

## **First Aid Policy**

This policy applies to the schools of The Stephen Perse Foundation (the '**Foundation**') including Early Years and boarding.

### **Introduction**

Unforeseen incidents are likely to occur from time to time in a school and boarding environment that may require first aid to be given to pupils, staff and/or visitors. These incidents may involve illness, exacerbation of a known medical condition or accidents causing injury.

### **Provisions for First Aid**

Each site within the Foundation, including each boarding house, is risk assessed to ensure appropriate levels of first aid provision. These risk assessments are carried out by a competent person and reviewed annually and updated as necessary as a result of a statutory or other significant change.

As well as the minimum provision required, the risk assessments set out in detail any additional provision required specific to each boarding house and each School's needs.

The risk assessments identify needs for each of the sites, high risk areas and activities and (when required) individuals requiring specific or specialist provision. They also take into consideration out-of-hours activities and provision for those on site out of term time and ensure that a qualified First Aider is on each school site and each boarding house whenever children are present. Provision for first aid for expeditions is risk assessed separately by the Group Leader.

### **Qualifications and Training**

The aim of training is to give staff sufficient understanding, confidence and expertise in first aid. Staff should not provide first aid treatment if they have not been trained to do so.

### **Foundation Healthcare Practitioner and Nurse**

The Foundation Healthcare Practitioner and Foundation Nurse are responsible for overseeing health promotion and can provide first aid advice on a variety of different areas for pupils. The Healthcare Practitioner is based at the Senior School site and can be contacted to deal with first aid emergencies and give advice over the telephone. The Foundation employs a qualified nurse, primarily in support of Cambridge Centre for Sixth Form Studies students (CCSS) and boarding students from both CCSS and the

Stephen Perse 6th Form College.

### **First Aiders**

First Aiders must have completed a training course, and refresher training as required, approved by the Health and Safety Executive (HSE) and appropriate for the role. Their main duties will be to provide immediate care for common injuries or illnesses and those arising from specific hazards within the Foundation and its undertakings. A list of qualified First Aiders is available in the Health and Safety shared drive.

When necessary, First Aiders will be responsible for ensuring that an ambulance or other professional medical assistance (including the Healthcare Practitioner or Nurse) is contacted.

### **Paediatric First Aiders**

Paediatric First Aiders will have the relevant First Aid Qualification which enables them to provide first aid to those pupils who fall within the Early Years age group. All staff who work directly with pupils in the Early Years hold a relevant and current paediatric First Aid qualification. At least one person who has a current paediatric first aid certificate must be on the premises and available at all times when Early Years children are present, and must accompany Early Years children on outings.

### **Appointed persons**

The Foundation employs appointed persons in addition to First Aiders. Such persons will have received formal training and their duties include:

- taking charge when someone becomes ill or is injured;
- looking after first aid equipment, e.g. restocking of supplies; and
- ensuring that an ambulance or other professional medical help is called when appropriate.
- Administering Medication in Education

First Aiders, including paediatric First Aiders, and appointed person training will be renewed at least every 3 years.

### **Boarding students**

All boarding students are required to register with the local practice (Woodlands Surgery, Eden House, 48-49 Bateman Street, Cambridge, CB2 1LR Tel 01223 697600) unless their parents are resident in the UK and they prefer their child to remain where they are currently registered. Details of contact numbers for the surgery, NHS Direct (111), dentists, opticians and counselling services are available from the Nurse or the house staff.

### **Anaphylaxis training for staff**

All staff are required to have training on anaphylaxis on induction to the Foundation and every three years, which includes:

- recognising the range of signs and symptoms of an allergic reaction;
- understanding the rapidity with which anaphylaxis can progress to a life-threatening reaction, and that anaphylaxis may occur with prior mild symptoms;
- appreciating the need to administer adrenaline without delay as soon as anaphylaxis occurs, before the patient might reach a state of collapse;
- awareness of the anaphylaxis procedures;
- how to check the allergies on SIMS;
- how to access the emergency AAls;
- who the appointed persons who have responsibility for helping to administer an emergency AAI are, and the policy and procedures on how to access their help; and
- practical instruction in how to use the different AAI devices available.

### **Access to First Aid**

Information concerning first aid arrangements will be given to all staff and pupils during induction training and lists of First Aiders and appointed persons will be available both electronically and displayed in hard copy in various locations around the Foundation.

### **First Aid Equipment**

The Foundation has made provision at each School site for first aid rooms/areas in line with the Education (School Premises) Regulations, which require every school to have a suitable room that can be used for medical treatment when required and for the care of pupils during school hours.

In respect of the boarding houses, Hope House and St Barnabas have a medical room and boarders at Scholars House all have their own individual en-suite room which can be used for medical treatment when required.

There are First Aid Kits available throughout the Foundation, including on school vehicles. All First Aid Kits will be clearly marked FIRST AID. Nominated members of staff will check first aid equipment such as First Aid Kits on a termly basis and replenish them as necessary. A First Aid Kit will be taken when pupils leave the school on organised trips or participate in sports activities, away from the main sites.

All medicines are stored and administered within guidelines laid out in the Foundation's Medicines Policy. Nominated members of staff will also ensure that any medicine held in school for pupils with medical conditions is available to appropriate members of staff for trips and that they are competent in administering this medicine.

### **Emergency First Aid Equipment**

#### *Automated External Defibrillators*

Automated External Defibrillators (**AEDs**) are located at Madingley, Rosedale House, next to the medical room and in the Sports Hall at the Senior School, the Stephen Perse 6th Form College, Dame Bradbury's and Latham Road. The AEDs will be tested by the relevant appointed person on a weekly basis in accordance with the Department for Education's "Automated external defibrillators (AEDs) - A Guide for

Schools” and the results recorded.

All qualified First Aiders have also been trained in the use of AEDs.

#### *Emergency salbutamol inhalers*

The Foundation has emergency salbutamol inhalers at six of the Foundation’s sites which are located as follows:

- Dame Bradbury’s (Front Office)
- Madingley (Main hall)
- Rosedale House (Medical Room and Brookside reception)
- Senior School (Medical Room and Staff Room)
- Latham Road pavilion (Staff Office)
- The Visual Arts Centre (the **VAC**) (disabled facilities)

#### *Emergency adrenaline auto injectors*

The Foundation has seven emergency adrenaline auto injectors (**AAIs**) which are located as follows:

- Dame Bradbury’s (Front Office)
- Madingley (School office)
- Rosedale House (Medical Room)
- Senior School (Staff Room)
- Latham Road pavilion (Staff Office) and
- The Visual Arts Centre (the **VAC**) (disabled facilities)
- The Stephen Perse Sixth Form College (Main Office)

Please see the Foundation’s Emergency Adrenaline Auto Injectors Protocol in Appendix 3 and Emergency Asthma Inhaler Protocol in Appendix 4 of the Foundation’s Supporting Pupils with Medical Conditions policy for further information. These protocols have been drafted by reference to the Department of Health ‘Guidance on the use of emergency adrenaline auto-injectors in schools’, September 2017 and ‘Guidance on the use of emergency salbutamol inhalers in schools’, March 2015.

Guidance on when to call an ambulance or access urgent medical care services can be found at Appendix 1 to this Policy below.

### **Accident Reporting**

All accidents and incidents requiring first aid should be reported and recorded in SIMS, on the Incident Report Form (**IRF**) where applicable and a notification sent to parents via InTouch. Incidents including those reportable under RIDDOR must also be logged through the management information system. Incidents reportable under RIDDOR also need to be reported through the IRF.

Please see the Foundation’s Accident, Incident and Near Miss Reporting Policy and Procedures for further information.

## Medical Care

This policy is limited to the provision of first aid, but the Foundation has arrangements in place for:

- dealing with pupils who have special educational needs or particular medical conditions (for example asthma, epilepsy, allergies and diabetes); and
- dealing with medicines and treatments brought to school for pupils.

Please also refer to the following Foundation policies and procedures:

First Aid Procedures (Appendix 2 to this policy)

Ill Health Procedures

Medicines Policy

Supporting Pupils with Medical Conditions Policy

**Reviewed:** August 2019

## Review History

Date of adoption of this policy	2 August 2019
Date of last review of this policy	2 August 2019
Date for next review of this policy	Summer Term 2020
Policy owner	Vice Principal 3-11
Authorised by	Operations Foundation Leadership Team and Heads of Schools

## APPENDIX 1

### Guidance on when to access urgent and emergency care services

#### NHS 111

Call NHS 111 if you are worried about an urgent medical concern.

NHS 111 advisers can also assess if an ambulance is required and will send one immediately if necessary.

#### 999

Call 999 in a medical emergency. Medical emergencies can include:

- loss of consciousness
- an acute confused state
- fits that are not stopping
- persistent, severe chest pain
- breathing difficulties
- severe bleeding that cannot be stopped
- severe allergic reactions, including anaphylaxis or suspected anaphylaxis
- severe burns or scalds
- Choking

An ambulance must be called for any episode of anaphylaxis requiring treatment with an AAI, any asthma attack in which the initial use of the pupils inhaler does not relieve the symptoms, any diabetic coma, any seizure or any medical emergency/injury requiring paramedic support (eg. Immobilisation).

In the event of a student requiring treatment at a hospital a member of Foundation staff will accompany the student until a parent/carer can reach the hospital.

**APPENDIX 2**  
**Practical arrangements at point of need**  
**Procedures**

**Accessing first aid**

If you need to contact a first aider please call:

- **Madingley** (Ext 5003)
- **Rosedale House** (Ext 2240)
- **Dame Bradbury's** (Ext 4003)
- **Senior School** (Healthcare Practitioner 07970852358/ Ext 1172) or the School Office (1156)
- **Stephen Perse Sixth Form College** (Ext 3432)
- **CCSS Nurse primarily based at Hope House** (07810318461 in the first instance or Ext 7950)

**Pupil Illness**

If a pupil feels unwell, it is the responsibility of the class teacher or member of staff on duty in the first instance to try to establish the cause. The member of staff (or a pupil if deemed appropriate) should escort the pupil to the appointed person who will inform the appropriate responsible adult. The nominated member of staff will decide whether to contact the child's parents and send the child home.

**Boarders**

**Procedures for dealing with boarding students who are sick during College hours**

If a student is not well enough to attend College they should speak to the house staff at the 7.30am welfare check. The house staff will inform the Nurse who will visit the student/contact them. The Nurse will contact the relevant school office to inform staff of any students who have reported sick.

If a boarder is reported absent from class, the office will ring the student and/or house staff and if they say they are sick, the Nurse will be informed. The Nurse will communicate the outcome (e.g. student coming in to College, student ill in bed, student going to doctors etc) to the College office in due course and the information will be updated in SIMS.

The Nurse will speak to the student to assess his or her needs, treat the student as appropriate and will keep in contact as necessary (either by regular phone contact or by visiting the house). The Nurse will remind the student to let her/him, house staff or the College office know if symptoms worsen. The student will also be reminded to stay in the house that evening. If necessary the Nurse will make a doctor's appointment for the student and, if they are too ill to go unaided, accompany them if requested. Students have access at the surgery to either a male or female doctor.

The Nurse will update the house staff/College office staff. House staff will check on ill students during the course of the day, in the evening and at curfew time, and will provide food and drink as necessary, depending on the severity of the illness. At the end of each day, the Nurse will contact the boarding house to let them know which students have been signed off sick from lessons. As all boarding students

are housed in single rooms with their own bathrooms, there is no designated sick room in the boarding houses. However, if a student should need to be isolated, arrangements can be made.

If a student requires a GP appointment and they are aged 16 years or younger they will be accompanied, ideally by the Nurse. If the Nurse is unavailable another member of staff will accompany them to the appointment.

During College hours, any boarding student who is told by the doctor to go to the hospital or who is involved in an accident will be taken by the Nurse or another designated member of staff by taxi, unless an ambulance is called. The member of staff will stay with the student at least until they have been seen by the doctor, had x-rays or other assessments and been admitted to a ward. The member of staff will communicate with the Head of Boarding to determine who should ring parents and to decide who will visit during the evening/provide support to the student during their stay in hospital.

Students should never be told to make their own arrangements for emergency treatment and should always be accompanied by a member of Foundation staff.

#### **Boarding students who become ill during the evening or weekends**

If a student is unwell during these times, they should let the house staff know as soon as possible.

The doctor's surgery is open from Monday to Friday from 8.30 – 6.00 Monday to Friday and 8.30-12.00 on Saturday for pre-booked appointments only. Outside these times, if the house staff and student feel that the problem cannot wait they should call 111. NHS Direct Cambridge will usually get a doctor to call back and speak to the patient and then give advice on what to do next. If they advise hospital treatment the house staff should immediately speak to the Head of Boarding to decide which member of Foundation staff should accompany the student to the hospital. Procedures then follow the pattern above.

If a student obviously needs emergency treatment, the house staff should ring 999 for an ambulance and ring the Head of Boarding as soon as possible. If a student receives treatment at the hospital during the evenings or at weekends, the Nurse should be informed on the next working day.

#### **“Gillick” competence**

“Gillick competence” is used in medical law to determine whether a child (aged 15 or younger) is able to consent to their own medical treatment without the need for parental permission or knowledge. A child will be deemed “Gillick competent” if they have sufficient age and understanding to make an informed decision, including both the nature and the implications of that decision. A student aged 16 years and above will be assumed to be competent and therefore 6th Form students (i.e. those aged 16 or over) may give or withhold their own consent for medical treatment. Although there is no lower age limit for Gillick competence to be applied, it would rarely be appropriate or safe for parents not to be involved in decisions relating to a child of under 12. The Foundation will therefore assess the competence of any students aged under 16 on a case by case basis, with reference to the facts and in accordance with the

test for Gillick competence. A student who is deemed to be “Gillick competent” may also give or withhold their own consent for medical treatment.

### **Spillage of Bodily Fluids**

For any spillage of bodily fluids (eg bleeding, vomiting or other), the Maintenance Team is to be contacted immediately. They will arrange for the spillage to be cleaned up. Disposable gloves must be worn when dealing with such spillages.

### **Protecting from Blood-Borne Viruses**

The Foundation aims to prevent or control the risks to staff from blood-borne viruses (BBVs) that they may encounter during the course of their work, the main viruses of concern being human immunodeficiency virus (HIV, which causes AIDS), Hepatitis B virus and Hepatitis C virus. BBVs are carried in the blood of infected people (it is possible for a person to be infected but be unaware of it). They are also carried in other body fluids. Some Bodily fluids such as saliva and urine and may contain one or more of the viruses but are unlikely to be an infection risk unless they contain visible blood.

### **Risk Assessment and Control**

Tasks where staff could be exposed to BBVs will be assessed and controls introduced to eliminate or reduce the risks to the lowest reasonably practicable level. The findings of these risk assessments will be communicated to the staff concerned and training in the use of the control measures will be provided. The procedures that should be followed if a member of staff is exposed to blood that may contain a BBV will also be explained.

- Staff identified as being particularly at risk from Hepatitis B virus may be vaccinated.
- Where risks from BBVs cannot be reduced to acceptable levels by other means, staff will be provided with suitable personal protective equipment and trained in its use.
- All potentially infected materials and equipment (e.g. clinical waste, soiled clothes, syringes and needles) will be identified and arrangements made for them to be handled and disposed of safely.
- All needle-stick injuries, puncture wounds and incidents involving exposure to blood or bodily fluids will be investigated by Management and the relevant risk assessments reviewed and, if necessary amended.

***All staff are responsible for using the control measures described in the risk assessments for tasks that they carry out.***

### **Procedures**

Where there is a risk of exposure to blood or bodily fluids, equipment or materials contaminated with these, the following precautions must be adopted:-

- cover all cuts, sores, chapped skin or other open wounds with a waterproof dressing;
- when collecting abandoned sharp's always wear gloves;
- wherever possible, use litter tongs to pick up rubbish and abandoned sharps;

- when litter picking, wear safety boots; place discarded sharps in a yellow sharps box. When three-quarters full, yellow sharps boxes must be disposed of as contaminated waste by a licensed waste carrier;
- do not use teeth when putting on/removing gloves;
- wear disposable gloves when administering first aid;
- pull off gloves so that they are inside out;
- hands must be washed with soap before and after applying dressings;
- hands and other parts of the body must be washed immediately with soap and water after contact with blood, other bodily fluids and after removing gloves;
- blood and bodily fluids (except urine) should be cleaned up by using absorbent materials and a solution of one part bleach to ten parts water; N.B. DO NOT use bleach on urine spillages - use soap and water;
- when handling needles and other sharp equipment take care to avoid accidentally cutting or piercing the skin. Used needles must be placed immediately into a sharps container found in medical room and disposed of by incineration;
- if a needlestick injury or puncture wound occurs or you come into contact with blood or bodily fluids that may contain a BBV, please seek advice from the Healthcare Practitioner in the first instance.

#### **Needlestick or Sharps Injury Protocol**

If a needlestick injury or puncture wound occurs or you come into contact with blood or bodily fluids, the procedure below should be followed:

- Encourage cuts and wounds to bleed.
- Wash the affected area thoroughly with soap and running water.
- After bleeding the wound and holding under running water, if available, clean the affected area with a Mediswabs or medicated hand wash.
- If mucous membrane or eyes are affected, wash the affected area with copious quantities of running water.

Attend the nearest hospital Accident and Emergency Department immediately and advise the following information:

- the date, time and location of the incident;
- a description of the incident.

***As soon as possible report the incident following the Incident Reporting Procedure.***