamol via the spacer
- If there is no immediate improvement, continue to give two puffs at a time every two minutes, up to a maximum of 10 puffs
- Stay calm and reassure the child. Stay with the child until they feel better. The child can return to school activities when they feel better
- If the child does not feel better or you are worried at ANYTIME before you have reached 10 puffs, CALL 999 FOR AN AMBULANCE
- If an ambulance does not arrive in 10 minutes give another 10 puffs in the same way

## **SPRATTON HALL MEDICATION POLICY**

The health and safety of Spratton Hall pupils is paramount. This document concerns the administration of medication to pupils at Spratton Hall.

### **Prescribed medication**

In line with Government guidelines, the following points should be noted;

- Prescribed medication will be administered by School Matron if the pupil's parent or guardian has completed a signed Medication Form or a signed Annual Care Plan Form (for pupils that require prescribed drugs over a sustained period of time)
- In certain circumstances, School Matron will not be available to administer such medication (for example, school trips, away sports fixtures, etc). In these cases, a staff member will be informed of the requirement by the School Matron and allowed to administer the medication subject to parental/guardian agreement to such an arrangement in the signed Medication Form.

## **Non-prescribed medication**

Dependent upon the individual child's parental consent via the Medical Information Form, non-prescribed medication will be administered by School Matron only. Such medicines include;

- Calpol for pupils up to 12 years old and Paracetamol - pupils 12+ years old (headaches, earaches, fever, etc.)
- Milk of Magnesia (stomach upsets)
- Arnica Cream (light bruising)
- Throat lozenges (sore throat)

All EpiPens, Jext pens epilepsy drugs and Asthma inhalers will be kept in the Medical Room and be accompanied by the parent/guardian and GP guidelines on usage.

All medicines will be kept in the Medical Room and can only be administered by school Matrons.

## **ACCIDENT/NEAR MISS REPORTS**

### **Accident Reporting for Pupils**

All accidents / treatment / incidents involving pupils and/or staff are recorded in the Medical Room. This is done to confirm the action which has been taken and to identify and document all the relevant details which are necessary for reporting and investigating purposes. The information that is documented can be used to inform parents of the action that has been taken by the school in response to an accident that involved their child. All such documents are held for at least 5 years.

Every first aid box also contains its own record book which needs to be filled in to record what has been used in order to help with the replenishment. It also reminds the member of staff who has administered first aid to fill in the **accident book** in the Office / Medical Room / Kitchen if the incident was sufficiently serious.

### **Accident Book and Near Miss File**

In accordance with the *Social Security Act 1975* accident books are kept at the school. These have been put together with a near miss incident file in the following locations:

- School Office
- Science Block
- Design and Technology Room
- Maintenance Hut
- Medical Room

Both of these documents can be used for accidents and near misses that occur to employees, visitors and pupils at the school. Every reported incident needs investigating to prevent its repetition.

In addition, and in accordance with the *Reporting of Injuries, Disease and Dangerous occurrences Regulations 1995* the Health & Safety Executive must be informed of a reportable incident that happens to an employee immediately by telephone on 01528 444265 followed by an F2805 form within 7 days of the incident. Reportable incidents are defined as any injury resulting in death or hospital treatment for any length of time. Major injuries include fractures (other than to hands and feet), unconsciousness resulting from electric shock or lack of oxygen and acute illness caused by a pathogen, a substance or infected material. Conditions which require medical treatment, or cause incapacity for work for more than 3 working days, must also be notified on form F2805 within 10 days of the incident. The term incapacity for work includes those who are at work, but unable to carry out normal duties. If an employee dies within 1 year of a reportable incident the employer must notify the Health & Safety Executive. Copies of F2805 form must be held for 3 years.