

Queen's College London



First Aid policy

Reviewed August 2018

Next review August 2019

1 Aims

1.1 This policy aims to:

- a. Provide effective, safe first aid cover for pupils, staff and visitors of Queen's College.
- b. Ensure that first aid information is readily available and that all users of the School know how to call for help.
- c. Ensure that first aid kits for minor injuries are available throughout the School for use by all staff and that they are maintained regularly.
- d. Provide awareness of health and safety issues within the School and on school trips, to prevent, where possible, potential dangers or accidents.

1.2 This policy works in conjunction with the Health and Safety Policy and the Out of School Visits and Trips policy and aims to ensure that the School remains a safe environment.

2 Introduction

2.1 The health and safety of Queen's pupils is one of our prime concerns. There are, accordingly, clear procedures laid down by the School to organise the provision of First Aid for the pupils and staff both on and off the school premises.

2.2 First Aid can save lives and prevent minor injuries becoming major ones. The School seeks to ensure that there are adequate and appropriate equipment and provisions for providing first aid in accordance with the Health and Safety at Work Act 1974 (HSWA). Furthermore, it recognises that the School provides qualified first-aid personnel in accordance with The Health and Safety (First Aid) Regulations 1981.

2.3 It is assumed that all pupils attending school are healthy and fit to cope with the school day without leaving lessons for medical attention. The College Nurse is there for accidents, emergencies and illnesses that occur during the course of the school day. The College Nurse is deputised by the Administrative Assistant.

2.4 Health and Safety legislation places a duty of care on employers for the health and safety of their employees and anyone else on the school premises: this would include the Principal, teachers, non-teaching staff, pupils and visitors. This policy covers: who is responsible for duties within the school; the number of first aiders/appointed persons on site; the numbers and locations of first aid materials; arrangements for off-site/trips; and in and out of school hours arrangements.

2.5 The School recognises that it has a duty to protect the health and safety of staff, pupils and visitors to the premises. The Principal has overall responsibility for first aid provision. Responsibility for day to day first aid procedures, however,

has been delegated to the Health and Safety Committee which reviews the school's first aid needs regularly and ensures that provision is adequate.

2.6 The Health & Safety Management Committee meets at least three times each year and reports to the Council. It is chaired by the Senior Tutor and consists of:

- a representative of Council
- the Bursar
- the Senior Leadership Team of Queen's College
- the Senior Leadership Team of Queen's College Prep School
- a Caretaker
- The Heads of Science and PE at QCL and QCPS
- Catering Manager
- College Nurse
- Assistant Bursar

2.7 All staff, pupils and visitors are expected to have high regard for safety at all times. In the event of an accident all members of the school community should be aware of the support available. If anyone has any concerns about first aid at the School, they should inform the Principal (QCL) or Headmistress (QCPS).

3 Responsibilities

3.1 The School is divided into different bodies: the Council, Senior Leadership Team, teaching staff, non-teaching staff and pupils. All of these bodies should be aware of the systems in place and to ensure that all staff and pupils are aware of Health and Safety issues within the school and on school trips and to prevent, where possible, potential dangers and accidents to ensure the wellbeing of the school community as a whole.

4 Information about pupils' medical conditions

4.1 At the start of each academic year, the College Nurse will collate medical forms for all pupils, and establish a confidential list of all pupils' known medical conditions and parental consent. Relevant information will also be entered on to a secure part of the school management system (SchoolBase). Any member of staff requiring medical information for trips and outings can obtain that via a list from the College Nurse (or a deputy in her absence) as teaching staff do not have access to the secure areas of the school management system.

4.2 The College Nurse will maintain a file of up to date medical consent forms for pupils (once completed by parents) and ensure that this information is readily available for staff responsible for school trips and outings. These forms will be kept in a locked filing cabinet in the Medical Room.

5 First Aider Team

College Nurse

- 5.1 The College Nurse will be on hand during term time to treat any minor medical condition for pupils, staff or visitors within their professional capability or to refer a casualty to the appropriate health services. Anyone with a serious injury and/or requiring emergency treatment should be sent or taken directly to hospital.
- 5.2 Her room is open from 8.00 am to 4.05 pm, but pupils are not permitted to visit the nurse during lesson times, unless it is an emergency. During the school day, surgery hours are during break and lunchtime. If the Nurse is not in the medical room, pupils can go directly to the Front Office for emergency treatment by her deputy.
- 5.3 If a pupil is too unwell to remain in School then the Nurse will contact her parents so that she may be taken home, or to inform parents if the pupil needs to be taken to hospital.
- 5.4 Five year storage is provided in the Nurse's Room for attendance registers and medical certificates.
- 5.5 A record is kept of any first aid treatment administered.

First Aiders

- 5.6 The school recognises that teachers' and support staff's conditions of employment do not include giving first aid. However, teachers and other staff in charge of pupils are expected to use their best judgement at all times to ensure the welfare of the pupils is paramount. The School has a number of First Aiders on site, and there is always at least one qualified First Aider on the school site.
- 5.7 First aiders will receive training and attend regular refresher courses to ensure that skills are maintained. Ideally, due to the increased risk of sports injuries, all PE staff should have awareness of first aid, with a number of key personnel trained to a higher level.
- 5.8 The number of first aid personnel is based on the number of pupils and employees, taking into consideration adequate provision for leave and absences, off-site activities, practical departments (e.g. Science, Physical Education) etc.
- 5.9 The DfE recommends one first aider for every 50 people in a medium risk environment and one for every 100 people in a low risk environment: a school will have a mixture of both. The College has about 420 on site during term time and therefore should have a minimum of 4 first aiders. Numbers will vary during school holidays: it is estimated that about 50 people will be on site, and therefore at least 1 first aider should be available (more will be required if there are other events/activities taking place).

5.10 All First Aiders have completed a training course as approved by the Health and Safety Executive (HSE). This means that they must hold a valid certificate of competence in either:

- a. First Aid at Work (FAW) issued by a training organisation approved by the HSE or
- b. Emergency First Aid at Work (EFAW) issued by a training organisation approved by HSE or a recognised Awarding Body of Ofqual/ Scottish Qualifications Authority.
- c. Other qualifications recommended include:
 - Paediatric First Aid Certificate
 - National Pool Lifeguard Qualification
 - National Teacher Rescue Award

5.11 The main duties of a First Aider are to:

- a. give immediate help to casualties with common injuries and illnesses and those which occur as a direct result of specific hazards within schools; and where necessary ensure that an ambulance is called.
- b. In all instances the First Aider should notify the College Nurse of any incidences at the earliest opportunity and complete an incident form.
- c. First Aiders are required to update their training every three years.

5.12 The Bursar will also ensure that the list of First Aiders within the school is kept up to date at all times, and available in the Front Office. The College Nurse is responsible for restocking first aid boxes and displaying a log of contents with each box. An up to date list of qualified first aiders within the school is attached in Appendix 2.

5.13 The Bursar and College Nurse regularly review the current number of First Aiders on site and whether they are all trained to meet the standards required. First Aiders are qualified to give immediate help to casualties with common injuries and illnesses and those arising from specific hazards in school.

5.14 All First Aiders are fully indemnified by the College unless deliberately negligent and provided that they are suitably trained and are acting within the scope of their employment and within the College's guidelines for the administration of First Aid.

6 Responsibilities of First Aiders

- 6.1 To know their own work area well, paying special attention to potential hazards, and know the correct treatment for injuries common to that area.
- 6.2 To promote accident prevention and safe working practice.

- 6.3 To ensure that accidents are reported to the College Nurse who will then record details in the accident book.
- 6.4 To safeguard the patient's clothing and possessions.
- 6.5 To respect patient confidentiality.

7 Record keeping

7.1 A report should be completed after any accident, dangerous occurrence, or sudden illness requiring immediate resuscitation or occasion of reportable illness by the person involved, or if they are unable to complete it themselves, then by an adult witness or the first person reported to. This will detail the date, time and place of the incident, personal details of the person(s) involved and a brief description of the incident. The record will contain details of any first aid given and what happened to the person immediately afterwards (went home, remained in the medical room, resumed classes etc.).

7.2 If the person involved needs first aid or medical attention in School, details of any treatment given there are recorded in the Accident Book (which is kept and maintained by the College Nurse), and the pupil's medical file (if a pupil).

7.3 Reports of incidents which are RIDDOR reportable are forwarded to the Bursar who reports these to the HSE as and when required according to RIDDOR regulations (see Appendix 6).

7.4 Parents or Guardians of pupils will normally be contacted and informed of the incident by the College Nurse staff unless the pupils are Gillick competent and expressly ask that the matter is kept confidential.

8 First Aid Materials and Equipment

8.1 First aid boxes are provided by the College Nurse. Items used should be accounted for and reported in the log of box contents, as well as to the College Nurse by email so that she can then replenish stocks. Boxes are checked on an annual basis and restocked as requested.

8.2 Where there is no special risk identified, a minimum provision of first aid items would be:

- a. A leaflet giving general advice on first aid.
- b. 20 individually wrapped sterile adhesive dressings (assorted sizes).
- c. Two sterile eye pads.
- d. Four individually wrapped triangular bandages (preferably sterile).
- e. Six safety pins.
- f. Six medium (approx. 12x12cm) individually wrapped, sterile unmedicated wound dressings.

- g. Two large (approx. 18x18cm) individually wrapped sterile unmedicated wound dressings.
- h. One pair of disposable gloves.

8.3 First Aid boxes are kept in the following locations:

- Front Office
- Nurse's room
- Preparation rooms of the laboratories
- Art department
- Kitchen
- Gymnasium

8.4 Owing to specific potential dangers within the Science department, the Head of Department should ensure that Science staff have received training to deal with potential accidents with chemicals, fire and the less usual circumstances where staff/pupils may be injured. This is reviewed annually.

Off-site First Aid Cover

8.5 The HSE recommend sensible precautions are taken with regard to the provision of first aid on individual trips.

8.6 When pupils are on approved school trips, first aid arrangements are detailed in the risk assessment. Insurance details are provided to those organising trips. A designated member of staff should have a suitably equipped first aid box and appropriate telephone numbers to summon aid if required. First Aid boxes are available upon request from the College Nurse based on the number of persons on the trip.

8.7 Medical contact and information forms are sent annually to all parents asking them to supply detailed information on their child's medical conditions. Staff in charge should ensure that they have up to date medical information for every pupil they are taking on a trip, including details of any specific conditions or medications of which they should be aware.

8.8 If pupils are ill or injured abroad, the local emergency services or hospital /medical centre should be contacted.

8.9 When at the premises of a third party where first aid arrangements are assessed to be adequate to cover the School's needs, e.g. a sports fixture at another school, those members of staff concerned should obtain details of the first aid arrangements in advance and familiarise themselves with them on arrival at the premises.

- 8.10 It is the responsibility of the member of staff organising out of school trips to inform the College Nurse of the names of pupils, nature, and length of trip, preferably at least two weeks before the planned trip.
- 8.11 The College Nurse will inform the trip leader of any specific health issues individual pupils have
- 8.12 The College Nurse will invite the trip leader to the Medical Room prior to the trip to discuss care plans and medication for pupils who have specific medical issues
- 8.13 The school strongly recommends that trip leaders endeavour to ensure there is a first aider present on all trips, though accepts that this will not always be possible
- 8.14 After consideration of the nature of the trip and possible health issues of pupils attending, the College Nurse will inform the trip leader if it is felt that additional first aiders must be present, copying in the Pastoral Deputy Head.
- 8.15 On the day before the trip, the trip leader or delegated member of staff will collect from the College Nurse the required travel first aid bag or bags, and emergency asthma pack and Epipens if needed.

9 Pupils with specific First Aid needs

- 9.1 Staff have access to a list of pupils who are subject to severe allergic reactions or other potentially life-threatening conditions (asthma, epilepsy, diabetes) on the staff room noticeboard.

Appendix 1: What to do in the event of an accident or illness on School premises

In an emergency:

- a. Dial 999 for the emergency services. Give as exact a location as possible, and send someone to the front door of the College to direct the ambulance when it arrives.
- b. Emergency aid should be started or simple airway measures instigated, if appropriate.
- c. Stay with the casualty until they are handed over to the care of a doctor, paramedic, hospital accident and emergency unit personnel or other appropriate person.
- d. Once the above steps have been completed, contact the College Nurse on the number below. Should she not be available, contact a member of the Senior Leadership Team.

Contact Number:

College Nurse Internal Ext.	7075
Direct Line	020 7291 7075
Deputy Head Pastoral:	7010
Senior Tutor:	7007
Principal:	07767 324664

At other times:

- a. Send or take anyone with a serious injury directly to hospital. If you are driving, consider taking someone else with you to look after the injured person in the car.
- b. Any casualty who has sustained a significant head injury should be taken to hospital. Parents or next of kin are to be informed about all head injuries promptly.
- c. Parents will be informed of any accident or injury sustained by the child and any first aid given on the day of the incident or as soon as reasonably practicable afterwards.
- d. Any pupil sent to hospital by ambulance should be accompanied in the ambulance by a member of staff at the request of paramedics or followed to hospital by a member of staff to act in Loco Parentis, and if possible met at hospital by a relative.
- e. Call for a member of the first aid team to treat any injured person.
- f. In the event of an accident, a casualty should not be moved (unless in immediate danger) until he/she has been assessed by a qualified first aider.
- g. During term time, send any pupil or staff member who has minor injuries or feels generally unwell to the Medical Room. During

school holidays, such casualties should be sent to their own GP practice or Accident and Emergency unit if appropriate.

- h. Liaise with teaching staff to ensure that lessons are covered in the event of an absent teacher.
- i. Report all accidents and injuries in the appropriate way.

Appendix 2: First Aiders at QCL

EMERGENCY LIFE SAVER COURSE- Grays Medic trainer David Gray.

57 members of Staff attended this 3 hour inset refresher training on 02/01/2018. The following remain employed by Queen's College:

Susannah Abbott	Sarah Harrison	Pietro Venesiani
Ken Anderson	Sarah Keogh	Louise Walker
Rebecca Argent	Clare Loftus	Mark Wardrop
Sarah Atkins	Mariette Moor	Eric Wilkins
Emily Azis	Amelia Morse	David Willows
Josie Baker	Nithya Murugan	Rachel Wilson
Claire Billard	Joshua Oakley	
Rebecca Bor	Eloise Pegler	
Sarah Bottaioli	Lucy Penny	
Finlay Burgess	Sally Perry	
Liane Catlin	Lauren Robinson	
Caroline Curtis	Nicola Robinson	
India D'Arcy	Philip Smith	
Paul Davies	Helen Sperling	
Fleur Delany	Emily Stafford	
Zahra Dharsi	Rebecca Stewart	
John Donovan	Isobel Stonham	
Doro Fabers Gumpert	Davina Suri	
Roger French	Elizabeth Thonemann	
Derry-Anne Hammond	Richard Tillett	

Emergency First Aid At Work - Training by Grays Medic (in accordance with H & S regs - 1981)

Training date - 3rd January 2017

Expires - 2nd January 2020

Sarah Atkins
Emily Azis
Claire Billard
Caroline Curtis
Paul Davies
Fleur Delaney
John Donovan
Doro Fabers Gumpert
Roger French
Sarah Harrison
Sarah Keogh
Lucy Penny
Sally Perry
Lauren Robinson
Helen Sperling
Rebecca Stewart
Davina Suri
Rosalind Thomson
Elizabeth Thonemann
Louise Walker
Mark Wardrop
Eric Wilkins
David Willows

Advanced First Aiders.

Lianne Stileman

St John Ambulance - First aid practice training course.

First Aid At Work - completed 29th May 2017 - Expires 28th May 2020

Derry-Anne Hammond

Rescue Emergency Care -Emergency First Aid level 2

Completed - 5th July 2015 - Expires 4th July 2018

Appendix 3: Contacting Emergency Services

Dial 999, ask for appropriate emergency services and be ready with the following information:

1. Your telephone number...
2. Give your location and the address of the School
3. Give exact location within the School
4. Give your name...
5. Give name of child and brief description of child's symptoms...
6. Inform 999 control of the best entrance and state that the crew will be met and taken to...

Appendix 4: Guidance on dealing with spillage of body fluids

Spillages of blood, vomit, urine and excreta should be cleaned up promptly. The following general actions must be taken by the person dealing with the spill:

- Clear the immediate area of people. Hazard signs and cordoning may be necessary, according to the circumstances.
- Disposable personal protective equipment (PPE), including gloves (latex or nitrile) or equivalent and a disposable plastic apron must be worn.
- Any spilt blood or other body fluids should be cleaned up, either with disposable absorbent paper towels. Dispose absorbent towels and latex gloves inside the clinical waste bin in the downstairs disabled toilet.
- Ensure the area is cleansed with a suitable antiseptic solution.

Appendix 5: Specific Medical Emergencies

a. Asthma:

Signs & Symptoms of Asthma are as follows:

- Laboured breathing
- Audible wheeze
- Tight cough
- Use of accessory muscle round neck and ribs
- Inability to speak in sentences

If a pupil is having an asthma attack, the person in charge should:

- i. prompt them to use their reliever inhaler if they are not already doing so. It is also good practice to reassure and comfort them whilst, at the same time, encouraging them to breathe slowly and deeply. The person in charge should not put his/her arm around the pupil, as this may restrict breathing. The pupil should sit rather than lie down.
- ii. assist with prompt administration of medication - give 4 puffs of blue reliever encouraging them to hold their breath for up to the count of 10 on the inhalation breath of each puff.
- iii. if no improvement after 4 minutes, give another 4 puffs.
- iv. If there is still no improvement, or if the pupil appears very distressed, is unable to talk and is becoming exhausted, then an ambulance must be called. Dial 999 from land line (add an extra 9 if ringing from a School phone) and 112 from a mobile phone.
- v. Continue administering 4 puffs of ventolin every 5 minutes until the ambulance arrives.

b. Diabetes

i. **Low Blood Sugar** (Hypoglycaemia - usually sudden onset)

Symptoms of hypoglycaemia are as follows:

- Hunger
- Shakiness
- Nervousness
- Sweating
- Dizziness or light-headedness
- Sleepiness
- Confusion
- Difficulty speaking / slurred speech

- Anxiety or agitation
- Weakness

If a pupil is suffering from hypoglycaemia:

- Provide the student with a sugary drink – coke, Ribena, juice or glucose tablets to bring blood glucose levels up.
- Ensure that the student has a snack or meal (e.g. sandwich or other complex carbohydrates) within an hour of the initial symptoms to stabilize their blood sugars

ii. Diabetic High Blood Sugar (Hyperglycaemia - usually slow in onset over few days)

Signs and Symptoms

- More hunger or thirst than usual
- Excessive urination
- Tiredness and lethargy
- Frequent infections
- Blurred vision

If untreated, high blood glucose may result in **ketoacidosis**. This is a serious condition resulting from a lack of insulin. This causes the body to become progressively acidotic which can be fatal if not treated quickly.

Symptoms of ketoacidosis

- Vomiting,
- Hot dry skin
- Drowsiness,
- Smell of acetone (like pear drops) on the breath,
- Collapse or coma.

Action

- If the student has a blood glucose machine – assist her to test her blood glucose levels.
- Assist her to administer her insulin.
- Dial (9)999 for an ambulance & contact parents,
- Do not leave this student unsupervised.**

If unsure if person is suffering high or low blood sugar, give them sugar. If they have high blood sugar it will not harm them further, but if they have low blood sugar it will be vital.

c. Epilepsy

Epileptic seizures are caused by an electrical disturbance of the brain. Seizures can last from 1 to 3 minutes.

Symptoms of a major fit (Grand mal)

- A 'cry' as air is forced through the vocal chords
- Casualty falls to ground and lies rigid for some seconds
- Congested, blue face and neck
- Jerking, spasmodic muscle movement
- Froth from mouth
- Possible loss of bladder and bowel movement

How to respond to an epileptic seizure:

During Seizure

- Do NOT try to restrain the person
- Do NOT push anything in the mouth
- Protect person from obvious injury - move furniture etc
- Place something under head and shoulders

After Seizure

- Place in recovery position
- Manage all injuries
- DO NOT disturb if casualty falls asleep but continue to check airway, breathing and circulation.

Phone an ambulance if the seizure continues for more than 5 minutes (unless their individual care plan suggests otherwise.)

d. Anaphylaxis

Anaphylaxis is an extreme allergic reaction requiring urgent medical treatment. When such severe allergies are diagnosed, the children concerned are made aware from a very early age of what they can and cannot eat and drink and, in the majority of cases, they go through the whole of their school lives without incident. The most common cause is food - in particular nuts, sea foods and dairy products. Wasp and bee stings can also cause allergic reaction. In its most severe form the condition can be life-threatening, but it can be treated with medication. This may include antihistamine, adrenaline inhaler or adrenaline injection, depending on the severity of the reaction.

i. Early Signs and Symptoms of anaphylactic reaction

- Swelling and redness of the skin

- Itchy raised rash
- flushed complexion
- a metallic taste or itching in the mouth

Initial Management

- Give dose of **PIRITON** immediately
- Observe closely for 30mins
- If recovering return, the pupil should be safe to return to class with strict instructions to return if symptoms re-occur

ii. Cause for Concern

- Wheezing and or coughing
- Difficulty talking and/or hoarse voice
- Nausea and vomiting
- Stomach cramps & diarrhoea

Management

- Administer a dose of **PIRITON** as above if not already given
- Help casualty sit in position that most relieves breathing difficulty
- If the child has an inhaler, administer as per asthma attack (see above)
- Do not leave this child unsupervised- there is a risk of them going into anaphylactic shock
- Dial (9) 999 for an ambulance & inform parents

iii. Medical Emergency

- Swelling of the throat, tongue & lips
- Difficulty swallowing
- Rapid irregular pulse
- Difficulty breathing
- Collapse or unconsciousness

Management

- Call (9)999 for an ambulance.
- Observe and record pulse and breathing.
- Administer EpiPen as below.
- Help casualty sit in position that most relieves breathing difficulty
- **Do not leave this child unsupervised – this is a life threatening condition!**

Symptoms and signs will normally appear within seconds or minutes after exposure to the allergen.

Administering an EpiPen

EpiPen is an auto-injector that administers epinephrine – and epinephrine (adrenaline) is the definitive emergency treatment for severe allergic reactions.

- i. Sit the student in a comfortable position. Stay calm to reassure them.
- ii. Remove the EpiPen from the yellow or green plastic container by unscrewing the lid and sliding the EpiPen out.
- iii. Hold the EpiPen in your fist so that the black tip is nearest your little finger. It is very important that you remember that the black tip contains the needle – you do not want to inject yourself instead!
- iv. Pull off the grey cap (do not twist).
- v. Holding the student securely, place the black tip against their outer mid-thigh. (An EpiPen can be given through light clothing). The mid outer thigh is the 'fleshiest' part of the thigh, where the muscle is. *Note; there is no need to 'swing and jab': a sudden jab may cause the child to jump and the needle to be discharged before the adrenaline is injected.*
- vi. Push down firmly until a loud click is heard or felt and hold in place for 10 seconds.
- vii. Remove the EpiPen and gently massage the area to help the drug disperse.

Always call an ambulance if an EpiPen has been used. The effects of the adrenaline can wear off causing the anaphylaxis to return.

If there is no response to the initial dose of adrenaline, the EpiPen dose can be repeated (if available) after 5 minutes.

Appendix 6: RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations).

The School has a legal duty under RIDDOR to report and record major work-related accidents. This includes dangerous occurrences where something happens that does not result in an injury but could have done. RIDDOR applies to all work activities but not all incidents are reportable.

The Principal will take advice when unsure as to whether the accident is reportable. The Incident Contact Centre (ICC) on 0845 300 99 23.