

## **First Aid Policy**

## St. Francis' College

January 2024

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#### 1 Aims

- 1.1 This is the first aid policy for pupils of St. Francis' College (**College**).
- 1.2 The aims of this policy are as follows:
  - 1.2.1 to provide a culture of safety, equality and protection;
  - 1.2.2 to ensure that the College has adequate, safe and effective First Aid provision in order for every pupil, member of Staff and visitor to be well looked after in the event of any illness, accident or injury;
  - 1.2.3 to ensure that all Staff and pupils are aware of the procedures in the event of any illness, accident or injury.

#### 2 Scope and application

- 2.1 This policy applies to the whole College including the Early Years Foundation Stage (EYFS) and Boarding.
- 2.2 This policy applies at all times when the pupil is in or under the care of the College, that is:
  - 2.2.1 in or at College;
  - 2.2.2 on College-organised trips;
  - 2.2.3 at a College sporting event.
- 2.3 This policy shall also apply to pupils at all times and places in circumstances where failing to apply this policy may:
  - 2.3.1 affect the health, safety or well-being of a member of the College community or a member of the public; or
  - 2.3.2 have repercussions for the orderly running of the College.
- 2.4 Nothing in this policy should prevent any person from contacting the emergency services in the event of a medical emergency. For the avoidance of doubt, Staff should dial 999 for the emergency services in the event of a medical emergency before implementing the terms of this policy and make clear arrangements for liaison with ambulance services.

#### 3 Regulatory framework

- 3.1 This policy has been prepared to meet the College's responsibilities under:
  - 3.1.1 Education (Independent College Standards) Regulations 2014;
  - 3.1.2 Statutory framework for the Early Years Foundation Stage (DfE, September 2021);
  - 3.1.3 Education and Skills Act 2008;
  - 3.1.4 Childcare Act 2006;
  - 3.1.5 Equality Act 2010;
  - 3.1.6 Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013
  - 3.1.7 Data Protection Act 2018 and General Data Protection Regulation (GDPR);

- 3.1.8 Health and Safety at Work etc. Act 1974; and
- 3.1.9 Health and Safety (First-Aid) Regulations 1981.
- 3.2 This policy has regard to the following guidance and advice:
  - 3.2.1 Automated external defibrillators (AEDs): a guide for Colleges (DfE, June 2017); updated Sept 2022
  - 3.2.2 Guidance on the use of emergency salbutamol inhalers in Colleges (Department of Health, March 2015);
  - 3.2.3 Guidance on the use of adrenaline auto-injectors in Colleges (NHS Choices);
  - 3.2.4 Guidance on first aid for Colleges (DfE, February 2022);
  - 3.2.5 Incident reporting in Colleges (accidents, diseases and dangerous occurrences): guidance for employers (Health and Safety Executive (HSE) EDIS1 (revision 3), October 2013);
  - 3.2.6 First aid at work: the Health and Safety (First-Aid) Regulations 1981 guidance on Regulations (2013);
  - 3.2.7 Workplace first aid kits. Specification for the contents of workplace first aid kits, BS 8599-1:2011, (2011).
- 3.3 The following College policies, procedures and resource materials are relevant to this policy:
  - 3.3.1 Retention of Records Policy
  - 3.3.2 Boarding House Infectious Diseases Policy
  - 3.3.3 Care of Boarders Who Are Unwell Policy
  - 3.3.4 Chronic Conditions and Disability Boarding House Policy
  - 3.3.5 Medical Emergencies Boarding House Policy
  - 3.3.6 Non Prescription Medication Boarding House Policy
  - 3.3.7 Procedures for pupils with medical conditions such as asthma, epilepsy, diabetes (Appendix 8)
  - 3.3.8 Procedure in the event of illness; Appendix 9
  - 3.3.9 Procedures in the events of an accident or injury; Appendix 2 & 3.

#### 4 Publication and availability

- 4.1 This policy is published on the College website.
- 4.2 This policy is available in hard copy on request.
- 4.3 A copy of the policy is available for inspection from the PA to the Senior Deputy Head (Education) and Deputy Head (Operations) during the College day.
- 4.4 This policy can be made available in large print or other accessible format if required.

#### 5 **Definitions**

- 5.1 Where the following words or phrases are used in this policy:
  - 5.1.1 References to **Appointed Persons** mean members of staff who are not qualified First Aiders but who are responsible for looking after the First Aid equipment and facilities and calling the emergency services if required References to **First Aid** means the treatment of minor injuries which do not need treatment by a medical practitioner or nurse as well as treatment of more serious injuries prior to assistance from a medical practitioner or nurse for the purpose of preserving life and minimising the consequences of injury or illness. For the avoidance of doubt, First Aid does not include giving any tablets or medicines, the only exception being giving aspirin in accordance with accepted First Aid practice to treat a suspected heart attack.
  - 5.1.2 References to **EFAW** means Emergency First Aid at Work.
  - 5.1.3 References to **FAW** means First Aid at Work.
  - 5.1.4 References to PFA means Paediatric First Aid.
  - 5.1.5 References to SFA means Sports First Aid.
  - 5.1.6 References to **First Aiders** mean the members of staff who have completed an approved First Aid course and hold a valid certificate of competence in FAW, EFAW, PFA and SFA or an approved alternative qualification which has been identified in place of FAW, EFAW, PFA and SFA which meets the requirements of the First Aid Guidance.
  - 5.1.7 References to **First Aid Guidance** is the guidance identified at paragraph 3.2.
  - 5.1.8 References to First Aid Personnel means First Aiders or Appointed Persons or both.
  - 5.1.9 References to **RIDDOR** are to the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (SI 2013/1471).
  - 5.1.10 References to **Staff** means any person employed by the College, volunteers at the College and self-employed people working on College premises.
  - 5.1.11 References to **College Nurse(s)** mean Sara Hall and Megan Rankin who are primarily located in the College's Health Centre. The **Health Centre and Prep Medical Room** are used for the provision of medical including First Aid, when required and contains essential First Aid facilities and equipment. As far as is possible, the College reserves this room exclusively for giving medical treatment. The Health Centre is located in Room 104and is clearly signposted and identifiable with a College nurse door sign. The Prep Medical Room is found in room P14. They are used for the provision of medical treatment, including First Aid, when required.

## 6 Responsibility statement and allocation of tasks

- 6.1 The Proprietor has overall responsibility for all matters which are the subject of this policy.
- 6.2 To ensure the efficient discharge of its responsibilities under this policy, the Proprietor has allocated the following tasks:

Task	Allocated to	When / frequency of review	
Keeping the policy up to date and compliant with the law and best practice	Senior Deputy Head (Education), College Nurses and Deputy Head (Operations)	As required, and at least termly	
Monitoring the implementation of the policy, relevant risk assessments and any action taken in response and evaluating effectiveness.	Senior Deputy Head (Education) and Deputy Head (Operations)	As required, and at least termly	
Seeking input from interested groups (such as pupils, staff, parents) to consider improvements to the College's processes under the policy	Head, Deputy Head (Operations) and Senior Deputy Head (Education)	As required, and at least annually	
Maintaining up to date records of all information created in relation to the policy and its implementation as required by the GDPR	Senior Deputy Head (Education)	As required, and at least termly	
Formal annual review	Head/Deputy Head (Operations)	As required, at least every 2 years	

- 6.3 The Head has formal oversight of the administration of First Aid within the College, which in turn is delegated to the Senior Deputy Head (Education), including:
  - 6.3.1 ensuring that there is adequate First Aid equipment, facilities and First Aid Personnel available to the College and on site at all times;
  - ensuring that Staff have the appropriate and necessary First Aid training as required and that they have appropriate understanding, confidence and expertise in relation to First Aid;
  - 6.3.3 ensuring that the medical information and consent forms and up to date medical information for each pupil is collated and that the forms and information are accessible to staff as necessary;
  - 6.3.4 monitoring and carrying out regular reviews of the College's systems and management of First Aid and medical welfare, including any trends in accidents, injuries and illnesses at the College, in order to identify whether a change in welfare practice is needed to ensure that the College's First Aid provision is appropriate.
- The Head may delegate duties as appropriate to the College Nurse and other members of staff who have received training in accordance with this policy.

#### 7 First Aid provision in the College

- 7.1 There will be at least one First Aider on each College site when children are present. <sup>1</sup> Also in the Early Years Foundation Stage (EYFS) setting at least one person who has a current paediatric First Aid certificate<sup>2</sup> must be on the premises at all times when children are present.<sup>3</sup> On outings including children from the EYFS there must be at least one person who has a current paediatric First Aid certificate.<sup>4</sup>
- 7.2 An up-to-date list of First Aiders including those who hold paediatric First Aid certificates can be found in Appendix 6.
- 7.3 The main duties of First Aiders are to give immediate First Aid to pupils, Staff or visitors when needed and to ensure that an ambulance or other professional medical help is called when necessary. First Aiders are to ensure that their First Aid certificates are kept up to date through liaison with the PA to Senior Deputy Head (Education) and Deputy Head (Operations). St John's Ambulance is our preferred training provider.
- 7.4 First Aiders will undergo updated training at least every three years to maintain their qualification.
- 7.5 All Staff should read and be aware of this policy, know who to contact in the event of any illness, accident or injury and ensure this policy is followed in relation to the administration of First Aid. All Staff will use their best endeavours, at all times, to secure the well-being and welfare of the pupils.

#### 8 Risk assessment

- 8.1 The Head has overall responsibility for ensuring that the College's first aid needs are adequately risk assessed and for ensuring that the relevant findings are implemented, monitored and evaluated.
- 8.2 Day to day responsibility to carry out risk assessments will be delegated to The Senior Deputy Head (Education) who in turn will delegate to the Pastoral Team including the College Nurse who have been properly trained in, and tasked with, carrying out the particular assessments required.
- 8.3 Factors which may be taken into account in assessments may include:
  - 8.3.1 required First aid provision for Staff, pupils and others;<sup>5</sup>
  - any specific first aid, medical or health needs that may affect the College community or its members e.g., if those with specific medical conditions or known allergies;
  - 8.3.3 the hazards and risks associated with the College's operations and activities;
  - 8.3.4 any changes to the College's activities or operations;
  - 8.3.5 any relevant history of accidents;

 $<sup>^{1}</sup>$  ISI Handbook suggests this is best practice in respect of all independent Colleges (see paragraph 148 ISI Handbook)

<sup>&</sup>lt;sup>2</sup> The certificate must be for a full course consistent with the criteria set out in Annex A of the Statutory Framework for the Early Years Foundation Stage.

<sup>&</sup>lt;sup>3</sup> EYFS requirement only. See para 3.25 of Statutory Framework for the Early Years Foundation Stage.

<sup>4</sup> EYFS only

<sup>&</sup>lt;sup>5</sup> Recommended that the College has regard to Regulation 3 of the Health and Safety (First-Aid) Regulations 1981 and Appendix 3 of the First Aid Guidance.

- 8.3.6 the remoteness of the College site from emergency medical services;
- 8.3.7 annual leave and other absences of First aiders.

#### 9 First Aid boxes

- 9.1 First Aid boxes are marked with a white cross on a green background. The content of the First Aid boxes will be appropriate for use with children and will be determined by the College's First Aid needs assessment and will usually be stocked in accordance with Appendix 2 of the First Aid Guidance or in accordance with Workplace first aid kits.

  Specification for the contents of workplace first aid kits, BS 8599-1:2011, June 2011.<sup>6</sup>
- 9.2 First Aid boxes are located at these positions around the College site and are as near to hand washing facilities as is practicable. A full list of locations is in appendix 6 below.
- 9.3 If First Aid boxes are used, they should be taken to the College Nurse who will ensure that the First Aid box is properly re-stocked. The Prep First Aid boxes are reviewed weekly by a First Aider and reviewed termly by the Nurse. The College Nurse will examine the First Aid box(es) at this point and otherwise regularly in order to dispose of items safely once they have reached their expiry date.
- 9.4 All requirements for the First Aid kits are supplied by the Health Centre and are regularly stocked at request of individual departments.
- 9.5 The College also has an emergency anaphylaxis kit which contains spare inhalers, adrenaline auto-injectors (**AAIs**) and are located at the following locations:
  - 9.5.1 outside the Health Centre (B104)
  - 9.5.2 in Prep Medical room
- 9.6 **College minibuses**: The College's minibuses should have a prominently marked First Aid box on board which is readily available for use and which is maintained in a good condition. The First Aid box should be stocked in accordance with 0**Off-site activities**: First Aid boxes for any off-site activities are kept in the Health Centre and are signed out by the Trip Leader when required for trips.

#### 10 Information on pupils

- 10.1 Parents are requested to provide written consent for the administration of First Aid, medical treatment and medication. This requirement will not prevent a child of sufficient understanding and intelligence to understand fully what is proposed, from giving or withholding consent to medical treatment or from seeking advice or treatment in confidence.
- 10.2 The College Nurse will be responsible for reviewing pupils' confidential medical records and providing essential medical information regarding allergies, recent accidents or illnesses, or other medical conditions which may affect a pupil's functioning at the College to the Senior Deputy Head (Education), class teachers, catering, and First Aiders on a "need-to-know" basis. This information should be kept confidential but may be disclosed on a need-to-know

<sup>&</sup>lt;sup>6</sup> Recommended but not compulsory.

basis where necessary to safeguard or promote the pupil's welfare or to avert a perceived risk of serious harm to pupils or to other persons at the College.

#### 11 Administration of medication at College

- 11.1 Parents should inform the College Nurse or Head of Prep for Prep students where a pupil will require either prescription or non-prescription medication to be taken at College and of any changes to the medication required.
- 11.2 The College requests that medication is only taken at College if it is essential, that is where it would be detrimental to the pupil's health not to administer the medication during the College day. Where possible, medicines should be taken at home, before and after attending College.
- 11.3 Parents of all pupils at the College are required to complete the medical information and consent form to agree to the College administering medicine before medication is administered to the relevant pupil.
- 11.4 Staff at the College will not administer any medication to a pupil without obtaining prior written permission from their parents. This requirement will not prevent a pupil of sufficient understanding and intelligence to understand fully what is proposed, from giving or withholding consent to medical treatment or from seeking advice or treatment in confidence. Unless in exceptional circumstances, no pupil under the age of 16 will be given prescription or non-prescription medication without parental consent.
- 11.5 Staff will ensure that parents are informed in writing on each and every occasion that any medication was administered and, for any reason, medication has not been administered parents will be informed and will be given an explanation.<sup>7</sup>
- 12 Procedures for pupils with medical conditions such as asthma, epilepsy, diabetes
- 12.1 The information held by the College will include details of pupils who need to have access to asthma inhalers, AAIs, injections or similar and this information should be circulated to teachers and First Aider.
- 12.2 Where appropriate, individual pupils will be given responsibility for keeping such equipment with them and this will be reviewed on a regular basis. In other cases, the equipment will be kept, suitably labelled, at the Health Centre or Prep Medical Centre.
- 12.3 The College has guidance and protocols in place to deal with common medical conditions such as anaphylaxis, asthma, epilepsy and diabetes. Copies of the guidance and protocols are available from the College Nurse and can be found in Appendix 3.
- 12.4 **Asthma**: the College adopts the inhalers guidance in respect of the use of emergency salbutamol inhalers and holds stock salbutamol inhalers which can be used when a pupil is not able to access his or her own inhaler.<sup>8</sup>
- 12.5 **Anaphylaxis**: the College adopts the *Guidance on the use of adrenaline auto-injectors (AAIs)* in *Colleges* and holds spare / back up devices which can be used when a pupil is not able to access his / her own AAI.<sup>9</sup>

<sup>7</sup> EYFS only

<sup>8</sup> Recommended but not compulsory see: https://www.gov.uk/government/publications/emergency-asthma-inhalers-for-use-in-Colleges

 $<sup>^{9}</sup>$  Recommended but not compulsory see: https://www.gov.uk/government/publications/using-emergency-adrenaline-auto-injectors-in-Colleges

#### 13 Infectious conditions

13.1 Where a pupil is suffering, or suspected to be suffering, from an infectious condition, the College will follow the *Health protection in Colleges and other childcare facilities* guidance<sup>10</sup>, as appropriate, and may require pupils to remain away from College until they are no longer infectious.

#### 14 Procedure in the event of illness

- 14.1 Senior pupils may visit the College Nurse in the Health Centre during break or lunch. If a student is unwell during lessons then they should consult the member of Staff in charge who will assess the situation and decide on the next course of action. Where necessary, the senior student will be accompanied to see the College Nurse in the Health Centre and the College Nurse will visit Prep to assess the needs of Prep pupils. The College Nurse will provide the First Aid as required and decide on the next course of action.
- 14.2 The College will discuss with parents the procedures for children who may become ill or infectious and take necessary steps to prevent the spread of infection and illnesses. <sup>11</sup>

#### 15 Procedure in the event of an accident or injury

- 15.1 If an accident occurs, then the member of Staff in charge should be consulted. That member of Staff will assess the situation and decide on the next course of action, which may involve calling immediately for an ambulance. If necessary, the College Nurse should be called as soon as is possible. First Aiders can also be called, if necessary, and should be called if the College Nurse is not available immediately. In the event that a First Aider does not consider that they can adequately deal with the presenting condition by the administration of First Aid, then they should arrange for the injured person to access appropriate medical treatment without delay. This may involve calling for the College Nurse or for an ambulance or making arrangements to transport the injured person to A & E or access other appropriate medical services.
- 15.2 **Ambulances**: If an ambulance is called then the College Nurse or First Aider in charge should make arrangements for the ambulance to have access to the accident site. Where necessary GPS co-ordinates should be provided, and arrangements should be made for the ambulance to be met.
- 15.3 Staff should always call an ambulance when there is a medical emergency and / or serious injury.
- 15.4 Examples of medical emergencies may include:
  - 15.4.1 a significant head injury;
  - 15.4.2 fitting, unconsciousness or concussion;
  - 15.4.3 difficulty in breathing and / or chest pains;
  - 15.4.4 exhaustion, collapse and / or other signs of an asthma attack;
  - 15.4.5 a severe allergic reaction;
  - 15.4.6 a severe loss of blood;

 $<sup>^{10} \</sup> See \ https://www.gov.uk/government/publications/health-protection-in-Colleges-and-other-childcare-facilities$ 

<sup>11</sup> EYFS only.

- 15.4.7 severe burns or scalds;
- 15.4.8 the possibility of a serious fracture.
- 15.5 Arrangements should be made to ensure that any pupil is accompanied in the ambulance, or followed to hospital, by a member of Staff if it is not possible to contact the pupil's parent(s) (or legal guardian(s)) in time.

#### 16 Hygiene and infection control

- 16.1 If a spillage of blood or other bodily fluids occurs, the Estates Manager must be informed. who will then arrange for the proper containment, clear up and cleansing of the spillage site.
- 16.2 All Staff should take precautions to avoid infection and to follow basic hygiene procedures (such as regular hand washing).
- 16.3 The First Aider should take the following precautions to avoid risk of infection:
  - 16.3.1 cover any cuts and grazes on their own skin with a waterproof dressing;
  - 16.3.2 wear suitable single use disposable gloves when dealing with blood or other bodily fluids;
  - 16.3.3 use suitable eye protection and a disposable apron where splashing may occur;
  - 16.3.4 use devices such as face shields, where appropriate, when giving mouth to mouth resuscitation;
  - 16.3.5 wash hands after every procedure.
- 16.4 If the First Aider suspects that they or any other person may have been contaminated with blood and other bodily fluids which are not their own, the following actions should be taken without delay:
  - 16.4.1 wash splashes off skin with soap and running water;
  - 16.4.2 wash splashes out of eyes with tap water or an eye wash bottle;
  - 16.4.3 wash splashes out of nose or mouth with tap water, taking care not to swallow the water;
  - 16.4.4 record details of the contamination;
  - 16.4.5 report the incident to the College Nurse and take medical advice if appropriate.

#### 17 First Aid in the physical education department

- 17.1 **Location of first aid equipment**: The department is responsible for providing First Aid boxes and bags for the relevant sporting areas within the College. The fixed positions are as follows:
  - 17.1.1 Gym
  - 17.1.2 Gym storeroom
- 17.2 There are 4 bags which can be used by Staff for home and away fixtures.

17.3 Away fixtures: A medical bag should be taken with the travelling team. If an incident occurs medical treatment should be sought from the visiting College First Aid Personnel. If necessary, the pupil should be taken to the nearest A&E by a member of Staff. Treatment and aftercare should then be followed up by parents or the College Nurse. Any incident of treatment must be reported to the College Nurse on return to College.

## 18 Reporting

- 18.1 In the event of an accident, injury or illness requiring First Aid the relevant First Aider should complete a records of First Aid provision, as set out in 0.
- All injuries, accidents and illnesses, however minor, must be reported to the Estates Manager and he /she is responsible for ensuring that the accident report forms are filled in correctly, and will ensure the Health and Safety Executive (HSE) are kept informed as necessary. The College Nurse will keep the parent(s) or guardian(s) informed as necessary. Where the accident, injury or illness could give rise to potential safeguarding concerns, the College's safeguarding and child protection policies and procedures will be followed as appropriate. Staff are particularly reminded to be alert to indicators of sexual violence and female genital mutilation where in each case there are specific reporting procedures under the College's safeguarding and child protection policy and procedures.
- 18.3 **Reporting to Parents**: In the event of serious accident, injury or illness parents or guardian(s) must be informed as soon as practicable. The member of staff in charge at the time will decide how and when this information should be communicated, in consultation with the Head if necessary.
- 18.4 **EYFS pupils**: The College will inform parents of any accidents or injury or First Aid treatment that is given to pupils in the EYFS setting on the same day or as soon as is reasonably practicable.<sup>12</sup>
- 18.5 The College must notify local child protection agencies, as appropriate, of any serious accident or injury to, or the death of, any child whilst in their care and act on any advice given. The College (as a registered provider) must notify Ofsted of any serious accident, illness or injury to, or death of, any child whilst in their care, and of the action taken in respect of it. Notification must be made as soon as is reasonably practicable, but in any event within 14 days of the incident occurring. 14
- 18.6 **Reporting to HSE**: Colleges are legally required under RIDDOR to report the following to the HSE:

#### 18.6.1 Accidents involving Staff

- (a) work related accidents resulting in death or "specified" injury (including as a result of physical violence) must be reported immediately (major injury examples: any loss of consciousness caused by head injury or asphyxia; amputation); or
- (b) work related accidents which prevent the injured person from continuing with his / her normal work for more than seven days; or

<sup>&</sup>lt;sup>12</sup> EYFS requirement (3.50).

<sup>&</sup>lt;sup>13</sup> All EYFS providers (3.51)

<sup>14</sup> Registered EYFS only

- cases of work related diseases that a doctor notifies the College of (for example: certain poisonings; lung diseases; infections such as tuberculosis or hepatitis; occupational cancer); or
- (d) certain dangerous occurrences (near misses reportable examples: bursting of closed pipes; electrical short circuit causing fire; accidental release of any substance that may cause injury to health).

#### 18.6.2 Accidents involving pupils or visitors

- (a) accidents where the person is killed or is taken from the site of the accident to hospital and where the accident arises out of or in connection with:
  - (i) any College activity (on or off the premises);
  - (ii) the way a College activity has been organised or managed (e.g. the supervision of a field trip);
  - (iii) equipment, machinery or substances; and / or
  - (iv) the design or condition of the premises.
- 18.6.3 More information on how and what to report to the HSE, can be found in *Incident reporting in Colleges (accidents, diseases and dangerous occurrences)*(EDIS1 (revision 3)) and at http://www.hse.gov.uk/riddor/resources.htm. It is also possible to report online via the following link: http://www.hse.gov.uk/riddor/index.htm.

#### 18.6.4 Reporting to others

(a) The College will ensure that it complies with any other reporting obligations triggered by the accident, injury or illness including, but not restricted to, making a report to the College's relevant insurers, and/ or to other relevant statutory agencies and/ or regulators.

#### 19 Automated external defibrillators (AEDs) 15

- 19.0 The College's AED(s) is / are located in the Theatre Lobby & Prep Foyer.
- 19.1 The AED should only be used where a person is in cardiac arrest. It should not be used where a person is conscious, breathing and / or his or her heart is still beating.
- 19.2 If a person is suffering from a cardiac arrest, the first person on the scene should immediately call the emergency services and commence CPR. If possible, a First Aider who is trained in the use of AEDs should be called for. However, AEDs are designed to be used by any person by following the step by step instructions on the AED.
- 19.3 The person administering the AED should ensure that the area around the casualty is clear before administering the AED. He or she should then stay with the casualty until the emergency services arrive.

<sup>&</sup>lt;sup>15</sup> It is not compulsory for Colleges to have AEDs and it does not currently form part of the EFAW or FAW courses but if there is an AEDS at the College it is recommended that staff are given instruction / training see DfE guidance: https://www.gov.uk/government/publications/automated-external-defibrillators-aeds-in-Colleges.

#### 20 Training

- 20.1 The College ensures that regular guidance and training is arranged on induction and at regular intervals INSET thereafter so that staff and volunteers understand what is expected of them by this policy and have the necessary knowledge and skills to carry out their roles.
- 20.2 The level and frequency of training depends on role of the individual member of staff.
- 20.3 The College maintains written records of all staff training.
- 20.4 All staff will be informed of what to do in an emergency, which will include reference to who the designated First Aiders / Appointed Persons are and the identity of those who are trained to administer emergency medication, such as AAIs.
- 20.5 Where there are specific training programmes in place, these are set out below:
  - 20.5.1 First aiders will undergo updated training at least every three years to maintain their qualification.
  - 20.5.2 In Prep, newly qualified entrants must have either a PFA or an EPFA certificate in order to be included in the required staff: child ratios at EYFS level 2 or level 3.<sup>16</sup>

#### 21 Record keeping

- 21.1 All records created in accordance with this policy are managed in accordance with the College's policies that apply to the retention and destruction of records.
- 21.2 Where there are specific record keeping requirements under this policy, these are set out below:
  - 21.2.1 College accident records: All injuries, accidents, illnesses and dangerous occurrences (unless very minor in the view of the College Nurse) must be recorded on the College Accident Form. The date, time and place of the event or illness must be noted with the personal details of those involved with a brief description of the nature of the event or illness and what First Aid was given. What happened to the injured or ill person immediately afterwards should also be recorded. Accident report form: The College staff member on duty will fill in an accident report form for every serious or significant accident that occurs on or off the College site if in connection with the College's activities. The College will keep a written record of all accidents or injuries and First Aid treatment provided. Accident report forms will be kept by the Estates Manager Records will be retained in accordance with the College's normal practices. Where there is a risk of claim, records will normally be retained for at least three years or if the person injured is a minor (under 18), until they are 21. A template form is set out at 0.
  - 21.2.2 Accident to Staff causing personal injury: The College Nurse will fill in an accident report form in respect of any accident-causing personal injury to Staff in the form set out in 0 and provide a copy of this accident report form to the Head. The Head will take reasonable steps to investigate the circumstances of such accidents once (s)he

<sup>&</sup>lt;sup>16</sup> Providers are responsible for identifying and selecting a competent training provider to deliver their PFA training. Providers can make an exception to this requirement where a newly qualified entrant to the workforce is unable to gain a PFA certificate if a disability would prevent them from doing so. Such a newly qualified entrant can still be included in the staff: child ratios if otherwise competent to carry out their childcare duties. Where possible, such staff should attend a relevant PFA training course and obtain written evidence of attendance.

<sup>&</sup>lt;sup>17</sup> EYFS requirement paragraph 3.50.

receives notice of it. If it is found that there are discrepancies between the information reported and the Head's findings these should also be recorded on the form. These records will be kept by the Estates Manager for at least three years or if the person injured is a minor (under 18), until they are 21.<sup>18</sup>

- 21.3 Any significant accidents or RIDDOR must be reported to the Board level lead for health & safety.
- 21.4 The records created in accordance with this policy may contain personal data. The College has a number of privacy notices which explain how the College will use personal data about pupils and parents. The privacy notices are published on the College's website. In addition, staff must ensure that they follow the College's data protection policies and procedures when handling personal data created in connection with this policy. This includes the College's Privacy Notice.

#### 22 Version control

Date of adoption of this policy, by or on behalf of the Proprietor	January 2023
Date of last review of this policy	January 2024
Date for next review of this policy	January 2025
Policy owner (SLT)	Senior Deputy Head (Education)
Policy owner (Proprietor)	Amit Mehta

<sup>&</sup>lt;sup>18</sup> Requirements under Social Security (Claims and Payments) Regulations 1979, see regulations 24 and 25 - a requirement for employers who employ more than 10 members of staff (i.e. most Colleges).

# Part 2 of schedule 7 of the Road Vehicles (Construction and Use) Regulations 1986 (SI 1986/1078)

## First Aid equipment:

- ten antiseptic wipes, foil packed
- one conforming disposable bandage (not less than 7.5 cm wide)
- two triangular bandages
- one packet of 24 assorted adhesive dressings
- three large sterile un-medicated ambulance dressings (not less than 15.0 cm × 20.0 cm)
- two sterile eye pads, with attachments
- twelve assorted safety pins
- One pair of rust less blunt-ended scissors

## Record of First Aid (optional) 19

It is good practice for a book to be kept to record incidents. Where there are a number of First Aiders it is advisable that there is one central book, if possible. The book should be kept in accordance with the requirements of the Data Protection Act 1998. Copies of the accidents and first aid performed should be given to the Health and Safety Officer and Deputy Head (Operations) for review.

Record of First Aid	
Date and time	
Name of pupil who required First Aid	
Location of administration of First Aid and location of incident (if applicable)	
Details of the injury / illness / event and what First Aid was administered	
What happened to the person immediately afterwards (did they go home / to hospital etc)?	
Were the pupil's parents informed?	
Was the HSE informed? (if so, please provide details of the date and method of reporting)	
Name of First Aider / Appointed Person	
Signature	
Date of signature	

<sup>&</sup>lt;sup>19</sup> In EYFS settings it is mandatory for a written record to be kept see 3.50.

## Record of accident-causing personal injury to Staff

Record of accident-causing personal injury to Staff			
Date and time of report			
Date and time of accident			
Full name (Staff member)			
Address (Staff member)			
Occupation (Staff member)			
Location of administration of First Aid (if applicable) and location of accident			
Details of the injury / illness / event and what First Aid was administered (if applicable)			
Cause of injury			
What happened to the person immediately afterwards (did they go home / to hospital etc)?			
Was the HSE informed? (if so, please provide details of the date and method of reporting)			
Name of First Aider / Appointed Person (if applicable)			
Name of person making the report			
Occupation of person making the report			
Signature			
Date of signature			

The College Nurse should retain a copy of this form with the College accident book and provide a copy to the Senior Deputy Head (Education) Pastoral for the purposes of any investigation. A copy of the form is also given to the Deputy Head (Operations) PA so that the information can be recorded for trends for review at the Health and Safety Committee.

Medical consent **First Aid**: I / We consent to appropriately trained and qualified members of the College staff to administer First Aid to my / our child where appropriate.

**Medical treatment**: I / We hereby give my consent for the College to act on my / our as necessary for my child's welfare if [he /she] requires a medical examination, medical testing or minor medical treatment such as attendance at a local GP, doctor or optician.

**Emergency medical treatment**: I / We give my / our consent for the Head to act on our behalf to authorise emergency medical treatment as necessary for my child's welfare in the event I / we cannot be contacted in time.

The administration of medicines: I / We hereby give my consent for appropriately qualified members of the College staff to administer prescription medication as listed in the medication section of the medication and treatment section of the medical information form or as subsequently notified to the College and / or non-prescription medication such as paracetamol, ibuprofen, simple cough linctus, indigestion remedies and other over-the-counter remedies under protocols from the College Doctor for treating minor ailments.

hese in the box below.			
	_		

	First signatory	Second signatory
Signature		
Title (e.g. Mr, Mrs, Ms)		
Name in full (please include all names)		
Relationship to child		
Date		

#### Guidance and protocols for specific medical conditions

#### a) Anaphylaxis

#### Adrenaline auto-injectors <sup>20</sup>

Delays in administering AAIs have been associated with fatal outcomes. **AAIs MUST be** administered without delay to pupils if there are **ANY signs of anaphylaxis present** to those pupils who are known to be at risk of anaphylaxis, for whom both medical authorisation and consent for the use of AAIs have been provided.

**College staff must always call 999 and request an ambulance if an AAI is used** and keep a detailed record including, where the reaction took place and how much medication was given. Relevant parents or guardian(s) should be informed as soon as practicable.

The College nurse and the Head<sup>21</sup> are responsible for ensuring that the *Guidance on the use of adrenaline auto-injectors in Colleges* (the **AAI Guidance**) is properly implemented and followed.

AAIs are to be stored, cared and disposed of in accordance with Part 3 of the AAI Guidance and the other requirements of this policy apply to AAIs, including but not limited to appropriate training, use and record keeping.

The College nurse will have overall responsibility for restocking at least 2 x 300mcg and 1x150mcg number $^{22}$  AAI (which may be bought without prescription). The College nurse will check the stock on a monthly basis to ensure that the AAIs are present and in date and that replacement AAIs are obtained in good time. $^{23}$ 

Spare AAIs should only be used on pupils who are known to be at risk of anaphylaxis, for whom both medical authorisation and consent for the use of AAIs have been provided.

The College nurse will maintain an up to date register of pupils at risk of anaphylaxis this includes pupils who have been prescribed an AAI and those who have been provided with a medical plan confirming this, but who have not been prescribed AAI and in respect of whom parental consent to the use of the spare AAI has been obtained. The register should be reviewed regularly, at least annually)<sup>24</sup> to take into account pupils' changing needs. A copy of the register is to be stored with the spare AAIs.

Parents are to notify the College as soon as practicable that a particular pupil is at risk of anaphylaxis and in that case provide their consent to use the spare AAIs. Completed consent forms should be stored on the pupil's file and, where appropriate, the ICHP updated accordingly.

Further guidance and general information on how to recognise and respond to an anaphylaxis can be found at: http://www.nhs.uk/conditions/Anaphylaxis/Pages/Introduction.aspx

#### b) Asthma

<sup>&</sup>lt;sup>20</sup> See https://www.gov.uk/government/publications/using-emergency-adrenaline-auto-injectors-in-Colleges

<sup>&</sup>lt;sup>21</sup> The Inhalers Guidance requires at least two people to be responsible for ensuring the Guidance is followed

<sup>&</sup>lt;sup>22</sup> There is no prescribed amount will depend on practice and size of the College.

<sup>&</sup>lt;sup>23</sup> The guidance recommends that at least two named volunteers are responsible for checking the stock.

<sup>&</sup>lt;sup>24</sup> Best practice but not a requirement.

#### Asthma register and emergency inhalers 25

The other requirements of this policy apply to emergency inhalers, including but not limited to appropriate training, use, supply, storage, care, disposal and record keeping.

The College nurse and the Head<sup>26</sup> are responsible for ensuring that *Guidance on the use of emergency salbutamol inhalers in Colleges* (**Inhalers Guidance**) is properly implemented and followed.

The College nurse will hold and be responsible for restocking at least 3 <sup>27</sup> emergency inhalers (which may be bought without prescription). An emergency inhaler may be used if a pupil's prescribed inhaler is not available (for example, because it is broken, or empty) or in the event of an asthma attack.

Only pupils who have been diagnosed with asthma and /or who have been prescribed a reliever inhaler may use an emergency inhaler. The College nurse will maintain an up to date register of pupils who have been diagnosed with asthma and /or who have been prescribed a reliever inhaler and in respect of whom parental consent to the use of the emergency inhaler has been obtained. The register should be reviewed regularly (at least annually)<sup>28</sup> to take into account pupils' changing asthma care needs. A copy of the register is to be stored with the emergency inhalers.

Parents are to notify the College as soon as practicable that a particular pupil has been diagnosed with asthma and / or has been prescribed a reliever inhaler. Notification should be accompanied by a completed consent form signed by the parents in the form set out at Annex B of the Inhalers Guidance (a copy of which is available from the College nurse on request. Completed consent forms should be stored on the pupil's file and, where appropriate, the ICHP updated accordingly.

If an emergency inhaler is used by a pupil the College nurse will notify the relevant parents or guardian(s) as soon as practicable.

Emergency inhalers are also to be stored, cared and disposed of in accordance with Part 3 of the Inhalers Guidance.

Further guidance and general information on how to recognise and respond to an asthma attack can be found at: http://www.nhs.uk/Conditions/Asthma/Pages/Treatment.aspx

#### c) Diabetes

#### Signs and symptoms of low blood sugar level (hypoglycaemia)

Onset can be quite quick and may be due to a missed/late meal, missing snacks, infection, more exercise, warm weather, too much insulin and stress. Individuals should test their own blood sugar levels if testing equipment available. Symptoms include:

- Pale
- glazed eyes
- blurred vision
- confusion/incoherent

<sup>&</sup>lt;sup>25</sup> See Inhalers Guidance: keeping an emergency inhaler (and adopting the procedures in the Inhalers Guidance) is optional but recommended.

<sup>&</sup>lt;sup>26</sup> The Inhalers Guidance requires at least two people to be responsible for ensuring the Guidance is followed.

<sup>&</sup>lt;sup>27</sup> There is no prescribed amount will depend on practice and size of the College.

<sup>&</sup>lt;sup>28</sup> Best practice but not a requirement.

- shaking
- headache
- change in normal behaviour-weepy/aggressive/quiet
- agitated/drowsy/anxious
- tingling lips
- sweating
- hunger
- dizzy
- leading to unconsciousness

#### Action

- The pupil should be administered with fast acting glucose (Lucozade drink or glucose tablets)
   the pupil should have their own emergency supply in the Health Centre and Prep Medical Centre. This will raise the blood sugar level quickly.
- After 5 10 minutes the pupil should be given further snacks as advised by the Parents. Do not leave the pupil unaccompanied at any time.
- The pupil should be allowed access to regular snacks and check blood sugar level again and as necessary.
- The pupil's Parents should be informed about the incident as soon as possible.

#### Action to be taken if the pupil becomes unconscious

The pupil must be placed in the recovery position. Glucose must not be administered by mouth as this may cause choking.

- Telephone 999
- Inform Parents as soon as possible
- Accompany the pupil to hospital and await arrival of Parent

#### Signs and symptoms of high blood sugar level (hyperglycaemia)

This develops much more slowly over time but can be much more serious if untreated. Caused by too little insulin, eating more carbohydrate, infection, stress and less exercise than normal. Symptoms may include:

- feeling tired and weak
- feeling thirsty
- passing urine more often
- nausea and vomiting

- drowsy
- breath smelling of acetone
- blurred vision
- unconsciousness

#### Action

The Assistant Head Pastoral must be informed. Arrangements will be made for blood glucose testing, if possible. The pupil's parents should be informed about the incident as soon as possible. 999 should be called and the pupil must be accompanied to casualty, where they will await the arrival of the pupil's Parents.

For further information and guidance: http://www.nhs.uk/Conditions/Diabetes/Pages/Diabetes.aspx

#### d) Epilepsy

#### How to recognise a seizure

There are several types of epilepsy but seizures are usually recognisable by the following symptoms:

- the pupil may appear confused and fall to the ground
- slow noisy breathing
- possible blue colouring around the mouth, returning to normal as breathing returns to normal
- rigid muscle spasms
- twitching of one or more limbs and/or face
- possible incontinence

#### Action

The following actions should be taken to assist the pupil:

- try to help the pupil to the floor if possible but do not put yourself at risk of injury
- move furniture etc. away from the pupil in order to prevent further injury
- place a cushion or something soft under the pupil's head
- clear the area of pupils
- call the College Nurse
- cover the pupil with a blanket as soon as possible in order to hide any incontinence
- stay with the pupil throughout duration of the seizure
- as the seizure subsides place the pupil into recovery position
- inform Parents as soon as possible
- send for ambulance if this is the pupil's first seizure or, if a pupil, known to have epilepsy has

a seizure lasting for more than 5 minutes, or if an injury occurs as a result of the seizure. The pupil must be accompanied until their Parents arrive

- allow the pupil to rest for as long as necessary
- reassure the other pupils and staff

For further information and guidance:

**Appendix 6** 

## **List of First Aiders**

(last updated January 2024)

First Name	Surname	Qualification	Department	Ext
Bozena	Mechelewska	Essential First Aid	Boarding	216
Jackie	Marshall	Paediatric First Aid	Boarding	226
Niki	Bexfield	First Aid at work	Boarding	226
Prescilla	Boutros	First Aid at Work	Boarding	226
Jane	Bedborough	First Aid at work	Boarding	226
Gemma	Arthur	First Aid at work	Boarding	226
Agnieszka	Hercog-Chan	Emergency First Aid	Boarding	216
Zoe	Seabourne	First Aid at work	Boarding	226
Sara	Hall	First Aid at work	Boarding Nurse	230
Jane	Skelton	First Aid at work	Catering	203
Debbie	Hammond	First Aid	DofE	213
David	Watson	First Aid at work	Maintenance and Caretaking	210
Tom	Graddon	Emergency First Aid	Maintenance and Caretaking	222
Lisa	Newby	Paediatric First Aid	Nursery	216
Francesca	Lloyd	Paediatric First Aid	Nursery	216
Kirsty	Colley	Paediatric First Aid	Nursery	216
Sarah	Page	Emergency First Aid & Paediatric First Aid	Nursery	216
Nicola	Baxter	Sports First Aid	P.E.	213
Jo	Roseblade	Paediatric First Aid	Prep	216
Lynda	Wilson	Paediatric First Aid	Prep	216
Vincenza	Walls	Paediatric First Aid	Prep	216
Lois	Dickerson	Paediatric First Aid	Prep	216
Abi	Beynon	Emergency First Aid	Prep	216
Kathryn	Harper	Paediatric First Aid	Prep	215
Jackie	Birchall	Paediatric First Aid	Prep	216
Sandra	O'Mahoney	Outdoor First Aid	Prep / Senior	213
Linda	Halliday	First Aid at work	Prep Reception	266
Liam	Gallagher	Emergency First Aid	Senior	260/213
Emily	Greenfield	Emergency First Aid	Senior P.E.	260/213
Hannah	Murphy	Sports First Aid	Senior P.E.	260/213

Please note: Epipens are situated in the register pocket outside the Health Centre (B104) and in the Prep Medical Room.

#### Location of First Aid Boxes and AED Machines

(Updated April 2023)

#### First Aid kit locations

#### **Broadway**

Health Centre (4) Top draw of the filling cabinet

Marketing, Admissions and HR (1) Cupboard under the kitchen sink

Reception (1) Next to the printer

Kitchen (1) On the right hand side kitchen wall

#### **Middle College**

Food & Nutrition MG50 (1) On top of the filing cabinet

English Office (1) On the shelf on the right side of the room from the doorway

Staff room (1) On the kitchen worktop

Art Dept (1) On a shelf at the back of the room

New hall/Drama (1) Next to the teacher's desk

Biology Rm M105 (1) On the wall at the front of the class

Biology Rom M104 (1) Under the teacher's desk

Biology Rom M103 (1) Next to the door

Chemistry M115 (1)

Chemistry M114 (1)

Physics M112 (1) Next to the sink

#### Other locations

Theatre Foyer (1)

PE Dept (4)

Swimming pool (1) Hanging up on a hook in the small storage cupboard

College minibuses (4)

Caretakers office (2)

## **Prep College**

Prep first aid room (2)

PE Dept (2)

Early years rm PG04 (1) Behind the door above the sink

Upstairs corridor (2) 1 outside the ICT room and 1 in-between prep 1 & 2

## **Boarding House**

Games room (1) On the wall next to the doorway

Cordelia Common Rm (1) On the wall next to the doorway

Titania Common Rm (1) On the wall next to the doorway

Beatrice Common Rm (1) On the wall next to the doorway

First Aid Cupboard (1) Located next to the games room

#### **Procedures for Pupils with Medical Conditions**

#### ASTHMA PROTOCOL

St. Francis' College recognises that asthma is a long-term medical condition affecting many College children. This College encourages all children with asthma to achieve their potential in all aspects of College life by having a clear policy that is understood by both pupils and staff.

#### 1 Record keeping

When a child joins the College the parents inform the College nurse, via the health form, that their child has asthma and the details of the medication regime. Asthma varies in severity from person to person. The College nurse will obtain details of triggers and specific sensitivities from parents and include them on their medical record on ISAMs. The pupils name will be added to the list of students with asthma. This list is shared on a need to know basis, such as PE teachers and trips. If the medication regime changes parents are asked to inform the College. Parents are asked to complete an Individual care plan for their child.

#### 2 Medication

Immediate access to relieving inhalers is vital, and students are encouraged to carry their relieving inhalers with them. Parents are requested to provide the College with a labelled spare inhaler. The College nurse will arrange for boarders to have a spare inhaler in College. All inhalers must be labelled with the pupils' name. The College nurse should regularly check expiry dates of medications and notify the parents for replacements. The College has generic Ventolin inhalers these are placed in the prep medical room, the health centre, PE department and boarding medicines cabinet. These are for all children know to have asthma who do not have an inhaler available.

#### 3 **Physical education and sports**

Taking part in sports is an essential part of College life, and pupils with asthma are encouraged to participate fully in the sporting life of the College. PE teachers are aware of which pupils have asthma from the asthma list. Children whose asthma is triggered by exercise will be reminded to take their inhaler before the lesson. If a student needs to use their inhaler during the lesson they will be encouraged to do so. PE staff are encouraged to have a container to put pupils medication in for the duration of the PE lesson. This container will stay with the member of staff or close to the venue of the PE lesson in case medication is required during the lesson.

#### 4 Outings and off-site activities

The College positively encourages pupils with asthma to participate fully in all off-site activities, both educational and social. When completing the risk assessment the teacher in charge of the outing should be aware of any potential triggers which may

affect asthmatic pupils, e.g. pollen, chemicals. <u>Pupils with asthma are identified on the medical information list and should carry their inhaler with them.</u> In the event of asthma attack steps 1-3 of the procedure below should be followed. If the attack does not respond to treatment an ambulance should be called.

#### 5 The College environment

St. Francis' College does all it can to ensure that the College environment is favourable to children with asthma. The College has a non-smoking policy. As far as possible, the College does not use chemicals in science and art lessons that are potential triggers for asthma. Students are encouraged to leave the lesson if particular fumes trigger their asthma. Appropriate synthetic bed linen can be provided for boarders. Boarders are encouraged to bring their own anti-allergy duvet and pillows if necessary.

#### **Asthma Treatment**

There are two types of treatment:

*Preventers* – these inhalers are usually taken twice daily at home and are normally in a brown, purple, green or orange container. When taken regularly they make the air passages less sensitive to the triggers that can start an attack. They take 10-15 days to work. These inhalers do not help an acute asthma attack and should not be kept at College, unless the child is a boarder.

*Relievers* – these are the inhalers used in an acute attack to relieve the symptoms of asthma. These are usually in blue containers.

#### Signs and Symptoms of an asthma attack

Coughing
Shortness of breath
Wheezing
Tightness in chest
Being unusually quiet
Difficulty in speaking in complete sentences
Pale, cold and clammy

#### What to do in the event of asthma attack

- 1. Ensure that the relieving inhaler is taken immediately
- 2. Stay calm and reassure the child
- 3. **Summon College nurse** or a first aider via reception or on extension 230.
- 4. **Help the pupil to breathe** by ensuring that they is sitting upright and leaning slightly forward, tight clothing is loosened
- 5. Encourage them to take slow regular breaths.
- 6. If the symptoms disappear, the student can go back to class.
- 7. If the symptoms have improved but not completely gone, give another dose of the inhaler (usually 2 puffs)

- 8. If the student does not have their inhaler with, use the emergency one from the Medical Room If there is no spare for the student a spare, contact the parents to ensure this is remedied.
- 9. If the asthma attack has not settled after 30 minutes or the pupil shows signs of worsening Hypoxia consider hospital and contacting the parents

#### Signs of a severe asthma attack(hypoxia)

Any of these signs means 'severe'.

Normal relief inhaler does not work

The student cannot speak normally/in full sentences

Blue tingeing around the mouth

Pulse rate of 120 per minute or more

Rapid breathing of 30 breaths per minute or more

Excessive use of intercostal muscles (rib muscles)

Tracheal tug (dip at base of throat on each inhalation)

Pale clammy

Eye rolling

Decreased conscious level

#### If in ANY doubt, call an ambulance.

#### What to do in a severe asthma attack

Keep calm.

Keep using the relief inhaler -2 puffs (one puff at a time) every 2 minutes until symptoms improve. Use spacer if possible. She can take up to ten puffs. Follow the guidance on the child's prescribed medication.

If she does not start to feel better or you are worried, call an ambulance, and arrange for a member of staff to accompany the girl to hospital.

Contact the girl's parents to meet at the hospital.

Continue to reassure the girl.

If an ambulance does not arrive within 10 minutes and she is still feeling unwell continue giving two puffs every 2 minutes.

Have College care plan ready to give to ambulance crew.

Try to make note of time of start of attack and all symptoms to tell ambulance crew.

The College nurse will notify parents/guardians of all asthma attacks occurring in College.

#### After the attack

Minor attacks should not interrupt a pupil's involvement in College and they may return to lessons once they are fully recovered.

#### **Emergency procedure out of College**

If the attack does not respond to an inhaler within 20-30 minutes or the child becomes extremely distressed the College nurse or first aider will telephone for an ambulance. Repeated doses of Ventolin can be given by the College nurse -the pupil's parents and the Head will be informed.

On an outing the teacher in charge should call an ambulance if the symptoms do not subside within 20-30 minutes and then notify the College.

All incidents should be carefully documented in the pupil's notes.

## **DIABETES PROTOCOL**

St. Francis' College recognises that Diabetes Mellitus is an important condition affecting some College children. This College encourages children with diabetes to achieve their potential in all aspects of College life by having a clear policy available to pupils, parents and staff.

The College nurse will work with outside agencies (GP's, consultant physicians, diabetes liaison nurse) to ensure that a pupil with diabetes can participate fully in the life of the College.

#### 1. Record keeping

When a pupil is admitted to the College their parents will inform College nurse, via the health form, that they have diabetes. This information is passed to staff, with parental consent, will be added to ISAMs. The parents of a diabetic pupil will be invited, with her, into College to meet nursing, teaching and catering staff to ensure that her specific needs will be met. An individual care plan will be written/supplied by the diabetes nurse specialist involved. The College nurse will keep details of current medication regimes in the medical room in the pupil care plan folder and scanned onto the pupils own notes with ISAMs, and parents will inform the College of any changes.

#### 2. Monitoring

The College accepts that it is necessary to maintain balanced blood sugar levels and will allow a pupil to check their blood sugar as appropriate, providing privacy to do so. Spare monitoring equipment may be brought into College and stored in the medical room. It should be clearly labelled and easily accessible. The College nurse will e-mail parents to let them know when stocks are low.

#### 3. Medication

The College acknowledges that regular injections of insulin are essential for a child with diabetes and will support in maintaining the prescribed regime by allowing the student to inject when required and providing privacy to do so. Insulin brought into College will be stored in the medicines refrigerator in the medical room. Where necessary spare equipment may also be stored in the medical room.

#### 4. Dietary management

The College will work closely with the pupil, the parents and Catering to ensure that her specific dietary needs can be met, and that any supplements to diet, e.g. snacks,

are provided at the correct time. Pupils with diabetes may need to eat at a specific time or the same time every day so may need to go to the front of the meal queue. They may also need to eat and/or drink during examinations; staff will be aware of this so that the appropriate arrangements can be made.

#### 5. Physical education

PE staff will be informed if a child has diabetes. The student will be encouraged to take extra glucose before physical activity, and staff are aware that they may need to take glucose during strenuous exercise and she may need to eat. Should the pupil experience symptoms of hypoglycaemia remedial action will be taken according to the protocol detailed below. PE staff will ensure that the patient's medications are placed in a secure box close to where the lesson is occurring. This is particularly important for insulin pumps that need to be disconnected from the patient during PE lessons.

#### 6. Outings and off site activities

The College encourages pupils with diabetes to participate in off site activities, both educational and social. Diabetic pupils should take with them sufficient supplies of insulin and monitoring equipment to last for the duration of the outing, and should also carry snacks for use in the event of a hypoglycaemic episode, the location of which is known to the teacher in charge of the outing or the first aider present. Catering will be informed so that an appropriate packed meal can be provided. For overnight and overseas trips more preparation and equipment will be needed. The nurse will liaise with the teacher, in charge of the outing and the pupil / parents to ensure that the child's needs are safely met and will provide support to teaching staff as required. (If a diabetic pupil is travelling overseas Diabetes UK publishes country guides containing useful information about local foods and diabetes care and translations of useful phrases, available on their website.)

- 7. Where requested and needed the College nurse may if possible attend the trip with the diabetic pupil. The College may also be required to provide additional training for the first aid staff attending the trip. There should always be a 3 day first aid at work trained first aider on a College trip with a diabetic pupil.
- 8. The College nurse will maintain her own skills in the management of diabetes by attending training on a regular basis.

## Hypoglycaemia and hyperglycaemia

Hypoglycaemia occurs when the level of glucose falls too low. It may occur if a pupil has taken too much insulin, delayed or missed a meal, eaten insufficient carbohydrate, has an infection, taken part in unplanned or more strenuous exercise, or has been drinking alcohol.

Hypoglycaemic episodes are sudden, unexpected, and rapid.

Hyperglycaemia is due to insufficient insulin, and there is a slow onset of symptoms.

#### Signs and Symptoms

<u>Hypoglycaemia</u>	<u>Hyperglycaemia</u>
Hunger	Thirst
Trembling	Frequent urination
Sweating	Tiredness
Anxiety or irritability	Dry skin
Rapid heartbeat	Nausea
Tingling of lips	Blurred vision
Blurred vision	
Paleness	
Mood change	
Difficulty in concentrating	
Vagueness	
Drowsiness	

## In the event of a hypoglycaemic episode

- 1. Reassure the pupil
- 2. Where possible send the pupils to the medical room aided by another pupil
- 3. **Contact College nurse** If the College nurse is not available then a first aider should be found to attend to the pupil.
- 4. The College nurse will monitor blood sugars and treat accordingly
- 5. **Administer fast acting glucose 20g** in the form of a sugary drink, chocolate bar, glucose tablets, sweets. 10 g if this is a child under the age of 8 years
- 6. **The College nurse** will monitor blood sugar 20 minutes after sugar and treat accordingly.

Should the hypoglycaemia not respond to the treatment, or the student be found unconscious, the College nurse/ first aider will phone for an ambulance and the parents and the Head will be informed.

Parents will be informed of any hypoglycaemic episodes that occur in College.

## In the event of a hyperglycaemic episode

- 1. Reassure the pupil
- 2. Contact the College Nurse
- 3. The College Nurse

Will check the blood sugar level and will follow the child's care - plan as written by the DNS or contact parents / guardians or diabetic nurse specialist as necessary for advice.

4. This condition requires a bolus of insulin which needs to be dealt with in conjunction the parents/A&E/diabetic nurse specialist.

## **EPILEPSY PROTOCOL**

St. Francis' College recognises that epilepsy is an important condition affecting some College children. The College encourages all children with epilepsy to achieve their potential in all aspects of College life by having a clear policy available to pupils, parents and staff.

The College nurse works with outside agencies (GP's, consultant physicians, specialist nurse practitioners) to ensure that students with epilepsy can participate fully in College life.

Epilepsy may manifest itself in a number of ways, from partial seizures and absence seizures to tonic/clonic and atonic generalised seizures. The College nurse will include information on the type of seizure experienced by the pupil on the medical details list.

#### 1. Record keeping

When a student is admitted to the College the parents will inform the College nurse, via the health form, that she has epilepsy. This information is added, with parental consent, to the students medical record on ISAMs. The parents of the pupil with epilepsy will be invited, with their child into College to discuss how the individual needs can be met. Such information will include specific information about her seizures, i.e. type, triggers, duration, if there is altered behaviour before or after, and mode of recovery. This information will be documented in an individual care plan. The College nurse will maintain details of the pupil's current treatment regime in College and parents are requested to inform her of any changes. An individual care plan will be written for the care of the pupil.

#### 2. Medication.

The College acknowledges that regular administration of prescribed medication is essential in the treatment and control of epilepsy and will support the pupil by allowing the student to take medication at the correct time. Parents are asked, where appropriate, to supply the College with sufficient medication in a clearly labelled pharmacy dispensed container. The College nurse will ensure that boarders have a sufficient supply in College. These should be documented in the appropriate way – see Administration of Medicines Policy. All prescribed medications should have a signed permission to administer prescribed medications form from the parents.

#### 3. Physical education.

The College acknowledges that epilepsy itself is not a barrier to physical activity but that some sports and activities may be inappropriate for some pupils with epilepsy. PE staff will be informed if a pupil has epilepsy and will liaise with the College nurse, the pupil and their parents to ensure that all physical activity undertaken is suitable for that pupil.

#### 4. Outings and off-site activities.

The College encourages pupils with epilepsy to participate in all off-site activities, both educational and social. Pupils should take with them sufficient medication, in a labelled container, to last for the duration of the outing. Some physical activities may not be suitable for some pupils with epilepsy, and there will be discussion before the outing with the pupil, their parents, the teacher in charge and the College nurse to assess the suitability of the outing. Staff should be aware that some flashing lights and strobe effects may trigger seizures in some pupils.

#### 5. Electronic equipment

Some pupils may be sensitive to the effects of electronic equipment e.g. VDU screens, interactive whiteboards, TV screens. Advice should be sought from the College nurse or the ICT department in individual cases.

#### In the event of a seizure

- 1. Keep calm. Call the College Nurse
- 2. Only move the person if they are in danger.
- 3. Protect them from further injury during the seizure e.g. move furniture, place something soft under head
- 4. **Do not try to stop the seizure** or restrain the pupil
- 5. Do not force anything into the mouth
- 6. If possible, note the time the seizure started and ended
- 7. The College nurse will administer medication only if this is part of the pupil's normal seizure routine and in their Care Plan
- 8. Once the seizure has finished check airway and breathing then place her in the recovery position. Allow her time to rest and recover.
- 9. If the start of the seizure has not been witnessed, check the pupil for additional injuries that may have been sustained during the seizure or have prompted the seizure.
- 10. Talk to the pupils in a calm and reassuring manner for the duration of the seizure and recovery period

The College nurse or first aider will summon an ambulance if:

- the seizure lasts more than 3 minutes,
- if one seizure follows another,
- it is their first seizure
- if the pupil has difficulty breathing
- if the pupil is injured

The child's Parents and head of year/deputy head will be informed of all seizures that occur in College.

The College nurse or first aider will Document all incidents in the pupil's medical notes.

#### **Procedure for dealing with Illness**

#### Minor illness

In the event of minor illness, staff should send the unwell pupil to the School Nurse, accompanied by one other pupil or one member of staff.

The School Nurse can assess, treat and observe minor injury or illness from the Health Centre.

Once the unwell student is with the School Nurse, the accompanying student or staff member can return to their prior engagement.

In the Senior school, the School Nurse will use their clinical judgement on whether informing parents is required. For any Prep students, parents are informed of any nursing care and medication prior to giving it to a Prep student.

If the student is in the Health Centre for a period of observation, the School Nurse will phone the Admin team to inform them of the pupil's whereabouts. The Admin team will inform any other staff that require knowledge of the student's whereabouts.

If a day student is too unwell to remain in school, the School Nurse will request via telephone, that a parent will come and collect their child from the front reception area.

The School Nurse will inform the Admin team of the plan for the child to be collected. The Nurse will email the students form teacher and head of year to inform them that the unwell pupil will be going home. In some specific cases, a student may be deemed well enough and responsible enough to go home alone on public transport. This will only be allowed once the Nurse has spoken with a parent on the telephone and has the approval of the parent.

If Boarding students become unwell, they can return to the Boarding House to recuperate. The School Nurse will inform Boarding staff, who will check on the student at regular intervals and treat minor ailments using medication from the Boarding House medical cupboard.

The School Nurse or boarding staff will inform parents and guardians via email of the pupil's illness, present condition, treatment and plan of care.

The School Nurse will request appointments with the GP for any Boarding students who require a doctor.

#### **Major illness**

In the event of an illness whereby the student is at risk of serious injury or death, staff should NOT leave the student unattended. They should request another student or staff member to call 999 immediately.

Once the ambulance is on route, the School Nurse can be asked to attend to the student by an available person.

The School Nurse will attend the unwell student wherever they are and administer first aid while awaiting emergency services.

A designated person will be identified to make contact with the students' parents or guardians to inform them of the situation. This designated person will also be asked to seek other trained first aiders to help with the situation until further help arrives. SLT must be informed.

Once the paramedics are on site, a hand over will be given. If the student is taken to hospital, and the parents/guardians are not present, the nurse will go with the student until the arrival of the parents/guardian.

Documentation of the incident will be recorded on ISAM's and a debrief meeting will be had with any staff and/ or parents who need to discuss the incident and outcomes.