First Aid Policy
Accident & Emergency Procedure

Aims
We aim to use first aid in response to accidents and injuries which have occurred to pupils, staff and visitors to the site. This policy applies to all children within the school including EYFS.

The school has referred to the DfE Guidance on First Aid in the preparation of this policy.

Personnel
All staff are responsible for dealing with minor incidents.

During lesson time the School Secretary, catering assistant and/or a qualified first-aider will administer first aid. If an accident occurs off-site and first aid is required, then a first aid trained member of staff responsible for the group will administer first aid.

Recording of Accidents

☐ Any accident that occurs is recorded on an Accident Form or reported directly to the School Secretary. An email is sent to parents detailing action taken for more serious accidents or when an injury is sustained.
☐ In the case of a serious accident and for all injuries to the head, an Accident Report Form must be completed by the School Secretary. Parents will be informed of any accidents requiring this form to be completed.
☐ Accidents occurring at off-site venues should also be recorded. First aid provision at such venues should always be identified but first aid kits are always taken on school trips. On returning to school, the School Secretary must be informed of any accidents that took place.
☐ At the end of each term a summary of the serious accidents is completed and submitted to the Health and Safety Committee.
☐ For any serious accidents requiring hospital treatment, the Confidential Accident & Injury Report form must be completed by the School Secretary and a copy sent to The Head of Support Services, KCS.
☐ Any accident that requires a RIDDOR report will be completed correctly and in the required time and reported to The Head of Support Services at KCS. Copies of all reported accidents will be kept in the School Office.

First Aiders
The vast majority of teachers are first aid trained (see attached list of First Aiders). There is a rolling programme of training for first aid. Training of all staff is updated every three years. As many staff as possible will achieve paediatric first aid training, in particular EYFS staff. There is a paediatric trained first aider on the school site at all times and the welfare
requirements of the EYFS framework mean that a qualified paediatric first aider will accompany all EYFS off-site visits.

One member of staff with first aid training must be on site until all children have left.

**First Aid Boxes**

First Aid boxes are situated:

1) On the exterior wall, outside the hall;
2) On the sports shed, adjacent to the tennis court;
3) In the library;
4) In the school office.

First Aid bags are available:

1) In every classroom
2) In the Medical Room
3) Taken out on playtime and lunchtime duties
4) Taken out to PE/games lessons

A First Aid box is to be taken on all school trips and to all games sessions, including matches.

**First Aid Supplies**

The School Secretary is responsible for checking the contents of the first aid boxes on a regular basis and for placing orders to replenish stock. All staff are responsible for notifying the School Secretary if the supplies in any of the first aid boxes are running low. First aid boxes must not contain any soiled goods.

**Hygiene**

To prevent the spread of infection, staff will ensure that the following good practices are observed:

Any spills of blood or vomit will be wiped up and disposed of using the biohazard kits provided. Excrement will be flushed down the toilet. Disposable gloves are always used when cleaning up spills of body fluids. Floors and other affected surfaces are cleaned as necessary using manufacturer’s instructions. All cleaning materials have been COSHH assessed and are kept out of reach of the children.

The teaching assistant from each class / catering assistant is responsible for cleaning up after a child has been ill, ensuring that hygiene procedures are followed.

When treating any accident, protective clothing and gloves must be worn.

**Sickness**

If the child has any of the following s/he must be sent home:

- □ High temperature;
- □ Sickness or diarrhoea – children must remain at home for 48 hours after illness;
- □ Unexplained rash;
- □ Untreated conjunctivitis;
- □ Any infectious condition.
If a child needs to go home, permission and confirmation must first be obtained from the Head Teacher or Deputy Head Teacher. The parent / carer will be contacted and asked to come and collect them. Whilst the child waits for his/her parent/carer to arrive s/he will wait in the School Office.

If a child has been diagnosed with an infectious disease, parents/carers should follow doctor’s instructions with regard to his/her return to school. The school should be informed in order that other children can be monitored for similar symptoms.

The procedures for responding to children who are ill or infectious are outlined for parents/carers in the Parent Handbook.

**Administering medication**

Should a child need to be given medicine during the school day parents are required to fill in and sign a Medication Form in the school office. The School Secretary will ensure that the dosage is clearly marked on the medication and that the Catering Assistant gives the medication as prescribed to the child. The School may ask for a copy of the doctor’s prescription if the label is unclear. Without this consent and correct labeling, the school is unable to administer medicine. After the dose has been given by the Catering Assistant, a form to indicate the dosage and time of medication administered will be attached to the medication. Medication that is brought into school for a specific illness is kept in the Medical Fridge in the kitchen.

Any long term medication (such as inhalers), used to treat a long term illnesses are kept in the locked Medical Cupboards. Emergency medication (such as Epipens) will be kept in the unlocked Medical Cupboards.

There are Medical Cupboards:-
1. In the Medical Room
2. Upstairs on the landing
3. In the Kindergarten classroom
(More locations will be added if and when the need arises)

For medicines such as Calpol i.e. non-prescribed medication, the school will only give one dose per day for a maximum of two consecutive days per 10 school day period and only with the prior daily written consent from the parents/carers.

**Pupils with particular medical conditions**

Pupils who have particular medical conditions (ie asthma, epilepsy, diabetes etc) have all information pertaining to their condition held on a medical form in their personal files. This will cover medication required in school as and when appropriate including information if appropriate for ambulance crew to attend the child in an emergency.

**Accidents and Incidents**

The reporting of accidents and incidents falls into the following categories:

- Minor accidents
- Major accidents
- Accidents reportable to RIDDOR
If the accident is more than a minor one, for a child or adult, it is reported immediately to the Head or Deputy Head who, if needed, sends for an ambulance and contacts the parents in the case of a child and emergency contact for an adult. Should the Head or Deputy be unavailable, then the teacher/School Secretary will call for the ambulance.

1. **Minor Accidents**

**Minor Accidents to a child**

If a minor accident occurs the procedure is as follows:

- The child is either dealt with outside or taken to the medical room;
- The injury is assessed;
- The member of staff treats the injury;
- The child is resettled in to their classroom or sent outside and observed;
- The accident form is completed.
- If there is any concern about the first aid which should be administered, then the parents are called.

If a child is sent home for any reason this must be recorded on the Accident Report Form and the time of leaving recorded on the register.

**Reporting Minor Injuries to Parents**

Communicating with parents regarding minor injuries is done as follows:

- Via an email from School Base and a form which is kept in the Accident Report File.

**Parents must be informed, by email and/or phone, of any injury that their child receives to his/her head.** The School Secretary will contact the parent/carer concerned. If the head injury is severe, parents will be asked collect their child to seek medical advice.

**Minor Accidents to Adults**

Minor accidents will follow the same procedures as outlined above for a child.

2. **Major Accidents**

**Major Accidents to a Child**

If a major accident occurs the procedure is as follows:

- The Head must be contacted immediately, or the Deputy Head in her absence;
- The Head/ Deputy Head will assess the situation and decide whether the child needs immediate hospital attention or whether the child can wait for the parent to arrive; if it is clear that an ambulance needs to be called immediately then the member of staff should do so;
- If the child needs to go straight to hospital an ambulance will be called. The parent/carer will be called and arrangements will be made to meet the parent/carer at the hospital/school. The Head/Deputy or the child’s class teacher will accompany the child to hospital and stay with them until the parent/carer arrives;
- If the child can wait for the parent/carer to arrive then the child will be made as comfortable as possible. A member of staff must be with the child at all times until the parent/carer arrives;
- It will then be the parent/carer’s decision whether or not to take the child to hospital;
☐ As soon as possible after the accident all internal accident forms (Accident Report Form, Observation Chart) will be completed by the School Secretary as well as the Confidential Accident & Injury Report form. Copies will accompany the child to hospital and will also be sent to The Head of Support Services at KCS.

The nearest hospitals are:
KINGSTON HOSPITAL (nearest hospital with A&E facilities)
ROEHAMPTON HOSPITAL (minor injury unit only)

Dial 999/112 if immediate assistance is needed for a serious accident or incident

Major Accidents to Adults

☐ The Head/Deputy will assess the situation and decide whether the adult needs immediate hospital attention or whether the situation can be dealt with by the adult concerned;
☐ If the adult needs to go straight to hospital an ambulance will be called or he/she will be sent by taxi with another member of staff;
☐ The adult emergency contact or a person of their choosing will be telephoned and if possible arrangements made for them to meet the adult at the hospital;
☐ An Employee Accident Report Form / Observation Chart will be completed and a copy given to the adult concerned;
☐ The Head will inform KCS using the Confidential Accident & Injury Report form.

3. Accidents reportable to RIDDOR

Certain accidents arising out of or in connection with work are reportable to the Health and Safety Executive (HSE). We would seek advice from Amanda Trail and the the Head of Support Services at King’s College School, before any accident is reported to the HSE and all reports would be sent through KCS.

The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR) places a legal duty on employers to notify and report some work related accidents, diseases and dangerous occurrences to the relevant enforcing authority for their work activity. Should an accident be reportable to RIDDOR this can be done via the RIDDOR Incident Contact Centre (ICC). Before this stage, the Head of Support Services at King’s College School will have been contacted for advice.

Pupil Accidents

Fatal and major injuries to pupils on school premises during school hours must be reported immediately to the Head of Support Services at KCS. All such accidents, fatal or major, will also be reported to LSCB and the School will act upon any advice given. However, injuries during play activities in playgrounds arising from collision, slips and falls and sporting injuries are not reportable unless they are attributable to:

☐ The conditions of the premises (e.g. potholes, ice, damaged or worn steps etc);
☐ Plant or equipment on the school premises;
☐ The lack of proper supervision.

Fatal and major injuries to pupils occurring on school sponsored or controlled activities off the school site (such as field trips, sporting events or holidays in the UK) must be reported if the accident arises out of or in connection with those activities.
Employee Accidents

Any accidents to an employee resulting in a fatal or major injury must be reported immediately to the Head Master of KCS, the Head of Support Services at KCS and Headmaster of KCJS. If the accident does not result in a fatal or major injury, but the employee is incapacitated and unable to work for more than three days (excluding the day of the accident) there is still a requirement to contact the HSE.

The Head or School Secretary, in her absence, will report any accidents that are reportable to the HSE via KCS.

Before any report to the HSE is made, the Head of Support Services at KCS must be contacted for advice.

Allergies/ Chronic Illnesses

A record is kept on the child’s file of any allergy to any form of medication (if notified by the parent) such as penicillin or a dietary allergy or food intolerances. All staff are made aware of these needs. Any chronic illness, such as diabetes, or any illness, such as asthma, or any child whose health might give cause for concern are also recorded.

First Aiders

Paediatric First Aiders
Lauren Gray      Kate Ross
Lizzie Spratt    Sarah Cox
Charlotte Dale   Jessica Peto
Deborah Gordon-Brown Anna Tooms
Kerryn Lynch     Kieran Forbes
Jane Jones       Paulette Kearns
Kayleigh Gilmour Nicola Ashdown

First Aid Kits

The suggested minimum contents of the First Aid boxes from the HSE Publication Approved Code of Practice The Health and Safety (First Aid) Regulations 1981 First Aid at Work are:

☐ A leaflet giving general guidance on First Aid
☐ Plasters individually wrapped, assorted sizes. Blue waterproof for food handlers.
☐ Sterile eye pad
☐ Triangular bandage
☐ Sterile dressings
☐ Disposable gloves
☐ Ice pack
☐ Moist wipes alcohol free

This policy will be reviewed annually
Policy written: April 2011 by SW/MD
Policy reviewed: September 2016 by JH/JEJ
Next review: September 2017 by JH/JEJ