

13a

Amesbury First Aid and Accident Reporting and Investigations Policy



Signature
Jonathan Whybrow
Head

Date: 14th October 2020



Signature
Tarquin Henderson
Chairman
Board of Governors

Date: 14th October 2020

First Aid and Accident Reporting and Investigations Policy

This policy has been written in line with the DfE 'Guidance on First Aid' document published in February 2014. This policy applies to all pupils at Amesbury from Pre-Nursery through to Year 8.

First Aid is the initial assistance or treatment given to a person who is injured or suddenly taken ill. The person who provides help is the First Aider. (*St. John's Ambulance*)

The school Nurse/Health Care Assistant (HCA) will be on duty to administer First Aid from 8-15am until 6pm most days; outside of these hours there will always be at least one qualified First Aider in school and the Early Years Unit (EYU) trained to cover in the case of an emergency. There will always be a first aider on site when children are in school, one of which will be paediatric trained. A First Aider must provide immediate assistance to the injured/ill person and should call upon extra help as necessary. Appropriate first aid should be administered according to the injury/illness, judgment and training of the First Aider.

If the pupil is able to attend the Medical Department following an accident/onset of illness first aid will be administered there. If the pupil is unable to be moved the School Nurse/HCA can be contacted on Ext. 280 or on her mobile phone which is always carried and switched on: 07851702976. If called out the School Nurse/HCA will carry an emergency first aid bag.

In the Early Years Unit most minor injuries are dealt by the First Aiders on duty; during school hours pupils should be brought over to see the School Nurse/HCA if the injury is more severe or the staff are at all worried and in all cases of the child being unwell. A record of all first aid given will be kept in the EYU, a copy of this will be given to the Medical Department and kept in the pupil's medical records. Early Years staff will inform parents of any treatment given when the child is collected. There are several first aid boxes in the main school and EYU; these are checked during each term by the HCA and replenished as necessary, but it is the responsibility of the First Aiders to request supplies as necessary. Outside of normal school hours staff should not hesitate to call for an ambulance if required.

All first aid treatment will be recorded in the pupil's medical records on Schoolbase. Full details of how the accident happened, what injury was caused, first aid treatment administered and outcome will be recorded. Should first aid be administered out of hours/off school site by a first aider details should be passed on to the School Nurse/HCA so that the details can be recorded as above. Parents must be informed of all head injuries/bumps, no matter how small they seem to be as there is always a risk of complications following knock to the head. An NHS head injury guidance sheet will be emailed to the parent.

Parents will be contacted if the injury is serious, will require further treatment, analgesia is required as a consequence of the injury or if the pupil will require to be seen by a Doctor,

13a

etc. If the accident results in the pupil having to attend A&E/Minor Injuries an Accident Report Form (on SchoolBase) will be completed. A copy sent to the Health & Safety Manager, the Headmaster's PA and one kept in the pupil's medical file.

Should an ambulance be required the School Nurse/HCA or the attending First Aider will dial 999 or appoint a member of staff to do so; giving details of the casualty, type of injury and details of where the casualty is located. An ambulance must be called if the casualty is unconscious for any length of time, a spinal injury is suspected, a bone injury resulting in the casualty not being able to move or if the casualty has a seizure and is not known to be Epileptic. If they are a known Epileptic and the seizure lasts for more than five minutes or they have multiple seizures an ambulance must be called.

When dealing with blood and other spilled body fluids it is important for the First Aider to wear disposable gloves, these are found in all the first aid bags along with hand sanitising gel to clean hands if soap and water is not available. These along with any dirty dressing should be placed in a yellow clinical bag, again found in FA bag; these bags should then be placed in the clinical waster bin in the Medical Department. Spilled body fluids will be cleaned up using Bio-hazard kits from the Medical Department, EYU or Kitchen. Disposable gloves, goggles and a disposable apron should be worn; these are then disposed of in the clinical waster bin.

Provision is made for pupils who require an asthma Inhaler or adrenaline pen for severe allergies. In the EYU pupils will have their medication kept by the staff in a secure location. This is then carried by a member of staff when the child leaves the classroom. For Years 1-8 pupil's medication is kept outside the Medical Department in an accessible emergency cupboard; pupils own emergency medication is taken by a member of staff when the pupil is off site for visits/sports fixtures within the first aid bag.

Staff are responsible for carrying pupils' emergency medication from Pre-Nursery to Year 6. Pupils in Years 7 & 8 may carry their own but it must be collected and returned to the Medical Department by a member of staff at the end of the trip.

The School Nurse will ensure that accurate records are maintained regarding expiry dates of all medication and that parents are informed when an Inhaler/Adrenaline Pen is due expire, it is the parents responsibility to ensure the pupil has an in date one in school. It is also the School Nurse's/HCA responsibility to ensure that the correct inhaler/Adrenaline Pen is handed over to the member of staff in charge of taking the pupil's off site.

Pupils with any other medical conditions, such as Diabetes, will be assessed individually and a care plan written with the collaboration of the parents and pupil as appropriate. From here a decision will be made as to where the medication will be kept – in the medical Department, in their classroom or on their person.

13a

Treatment of an Epileptic seizure -

Clear a space around the child/adult so that they do not injure themselves on anything.

Put something soft under their head.

NEVER TRY TO PUT ANYTHING INTO THE MOUTH OR RESTRAIN THEM.

Start to time the seizure.

Get all the other children out of the classroom / area immediately.

Call for help to the office / School Nurse/HCA Ext 280 (07851 702976)

If the seizure lasts more than 5 minutes or they have several in a row, an ambulance will need to be called.

Ask someone to phone the child's parents to inform them and ask them to come to school or meet at the hospital.

When the seizure has finished, stay with the child and reassure them.

Do not give them any food or drink until they have fully recovered.

Place them into the recovery position.

See Epilepsy policy for more information

Treatment for a diabetic coma –

Too little insulin can cause high blood sugar (hyperglycemia).

If it's not treated the person can gradually become unresponsive and slip into a diabetic coma.

Sign of hyperglycemia include warm, dry skin/ rapid pulse and breathing/ fruity sweet breath – *similar to pear drops* (produced by ketones being released into the blood stream) thirst/ drowsiness, leading to unresponsiveness and finally coma if not treated
Call School Nurse/HCA if you suspect hyperglycemia.

Please them in to the recovery position and monitor breathing regularly.

DO NOT LEAVE THE CASUALTY – unless you are alone and need to call 999. See *Diabetic policy for more information*

Treatment for an asthma attack –

Symptoms of an asthma attack

Child/adult's symptoms are getting worse cough, breathlessness, wheezing or tight chest

Their blue reliever inhaler isn't helping

They are too breathless to speak, eat or sleep

Their breathing is getting faster and it feels like you can't catch your breath

Sit the person down and encourage them to take slow, steady breaths.

Help them take one puff of their reliever inhaler, using the spacer every 30-60 seconds, up to a maximum of 10 puffs. 10 breaths to every one puff.

Call for the School Nurse/HCA

If there is no relief after administering 10 puff of the inhaler or the persons condition deteriorates rapidly call for an ambulance at once.

See Asthma policy for more information

13a

Treatment of head injuries –

A head injury (HI) is any trauma to the scalp, skull, or brain. The injury may be only a minor bump on the skull or a serious brain injury. Head injury can be either closed or open (*all open HI must be transferred to hospital by ambulance*).

All casualties who present in the Medical Department with a history of a head injury are will be assessed and history will be carried out, signs monitored and appropriate action taken. Continuous monitoring every 15 minutes to be recorded on HI record form. If the pupil has been injured on the sports field, they should not “play on” without obtaining medical advice.

If the casualty does not fully recover or there is a deteriorating level of response after an initial recovery, call for an ambulance immediately.

Parents are to be contacted after every bump/head injury and a copy of NHS guidelines sent to them via SchoolBase treatment report.

The school follows the Rugby Football Union (RFU) guidelines on head injuries and graduated return to play and the NICE clinical guideline 56 (*see Head Injury and sport policy*)

Treatment of Anaphylaxis –

Anaphylaxis is a severe and potentially life threatening allergic reaction that usually occurs within minutes of exposure to a trigger substance known as an allergen. A number of different allergens can trigger anaphylactic shock, from insect stings, latex to certain foods such as shellfish and nuts.

Symptoms of anaphylaxis range from swelling of the throat, lips and mouth, difficulty in swallowing, speaking or breathing, urticarial rash, a sudden feeling of weakness, due to a drop in blood pressure to collapse and unconsciousness.

Adrenaline is used for treating anaphylaxis. The pupil will have been allergy tested and prescribed an adrenaline auto-injector (AAI); these are injections given intramuscular. In mild reactions an antihistamine syrup or tablet may be given if the child has been prescribed these. If a child has breathing problems and normally uses asthma medications such as a reliever inhaler, these can be given.

In the event of having to use an AAI:

- Call for assistance, the School Nurse/HCA and an ambulance on 999
- Lay the child down
- All pupils have an emergency pack containing their Antihistamine (if prescribed) and their AAI. These are kept in a cupboard outside the Medical Department for easy access.
- Remove from packaging and pull off the safety cap. Place the tip on the front of the outer thigh (the needle can pass through most clothing but NOT seams of jeans/joggers)
- Holding the device at right angles to the thigh use a quick motion to press the pen hard against the thigh. Hold the needle in place for 10 seconds
- If breathing is NOT affected lay the child down and elevate their legs
- **DO NOT ALLOW THEM TO STAND UP AND MOVE AROUND**

13a

- If there is no improvement after 5-10 minutes, a second dose can be given using the second pen device.
- If the child becomes unresponsive they should be placed in the recovery position, with care to maintain airway and breathing and assess levels of response
- If breathing stops, basic life support should be started.

(See *Anaphylaxis policy*)

There are several First Aid boxes throughout the school and on each mini bus. Each box and bag will be stocked in accordance with the Health & Safety Executive (HSE) guidelines. Each box will be checked each term and replenished as required. This will be carried out by the HCA and a record kept in the Medical Department.

First Aid bags will be issued to staff when leaving the school site for a visit/sports fixture etc. It is the responsibility of the staff to inform the School Nurse when a bag is required and provide a list of participating pupils. The School Nurse/HCA will then prepare a bag and include any Inhalers and/or Adrenaline pens required. Staff must collect (and return) the bags when a hand over of medication will be given and it is the staff's responsibility to ensure that the pupil's inhalers/adrenaline pens is returned to the School Nurse/HCA following the visit/match. No other medication/creams etc. other than the pupil's own are permitted in First Aid boxes/bags.

A list of first aid box locations can be found in the Medical Centre.

The School Nurse and Deputy Head have reviewed the school site and activities (on and off site) to assess the level of first aid cover required and who should be first aid trained. The school has several members of staff who are First Aid trained to different levels/courses. It is the responsibility of the School Nurse to keep records of all trained members of staff and to book courses as required. First Aid training will be updated every three years. A copy of their First Aid Certificate will be kept in the in the Medical Department and also in their Personnel files.

A list of all first aiders can be found in Medical Centre and Staff Room.

Mrs. K. Ainslie	211	First Aid at Work
Mr. A. Alesbrook	250/233	First Aid for Sports
Miss C. Carnes	290	Emergency First Aid at Work
Mr. P. Donaldson	220	Emergency First Aid at Work
Mrs. L. Dover	251	First Aid at Work
Mrs. A Freeland	261	Paediatric First Aid
Mrs. V. Gadd	262	Paediatric First Aid
Mr. M. Gibb	226	Emergency First Aid at Work
Mrs. A. Hayward	EY	Paediatric First Aid
Mrs. A. Hemmings	ASC	Schools First Aid
Mr. J. Lawrence	230	Emergency First Aid at Work
Mr. M. Livingstone	267	Emergency First Aid at Work

13a

Mrs. T. Mackenzie	268/266	Emergency First Aid at Work
Mrs. C. Munday	234	Emergency First Aid at Work
Mrs. K. Lloyd-Davies	264	Paediatric First Aid
Mrs. M. Marriott	254	Emergency First Aid at Work
Mrs. S. Page	251	Sports First Aid
Mrs. K. Powis	255	Emergency First Aid at Work
Mrs. P. Pool	263	Paediatric First Aid
Mrs. P. Probert	224	Emergency First Aid at Work
Mr. N. Randall		Schools First Aid
Mrs. K. Redman	HCA 280	First Aid at Work
		Paediatric First Aid
	Mobile	o7968945866
Mr. G. Rouse	250	Sports First Aid
Dr. T. Smiley		Emergency First Aid at Work
Mr. M. Tribe		Emergency First Aid at Work
Mr. A. Warry	Tennis	Emergency First Aid at Work
Mrs. J. Watts	Matron 280	First Aid at Work
		Paediatric First Aid
	Mobile	o7968945866
Mrs M White	280	First Aid at Work
Mrs L Williams	251/234	Sports First Aid
Peri staff		
Mr. M. Rance	Judo	Emergency First Aid at Work

The School Nurse will also arrange staff update sessions to on the use of Adrenaline Pens and Inhalers; but will offer refresher training for any staff at any time should they feel they need it.

Most incidents that happen in school or on school trips do not need to be reported to the HSE. If a pupil is injured and remains at school, is taken home or is simply absent from school for a number of days the incident is not reportable.

Injuries to pupils, staff, visitors and contractors who are involved in an accident on school grounds or an activity organised by the by the school are only reportable to the Reporting if Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR) when

- the death of the person arose out of or in connection with a work activity; or
- an injury that arose out of or in connection with a work activity and the person is taken directly from the scene of the accident to hospital for treatment (examinations and diagnostic tests are not treatment)

13a

- the HSE Information Sheet EDIS 1 (rev3) gives guidance and examples of whether an injury arises out of or in connection with work.
- if in doubt guidance should be sought from the HSE, for example when a pupil from another school is injured (specified injury) during a sports match (not reportable) as opposed to a pupil of the school who is injured similarly during a timetabled games lesson (reportable).

Injuries and ill health to people at work are reportable by the responsible person under RIDDOR when

- accidents which result in death or a specified injury (which must be reported without delay). Also a reportable occupational disease when confirmed by a doctor in writing. The HSE Information Sheet EDIS 1 (rev3) gives details of specified injuries and reportable diseases.
- accidents prevent the injured person from continuing their normal work for more than seven days (not counting the day of the accident, but including weekends and other rest days). These must be reported within 15 days of the accident.
- the responsible person is normally the employer of the injured person. The exception will be those that are self-employed, where the controller of the premises should report.

Dangerous Occurrences (specified near miss events) are reportable under RIDDOR. The HSE Information Sheet EDIS 1 contains the typical examples applicable to schools.

If required under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations a form F2508 will be completed and sent to the HSE. Reports can be made on-line via the HSE website, only fatal and specified injuries can be reported by telephone.

Completed accident forms are forwarded to the Facility's Manager, Headmistress's PA and a copy kept in pupil's medical file. The forms are to be kept for a minimum of 3 years. The records should be kept in a locked filing cabinet in the Finance Office to ensure compliance with the Data Protection Act.

Accident reports will be raised at every meeting of the School Health and Safety Committee.

All accidents reportable by the school under RIDDOR will be investigated. This will normally be undertaken by the Facilities Manager and may include the taking of witness statements, photographs and the production of a written report. All such reports will be reviewed by the Health and Safety Committee.