

# St George's School, Windsor Castle

## First Aid and Health Care Policy



This is a whole school policy and includes the EYFS.

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## **1 INTRODUCTION**

1. This document is intended to be a guide to good practice in the school and give a number of guidelines for dealing with the most problems which may require first aid.
2. The Head Master and Governors are responsible for the health and safety of pupils and employees whilst at St George's School. Proper provision for adequate and appropriate training and guidance to staff is part of that responsibility. The teachers and matrons are expected to use their best endeavours at all times to secure the welfare of pupils at school, in the same way that parents might be expected to act towards their own children.
3. St George's School currently has one full time resident matron, one full time non-resident matron. At least one matron is on site at all times when the school is in residence. The matrons are responsible to the headmaster and the school doctor, for the health and welfare of all the children in the school.
4. Matrons in conjunction with the school doctor and the house parents, see to all health and welfare matters of the boarders. Any boarder who is too ill to attend school is cared for in the boarding area by the matrons, goes home to recuperate or may be seen at South Meadow surgery or referred to hospital for further assessment.
5. The matrons provide first aid and basic medical care for all day pupils. In an emergency the matrons may recommend transfer to hospital before parents have been contacted but otherwise they would contact the families of any child taken ill at school, and/or contact the school doctor for advice, care for sick or injured children while they wait to be collected, and offer support, encouragement and a sympathetic ear where needed to all pupils.
6. All staff have a duty of care to the children in the school. Staff must be prepared to render assistance in an emergency, summon help for, or send a child to help when they are injured, sick or upset. If approached by a pupil with a problem or concern, it is to be expected that all staff will be supportive, helpful and sympathetic.
7. All pupils at the school will have a medical form completed on arrival at school. Within the form is a section for consent to have emergency treatment and the administration of first aid at school or on a school outing. This is compulsory for all pupils as it would be unsafe to have children on the premises without this consent. It is the responsibility of the parent to update the school on any new conditions and any changes in current conditions including treatment. This is also stated on the form.

## **2 EMERGENCY PROCEDURE**

- In the case of serious injury or illness, an ambulance should be called without delay even if there is some uncertainty as to the nature of the problem. The matrons and/or school doctor can always be consulted after this if needed, but this should NOT delay the call in any emergency.
- If staff are on their own, they should always try and summon help by any means available, e.g. send a person (or pupil) to get help, phone, radio.

- The Head Master or the most senior member of staff on the premises at the time must be informed as soon as possible. The duty teacher at the time must also be informed.
- Staff should stay with the child at all times, (except if they have to leave the child to summon help first).
- The person in charge at the time should ensure they have accurately described their location, and that another member of staff has made arrangements to direct the ambulance/assistance to the required location.
- If a matron is not able to travel in the ambulance with the child, (and their parents are not present), ensure that a member of staff travels with them. If possible this should be someone the child knows.
- If the child's parents are not present they must be informed at the earliest opportunity.
- Where the injury is not serious enough to warrant an ambulance, boarders should be driven to the most appropriate emergency facility by car. The parents of day children should be contacted, and if possible collect the child. If this is not possible or would involve an unacceptably long wait, the child should be taken to the emergency facility by the school and the parents meet the child there

### **3 FIRST AID**

1. This is not a first aid manual. First aid information is available in the surgery and on guidance cards in each of the school's first aid kits.
2. First aid kits are provided for all out of school trips.
3. School trips travelling overnight, where no other medical cover is provided, may also carry a small supply of basic medicines, provided an adult in the party is responsible for issuing it, recording and security. All relevant written permission must have been provided first. It is the responsibility of the trip leader to obtain all the relevant permissions.
4. It is primarily the responsibility of the parents to provide sun protection for their children, however in exceptional circumstances, sun protection will be provided for children if needed.
5. Anyone treating a person where there is loss of blood or body fluids should wear gloves for their own protection.
6. Any child requiring observation for head injury in the surgery/care of the matrons should have a head injury instruction note go with them when they go home. They should also not play any sport for that day and in the event of a loss of consciousness or concussion not before the school doctor gives permission to do so.

#### **4 FIRST AID KIT LOCATIONS**

- FRONT DOOR
- SURGERY
- SCIENCE LABS AND PREP ROOM
- SWIMMING POOL – IN THE OUTER VESTIBULE
- DESIGN AND TECHNOLOGY DEPARTMENT
- PRE PREP KITCHEN
- KITCHEN OFFICE
- PAVILION – IN THE FIRST BACK ROOM ON THE SHELF
- ALL MINI BUSES
- OLD BANK HOUSE – BY THE FRONT DOOR
- FOOD TECHNOLOGY CLASSROOM
- MAINTENANCE SHED

#### **5 MINOR AILMENTS**

- It is inevitable that some children will become ill while at school. Any child who becomes ill while at school should be sent, or if necessary taken, to see a matron.
- The matron will assess the child and determine the best course of action.
- Matrons should always take a full history of the problem taking into account other factors such as other illnesses and allergies. Matrons should then examine the child and assess all factors which may be associated e.g. appearance, temperature, rash.
- Matrons may give medication to boarders at their discretion, within the guidelines laid down by the school doctor and with the prior consent of their parent/guardian.
- Other than medication prescribed by the school doctor, written parental consent must be given before any child is given medication by the school. Only in exceptional circumstance of urgent medical need will verbal or e-mail consent be accepted. Where a condition is life threatening, medication can be given as needed without consent, in accordance with the school allergy policy (see point 6) or doctor's instructions.
- Before giving medication to anyone always read the dispensing instructions and check they have no relevant allergies.
- Day children who are too unwell to continue in school should be sent home at the earliest opportunity. Boarders who are too unwell to continue in school should be kept upstairs in the boarding area. If they require further attention the school doctor should be consulted especially if it is deemed necessary to send them home out of normal school routine. Matrons may also stop children from doing games and/or swimming, and choristers from singing if they deem them to be unfit for these activities.
- When in any doubt about the seriousness of the child's condition matrons should ring the school doctor for advice.

## 6 SERIOUS CONDITIONS

- Any child who is unwell should be sent to see a matron or a matron should be summoned to see the child.
- Serious injuries/accidents, illness or emergency condition e.g. seizures, hypoglycaemia, collapse when discovered, should be treated in accordance with emergency procedures unless the emergency is deemed to have passed in which case advice from matron and the school doctor should be sought as to the continued care of the pupil/member of staff.
- Any case of a serious illness or allergic reaction must be recorded in the surgery log book and the headmaster or the most senior member of staff and the school doctor should be informed as soon as possible.

### ACUTE ALLERGIC REACTION

(for full policy on anaphylaxis please refer to Anaphylactic Protocol Policy in the School Handbook):

### IMMEDIATE TREATMENT

- **Stay calm, call for help**
- **Administer adrenaline without delay (Epipen/Jext/Emerade) if you believe the symptoms are serious**

**Do not be afraid to offer adrenaline. The dose contained in the pen has very few side effects, which will pass quickly in any case. It has been used for a long time. It is a very reliable and well understood drug.**

- **Put the person in a sitting position to help breathing difficulties.**
- **Call an ambulance – if it has not been called already, arrange for someone to meet it at the gate**
- **Contact Matron – if not already on her way**

## 7 ASTHMA AND ALLERGIES

1. A list of all known children in the school with asthma, on treatment, allergies and other relevant medical information is to be found in the surgery, on the Public School server in the MEDICAL folder and in the school office. In addition; a list of food allergies and sensitivities is posted in the school kitchens. Individual protocols are stored on the Public School server in the MEDICAL folder, in the surgery and relevant protocols are posted in the school kitchens.
2. Inhalers for asthma are kept in the surgery, pre-prep kitchen or nursery classroom depending on the age of the pupil. From the age of 10 a pupil may keep an inhaler on their person once a risk assessment has been made as to their understanding of the treatment, it's use and the safety of their medication. The storage of the inhaler should form part of the risk assessment. Individual's auto injectors (EpiPens/JextEmerade) for the treatment of anaphylaxis are stored where it is most appropriate, depending on the child's age and what they are allergic too. There are school auto injectors in the school kitchen, the sports

pavilion, Old Bank House and the pre-prep kitchen. Every child who is at risk of such a reaction has an individual protocol with the location of their medication clearly marked. Children over the age of 10 may keep their auto injector(s) on their person once a risk assessment has been made as to their understanding of the treatment, its use and the safety of their medication. The storage of the auto-injector should form part of the risk assessment.

3. If a child's condition precludes certain types of physical activity the matron will inform the relevant staff both verbally and in writing.
4. Boarders and day children who need to take regular medication come to the surgery for this except for pre-prep children who may be given their medication by the form teachers, depending on the kind of medication, the quantity and frequency it is to be given.
5. Boarders with asthma, have regular asthma reviews with the school doctor.

## **8 SPORTS AND OTHER INJURIES**

- If in any doubt about the seriousness of the injury, staff should call for a matron, call an ambulance and/or seek medical advice from the school doctor or the hospital BEFORE moving.
- Children must be reassured and comforted whenever they are injured, but should also be encouraged to view injuries realistically. If the injury is serious it will not heal overnight and may take a long time to heal fully.
- Injuries are not confined to the sports field. No matter where the injury happens the member of staff dealing with the child should be satisfied that the injury did not occur as a result of any deliberate act to cause harm to the child, negligence by a member of staff or because of defective equipment or the fabric of the building. If the member of staff does suspect the injury was the result of any of the aforementioned, then he or she must ensure that the problem is reported to the relevant department head.
- All injuries and accidents must be recorded in the surgery log book. Serious injuries and accidents (see point 16 for definition) must also be recorded in the accident book.

## **9 HOSPITALISATION**

- Matrons should notify the next of kin as soon as possible.
- Any medication the child is taking, or may need, such as an inhaler, should be taken to the hospital.
- Matrons and staff should never convey to the child any fears they may have about the child's condition.
- Matrons and staff should always take the child's telephone contact numbers with them, and the contact numbers for the school.

- Matrons/staff should stay with the child at all times, unless it is not medically possible, until the child's parents arrive or they are discharged into their parent's/guardian's care. When parents arrive ensure they are happy for the school staff to go before actually leaving.
- Emergency visits - Be aware that Hospital Accident & Emergency Departments (A&E) are not always a child friendly environment. Staff should always take money in case of need.
- Admission - Consult with the child's parents about the possibility and advisability of the child's friends visiting them in hospital.
  - Keep the school informed about the child's progress.
- Matrons should always inform the school doctor about any hospital admission or visit to A & E.

## **10 SCHOOL DOCTOR**

1. All boarders must be registered with the school doctor.
2. The doctor visits the school once a week, in addition boarders may see the doctor at the surgery, at the castle surgery or the doctor may come in to school in an emergency outside the regular visit.
3. The matron can contact the school doctor or their deputy at any time, if there is any concern about a child's health.
4. All boarding pupils will have a medical with the school doctor when they enter the school. Written parental consent for the medical is mandatory and parents are strongly encouraged to attend. The doctor prepares a written report for the parents and a copy is kept at school by matron while they attend the school.
5. The doctor works closely with the school and especially the matrons, on matters affecting the health and welfare of the pupils whilst they are in the school.

## **11 MEDICAL, DENTAL AND OPTICAL CARE**

1. Any child who sustains a serious medical, dental or optical injury or illness will be cared for in accordance with the 'Emergency Procedure' as listed in point 2.
2. Day Pupils' ongoing and routine medical, optical and dental care is the responsibility of their parents or guardians.
3. Boarders' ongoing and routine optical and dental care is the responsibility of their parents or guardians.

## 12 FIRST AID TRAINING

Miss Katy Mason and Mrs Yvonne Judge are trained on a course approved by the Health and Safety Executive (HSE): a three day 'First Aid at Work' qualification, as provided by St John's Ambulance.

In addition to the School Matrons' specialised first aid training, the school encourages many of its staff to undergo first aid training. Pre-prep staff undertake paediatric first aid courses. The list of first aid trained staff is held in staff rooms, School Office, Bursary and Surgery.

All teachers and selected other staff are expected to undergo a basic 'Emergency Aid in Schools' level of training, and to 'top-up' their knowledge and skills on a three-yearly basis. All staff who undertake swimming sessions with the children at the school's indoor pool will undertake a one day STA course of Life Saving. This is additional to the First Aid knowledge and skills gained on any other course. A two-yearly 'top-up' is a requirement for all the staff connected with swimming.

### First Aid at Work

Mason	Katherine	1600004543	06/01/19	St Johns Ambulance
Judge	Yvonne		10/04/17	St Johns Ambulance
Giani	Danny	161499-FA1	05/06/2017	British Red Cross

### Paediatric Emergency First Aid

Abigail Bowler	04/09/2018	780677	QA L3
Kelly Brown	04/09/2018	780681	QA L3
Summer Butt	04/09/2018	780675	QA L3
Lesley Flanagan	04/09/2018	780683	QA L3
Carolina Leleu	27/02/2018		QA L3
Rebecca Mansbridge	04/09/2018	780679	QA L3
Katherine Mason	14/11/2017	1400311052	St Johns 12 Hrs
Louise McDade	21/03/2018		
Tessa Novelli	04/09/2018	780689	QA L3
Louise Pollock	04/09/2018	780687	QA L3
Jayne Robbins	09/10/2016	1300275714	
Jenny Stow	04/09/2018	780685	QA L3
Jonathan Onions	01/01/2017		
Allison Onions	01/01/2017		
Helen Dewar	29/07/2017	FSFA/140729/03	ITC Forest School 16 hr First Aid

### First Aid QA L2 Training 4 Jan 2016

		Cert No	Expiry
Amankwah	Gillian	896155	04/01/2019
Crew	Caroline	896219	04/01/2019
Esakkah	Bozena	896143	04/01/2019
Flieger	Manuela	896223	04/01/2019
Foran	Colin	896161	04/01/2019
Goble	Emma	896147	04/01/2019
Holborough	Zoe	896225	04/01/2019
Kenworthy-Brown	Georgina	896163	04/01/2019
Lambert	Rachel	896221	04/01/2019
Lewis-Weedon	Beverley	896217	04/01/2019
Marshall	Peter	896153	04/01/2019
Roberts	Peter	896149	04/01/2019
Rumbell	Gary	896151	04/01/2019
Saunders	Sally	896145	04/01/2019
Smith	Clare	896229	04/01/2019
Squire	Louise	896159	04/01/2019
Tombs	Kathryn	896231	04/01/2019
Wilkinson	Natalie	896157	04/01/2019

**First Aid as part of National Rescue Award renewal 03/09/2017**

Kevin Wills  
Patrick Wright  
Allison Onions  
Henry Mitchell  
Lindsay Barlow

**Sports First Aid St John Ambulance renewal 10/02/2019**

Maria D'Amaro

**13 DISABILITIES AND CHRONIC CONDITIONS**

- The school may include individuals with mild disabilities and chronic conditions and illnesses.
- Before such a child was offered a place at the school, the implication and practicalities may be discussed with the registrar and the parents, this discussion may also include the headmaster, the matron and the school doctor.
- A protocol for the child, taking into account that child's specific abilities and limitations will be drawn up by Matron, in consultation with the child's parents and where necessary the school doctor and/or the child's medical practitioners.

**14 BLOOD AND BODY FLUID SPILLAGE**

The responsibility for cleaning up blood and body fluids is divided between the housekeeping and maintenance staff, and the pastoral and teaching staff. During normal school hours the responsibility lies with the matrons and cleaning staff. When the school is closed to pupils, the responsibility lies primarily with the housekeeping and maintenance staff. During term time, but out of normal school hours and during any chorister 'stay on', the primary responsibility rests with the pastoral staff and duty staff. A Body Fluid Disposal kit is available in the school surgery and Old Bank House, side entrance lobby.

Clean-Up Procedure for spilled bodily fluids is to be found in the Health Care Policy, in the School Hand Book.

A Body Fluid Disposal kit is available in the school surgery, Old Bank House, school mini buses and in first aid kits taken on out of school activities.

Clean-Up Procedure for spilled bodily fluids (blood, vomit, urine, faeces) on hard surfaces.

1. Wear gloves (preferably disposable) made with impervious material, ensure the gloves are not torn in any way. Gloves and disposable aprons are available from Matron
2. Blot excess fluid using paper towel or toilet tissue. Do not use mops.
3. Wash the area with a generous quantity of Milton solution (1 Milton tablet to 2 litres of water). Available from Matron.
4. Using fresh paper, blot the area to remove the Milton.

5. Leave a warning sign that the area should not be used until it is dry. Warning signs available from the kitchen.
6. Place all the used paper, apron and disposable gloves in a sturdy leak-proof plastic sack and dispose of immediately in the general waste bin by the front gate.
7. Wash your hands thoroughly.

Clean-Up Procedure for spilled bodily fluids (blood, vomit, urine, faeces) on soft surfaces.

1. Wear gloves (preferably disposable) made with impervious material, ensure the gloves are not torn in any way. Gloves and disposable aprons are available from Matron
2. Blot any excess fluid using paper towels or toilet tissue.
3. Use fluid absorption powder, according to the directions on the container (available from Matron) to remove any remaining fluids and any solid matter.
4. Place all paper, gloves, aprons and any waste products, in a sturdy, leak-proof plastic sack and dispose of immediately in the general waste bin by the front gate.
5. Wash your hands thoroughly.
6. Leave a warning sign that the area should not be used until it is dry. Warning signs available from the kitchen.
7. If any stains remain, as soon as is practical, request that any affected carpet or furnishing is cleaned or replaced.

## **15 ABSENCE FROM SCHOOL**

The names of children who are off school because they are unwell and children who are excused games, PE, and swimming are held by the school office.

## **16 RECORD KEEPING, REPORTING AND MEDICATION STORAGE**

- A daily logbook is kept in the surgery and must be filled in every time a child is seen, even if no treatment is given and no matter how minor the treatment. This book should at all times be filled in using plain language avoiding jargon. The book is colour coded and these colours for filling in entries should be adhered to. Serious accidents and any resulting injury must be recorded in the accident book. A serious injury is deemed to be any injury that cannot be fully treated on site by school staff.
- Parents must be informed as soon as possible regarding any injury deemed to be serious as defined in the criteria above. When or if parents are informed regarding minor injury will be determined by the matron and/or school doctor, taking into consideration the seriousness of the injury, the child's age, the need for on-going care and the reaction of the child to the injury. For EYFS children, parents and/or carers are informed on the same day of any first aid treatment given for all reported accidents or injuries. These incidents are recorded on an Accident/Injury report form, logged in a book for this use and the top copy of the form is given to the parent/carer when the child is collected. The form contains a description of the incident and any action taken and is in addition to any verbal handover that may be given.
- Boarders are the patients of the school doctor and their medical records are kept at the doctor's surgery.

- All boarders are weighed and measured four times a year.
- Medicines should be stored in a locked cupboard unless they need to be kept refrigerated in which case they should only be kept in the refrigerator in the surgery which is kept locked when the matron is not there
- Children who are deemed to be 'Gillick Competent' may self-medicate, where it is necessary or desirable to do so. Their competence to do so will be assessed by the matron in consultation with the school doctor and a risk assessment undertaken with the child
- Adrenaline auto-injectors can be carried on the person with appropriate risk assessment, in the designated cupboard in the school kitchen or in the specific form room for the appropriate pupil, out of reach of the pupils
- Where any accident meets the criteria, it must be reported to RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995). Reporting can be done on line, by phone or by post, all relevant forms can be down loaded from <https://www.hse.gov.uk/forms/incident/index.htm> In most instances the report would be sent by the Business Director.
- We will notify local child protection agencies of any serious accident or injury to, or the death of, any child while in our care and will act on any advice from those agencies.
- The following occurrences must be reported:-
  1. Death.
  2. Major injuries.
  3. Workplace Injuries– where an employee or self-employed person is away from work or unable to perform their normal work duties for more than 3 consecutive days.
  4. Injuries to members of the public or people not at work where they are taken from the scene of an accident to hospital.
  5. Some work-related diseases.
  6. Dangerous occurrences – where something happens that does not result in an injury, but could have done.
- Further information about how and when to report an incident can be found at:- <http://www.hse.gov.uk/riddor/riddor.htm#>

## **17 RISK ASSESSMENTS**

Individual risk assessments are posted in the school, covering each area and classroom. Copies of all the risk assessments are stored in the Business Director's office..

Reviewed by: KM & JKB

Revised: Sept 2016

Next Review: Michaelmas 2017