



## **FIRST AID AND ACCIDENT REPORTING PROCEDURES**

It is the policy of Jubilee School that there should be adequate and appropriate equipment, facilities and trained personnel to provide first aid within the school. First aid provision is available at all times while people are on the school premises, and also off the premises whilst on school visits. The school provides suitably stocked first aid containers, in the office, key areas of the school and in the medical room. Before undertaking any off-site activities first aid provision is considered and first aid kits are kept in the school cars. All first aid containers are marked with a white cross on a green background. The arrangements for first aid for sports, outdoor pursuits and field trips are the responsibility of the Party Leader. A First Aid Box is available and should be taken on all visits. Emergency contact numbers, and consent for medical treatment are obtained for all students.

### **School First Aiders**

Appointed persons have emergency first aid training. The Head teacher carries the responsibility for informing the school community of the first aid arrangements. Details of who first aid personnel are, and where they are to be found are displayed prominently. Staff and students are made aware of this information. Staff take precautions to avoid infections and follow basic hygiene procedures. They have access to single-use disposable gloves and hand washing facilities, and take great care when dealing with blood or body fluids and disposing of dressings or equipment. Jubilee School has a procedure which records all accidents, and provides for the reporting of fatal or serious accidents, injuries etc. to the Health and Safety Executive and Acorn Education and Care. All accidents are to be reported to the Health and Safety Representative as soon as possible. First aid arrangements are the subject of regular and systematic checks.

### **Reporting**

The school records accidents and any first aid treatment given on-site and retains these records for inspection. Near Misses” must also be reported using the info-exchange system and completed for any accident or injury occurring at school or on a school trip. This includes any accident involving staff or visitors. The form must be submitted on the day of the incident and will be monitored by the appointed person as certain injuries require reporting (RIDDOR requirements) By law any of the following accidents or injuries to students, staff, visitors, members of the public or other people not at work requires notification to be sent to the Health and Safety executive by phone, fax, email, or letter. Major injuries from schedule 1 of the regulations:

- Any fracture, other than to the fingers, thumbs or toes.
- Any amputation.
- Dislocation of the shoulder, hip, knee or spine.
- Loss of sight (whether temporary or permanent)
- A chemical or hot metal burn to the eye or any penetrating injury to the eye
- Any injury resulting from an electric shock or electrical burn (including any electrical burn caused by arcing or arcing products, 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 to unconsciousness requiring resuscitation or admittance to hospital for more than 24 hours
- Any other injury lasting over 3 days
- Loss of consciousness caused by asphyxia or by exposure to a harmful substance or biological agent. Either of the following conditions which result from the absorption of any substance by inhalation, ingestion or through the skin:
  - Acute illness requiring medical treatment; or loss of consciousness



- Acute illness which requires medical treatment where there is reason to believe that this resulted from exposure to a biological agent or its toxins or infected material.
- Death
- A specified dangerous occurrence, where something happened which did not result in an injury, but could have done.

A report as to what remedial measures are to be taken (if any) to prevent a further occurrence of the accident will be made by the Health and Safety Representative to the Head teacher within a reasonable period. All members of staff are responsible for making themselves aware of any potential hazard.

All accidents and first aid treatment is recorded on Clearcare. Recording should include the time, date, location and individuals involved in the accident, as well as any witnesses. Parents/carers are informed of significant incidents on the same day by telephone.

Contact will be made with the student's parent/carer to inform them of the situation and whether the student has been taken to hospital. Every endeavour will be made to get the parent/carer to the same hospital as the student.

### **When to Call 999**

Any accident that is beyond First Aid assistance, including serious head injuries, excessive bleeding, unconsciousness or any other life threatening situation, must be treated as an emergency and a call for ambulance assistance must be made. Action must be taken as soon as possible as haste is of the essence. The Head teacher must be informed and an incident recorded in RIDDOR

### **Emergency Procedure for Major Incidents**

In the event of such an emergency or if an 'at risk' student falls ill then the member of staff at the incident must:

1. Call 999
2. Summon a First Aider and get the relevant medication
3. Emergency treatment should be delivered.

If phoning 999 the following information must be given:

- School Telephone Number: 02392250963
- School Address: Jubilee School. 84-86 Jubilee Road Waterlooville Hampshire PO7 7RE
- Give your name
- Name of casualty and symptoms/any known medical condition
- Inform Ambulance control of the best entrance e.g. Main School Entrance
- Person reporting the need of ambulance should stay on the telephone until informed by the operator they can hang up.
- If an ambulance is called the Reception and SLT should be informed and an adult should go to the notified entrance to give directions to the ambulance crew.
- The First Aider or responsible adult must accompany the casualty to hospital.
- If the emergency services are called the parent/carer of the casualty will be telephoned by the School Admin Officer or a member of SLT as soon as is practicable.



## **Jubilee School protocol for dealing with body fluid spillages**

### **1. General statement**

The aim of this policy is to decrease the exposure risk to blood-borne and body fluid pathogens. Adherence to this policy is the responsibility of all staff that may come into contact with spillages of blood and other body fluids. All staff should be aware of their personal responsibilities in preventing the spread of infection.

### **2. Legal position**

The school has a duty to protect its staff from hazards encountered during their work: this includes microbiological hazards (COSHH 2002). For the purposes of this policy, biohazards are defined as:

- Blood
- Respiratory and oral secretions
- Vomit
- Faeces
- Urine
- Wound drainage

### **3. Prevention and preparation in case of spillage**

Workplace to provide a suitable assessment of the health risks associated with exposure to spillages of body fluids

- Staff to be aware of policy and risks associated with exposure to body fluids
- Provision of appropriate first-aid facilities and staff
- Materials for dealing with spillages to be readily available i.e. 'spillage kits these are kept in the cleaners cupboard, staff room and medical room.
- Regularly evaluate the procedure and update as necessary

Disinfection aims to reduce the number of micro-organisms to a safe level. All blood spills should be treated as a source of infection and dealt with according to strict hygienic principles.

### **4. Management**

If any type of body fluid has been spilled onto a surface the following precautions should be made:

- Notify appropriate staff i.e. cleaners, to secure the environment by placing warning signs.
- All staff dealing with a biohazard spill to wear protection i.e.
  - Disposable gloves
  - Disposable plastic apron
  - Eye and mouth protection with goggles and mask, if splash or spray anticipated.
- Access 'spillage kit' in order to clean up spillage promptly. This pack contains: absorbent granules, disinfectant, scoop and scraper, disposable gloves, bags.
- Sprinkle granules over the spillage, completely covering it. This will solidify a liquid in 2 minutes. Don't stand over the solution as it can be a respiratory irritant.
- Using the scoop and scraper provided, remove the now solidified residue and place in a bio hazard bag, along with scoop and scraper.
- Dispose of in accordance with waste management regulations.
- Clean area and equipment thoroughly using hot water and detergent, and disposable cloths.



- Hand hygiene should be performed following management of spillage.

N.B. If a spill contains glass or sharps, these should be picked up with care into a sharps bin.

## **MEDICATION**

### **Rationale**

Many students will need to take medication or be given it at school at some time in their school life. For most, this will be for a short period to allow them to finish a course of antibiotics or apply a lotion. In some cases, there may be a long-term need for students to take medication. To allow students to take or be given medication at school minimises the disruption that could be caused by illness and allows their education to proceed at a steady rate alongside their peers. Although timings of medication will take precedence, even if minor disruption results, we will minimise this as much as possible.

### **Aim**

To work in partnership with parents/carers, students, health professionals and other colleagues to ensure that children who require medication, during school time, can receive it in a safe and secure environment allowing them to continue to make progress at school and progress in their education. All parties will work with the same information in the same format.

### **Our Commitment**

In common with good practice, we will aim to work in partnership with parents/carers and (as appropriate) students to meet their individual needs. The following guidance aims to ensure a smooth-running partnership that minimises the impact of medical requirements on the day-to-day school life of students. Parents/carers are encouraged to contact the Head teacher if they feel that procedures require adjustment or alteration to suit their specific case. The Head teacher will then refer this to the prescribing medical professional. Staff that provide support for students with medical needs which may include the administration of medication will be given support by the Head teacher, access to necessary information, and receive appropriate training and guidance where necessary. First Aid trained staff and anyone administering medicines at any time will also hold the Medication Awareness Certificate.

It is important that students who need to take medication at school are involved as closely as possible in the arrangements made for them. When making arrangements for medical care at school the following should be considered:

- Independent management of needs
- Supervised administration of medication
- Staff administration of medication

Staff will assist students with their medical needs after consultation with the Head teacher. Agreements for administering medication will normally fall to the Head teacher after adequate consultation with parents/carers and students. No staff member should enter into individual agreements with parents/carers or students. Jubilee School will ensure that training is delivered according to guidelines. Staff administering medication and witnesses signing the individual medical record book are fully trained. Information about an individual student's medical condition and related needs will only be disseminated to relevant staff to ensure the student's wellbeing. Information can only be passed on with the consent of parents/carers. Where there is concern about whether Jubilee School can meet either a student's needs or the expectation of parents/carers, the Head teacher will seek advice from Acorn Education & Care and a suitable health professional. Advice on the storage of medicines should be sought from a qualified pharmacist when required. Instructions with medication should be preserved and followed. Medicines may be potentially harmful to anyone for whom they are not prescribed. We will try to ensure that risks to the health of others are properly controlled. A secure location is provided by Jubilee School, this is in the medicine cabinet in the Medication.

Medicine must only be brought to school in a suitable container. The container should be clearly labelled with a prescription label with the following information:



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- Name of the student
  - Name of the drug
  - Dosage
  - Frequency of administration
  - Expiry date

Medicines should always be kept in their original containers. The container should be clearly labelled as described above. If a refrigerator contains medicines, access to it should be carefully monitored. In an emergency, students should have prompt access to their medicine through a recognised procedure. It is the duty of the Head teacher to ensure that all staff are familiar with the emergency procedure. Jubilee School staff will NOT dispose of medicines. Out of date medicines will be returned to parents / carers at the end of each term for disposal. Parents will be instructed to return these to the pharmacist for safe disposal. The Head teacher will ensure that staff know how to call the Emergency Services/NHS Direct.

A student who is taken to hospital by ambulance should be accompanied by a member of staff who will remain until the student's parent/carer arrives at the hospital. If a student is taken to hospital, it is essential that Jubilee School makes every effort to inform parents/carers immediately; failing this the emergency contact person will be informed.

In an emergency it may be necessary for 2 members of staff, if possible, to take a student to hospital in his/her own car. When a student is taken to hospital by a member of staff, they should also take with them all medication the student is currently taking together with the student's medical record showing what medication has been taken, when it was taken, the dosage and what the medication is being taken for.

### **Working with parents/carers**

We will work together with parents/carers to ensure that all relevant information regarding a medical condition which may affect a student at school is passed on to all concerned. Information will only be requested from parents/carers when it is necessary to ensure the health and safety of the individual student and/or their peers at school. The confidentiality of a child's medical records will be respected. Information is gathered at induction meetings and regular reviews. Separate information is requested when a student is going off-site. All parents/carers will be informed of Jubilee School policy and procedures for addressing the medical needs of children. Parents/carers should provide the school with adequate information about their child's medical condition, treatment, or any special care needed at Jubilee School. They should, in partnership with the school, reach an agreement on Jubilee School's role in helping to address their child's medical needs. Any details will be passed on to those who need to know using the staff meeting forum.

- The cultural and religious views of families should always be respected. If parents make a specific request i.e. they don't want certain treatments for their children, Parents will be asked to communicate this in writing and sign it. Parents/carers will be asked for the following information about medication:
  - Name of medicine
  - Dose
  - Method of administration
  - Time and frequency of administration
  - Other treatment which may involve Jubilee School staff or affect the child's performance during the school day
  - Side effects which may have a bearing on the child's behaviour or performance at school
- Student medical conditions will be established at the interview visit. Parents/carers should advise Jubilee School of any changes in the medication administered to their child and or changes of their condition at the earliest opportunity.

### **Administration of Medicines**



If a student refuses to take medication Jubilee School will record this and inform the child's parents/carers. If the medication is essential to the child's continued well-being, Jubilee School will call the emergency services and inform the parents/carers. If the medication is essential to the child being educated, Jubilee School will contact the parents/carers to discuss actions to be taken. Medication should be brought to Jubilee School only when it is needed. Often medication can be prescribed in dose / frequencies which enable it to be taken outside school hours. Parents/carers should be consulted about this. We will never administer medication without consent.

### **Non-prescribed Medicines**

Students sometimes ask for pain killers (analgesics) at school, including aspirin and paracetamol. Jubilee School staff should generally not give non-prescribed medication to students without the written consent of parents/carers. With the prior agreement of parents/carers, Jubilee School may administer mild analgesics; e.g. either one or two paracetamol tablet (according to parental/carer advice/consent) to a child who asks for it, if they suffer pain or a headache at school. A record must be kept of the dose given. Prescribed Medicines Any member of staff giving medicines to a student should observe the following procedure in cooperation with a colleague.

- confirm the student's name agrees with that on the medication.
- check the written instructions provided by the parents/carers or doctor.
- confirm the prescribed dose
- check the expiry date

check how often and for how long i.e. 3 times a day for 6 months Functional Medication This type of medication includes; Insulin (diabetes), Ventolin (asthma), Diazepam / Valium (Epilepsy), Adrenaline (anaphylaxis). Where this type of medication is needed staff will be given specific training. Sharps / Needles Where students require medication which is supplied with a syringe or epi-pen, or where blood needs to be tested, the staff must dispose of the needles appropriately. A bona-fide sharps box will be used for this purpose.



**APPENDIX 1 – HEALTH PROTECTION AGENCY GUIDELINES FOR INFECTIOUS DISEASES**

<b>Illness</b>	<b>Period of Exclusion</b>	<b>Comments</b>
Chicken Pox	Five days from onset of rash	
German Measles	Five days from onset of rash	Pregnant women should inform their midwife about contact
Impetigo	Until lesions are crusted or healed	Antibiotic treatment by mouth may speed healing
Measles	Five days from onset of rash	
Scabies	Until treatment has been commenced	Two treatments one week apart for cases. Treatment should include all household members and any other very close contacts
Slapped Cheek Syndrome	None	
Diarrhoea and Vomiting	8 hours from the last episode of diarrhoea or vomiting	
Hepatitis A	Exclusion may be necessary	Consult the Health Protection Agency
Meningococcal meningitis	Until recovered	Communicable disease control will give advice on any treatment needed and identify contact requiring treatment. No need to exclude siblings or other close contacts
Viral Meningitis	Until recovered	
Threadworms	None	Treatment is recommended for the student and family members
Mumps	Five days from onset of swollen glands	
Head lice	None once treated	Treatment is recommended for the student and close contacts if live lice are found, "Head Lice Letter" to be sent home
Conjunctivitis		Children do not usually need to stay off school with conjunctivitis
Influenza	Until fully recovered	
Warts, verrucae		Verrucae should be covered in situations where shoes and sock are removed
Tonsillitis		
COVID-19	7 days from onset of symptoms	If confirmed, all close contacts to self-isolate for at 14 days.

