

## First Aid and Medical Welfare Policy

### Introduction

St John's College School is an inclusive community that aims to support and welcome pupils with medical conditions, providing them with the same opportunities as the other pupils in the school. Please see our [Equal Opportunities Policy](#) for further details. The school acknowledges its legal duty to make reasonable adjustments for disabled children and children with special educational needs (SEND); Equality Act 2010, SEN and Disability Code of Practice 0-25 years 2014.

Medical policies and procedures are reviewed and approved by the School Medical Committee. For further details please see the [Medical Committee](#) document. This policy has been drawn up taking into account the DfE 'Guidance on First Aid'.

In accordance with Health and Safety legislation (Health and Safety (First Aid) Regulations 1981 and the amended regulations 2009) it is the responsibility of the Governing Body to ensure adequate and appropriate First Aid provision at all times when there are people on the school premises and for staff and pupils during off-site visits and activities.

This policy outlines the school's responsibility to provide safe, appropriate, first aid (the initial assistance or treatment given to someone who is injured or suddenly taken ill) or medical care to day pupils, boarding pupils, staff, parents and visitors to ensure best practice.

It includes arrangements for first aid within the school environment and for activities off site involving pupils and members of staff. It will be available for all staff, pupils and parents to access on the school website. Where more than basic first aid is required the parent/guardian of the pupil will be notified as soon as possible. Consent to administer first aid is obtained from parent/guardians on admission to the school.

This policy also covers the EYFS for administering medicines, including systems for obtaining information about a child's needs for medicines and for keeping this information up to date.

There will be parts of the policy where arrangements are different for visitors, staff, EYFS (Early Years Foundation Stage) and all other pupils and these will be clearly stated.

### Medical Facilities - Senior House & Boarding House

There is a dedicated medical room at Senior House that allows children with minor injuries and illnesses to be cared for during the school day. In the Boarding House there is the Sanatorium where boarders that are unwell can be cared for separately from other children. All of these areas are equipped with a couch or bed, sink, clinical waste bins, lockable medicines cabinet and a lockable, temperature monitored refrigerator. The medical room at Senior House has toilet facilities nearby. The Sanatorium has its own en-suite bathroom facilities equipped with a shower, toilet and sink.

### Medical Facilities - Byron House (including EYFS)

There is a dedicated First Aid area at Byron House reception that allows children with minor injuries and illnesses to be cared for during the school day. This area is equipped with a couch, clinical waste bins, lockable medicines cabinet and a lockable, temperature monitored refrigerator. There are sink and toilet facilities nearby.

## Opening Hours

At Senior House the medical room is open from 0800-16:30 every school day. This is where you will find the School Nurse or a trained First Aider. Contact details below:

- **School Nurse or duty First Aider: 07801 790990,**
- **Medical Room: internal extension: 752 or 01223 272752**

## Medical Personnel

### School Nurse

The School Nurse looks after everybody's health and welfare at school and has day-to-day responsibility for medical and first aid issues on site. The School Nurse can access external Occupational Health Services for staff if required. Please note that all consultations with the School Nurse are confidential.

### Doctor

- **Day Pupils**

Parents will provide details of their child's GP on the Health Questionnaire that is completed when a child first registers with the school. Parents should notify the School Nurse of any changes to their child's health as they occur throughout the school year.

- **Boarders**

All boarders are required to register with a local GP (usually [Huntingdon Road Surgery](#)). If a boarder needs to see a GP then the School Nurse will liaise with their parents and the surgery. School staff will facilitate taking a child to see the GP unless their parents would prefer to take them to the appointment.

### First Aiders - Senior House & Boarding House

St John's College School will ensure a ratio of at least one First Aider to fifty people on site. The School will, as a result, comply with or exceed the Health and Safety Executive guidance of 1:50 in a high risk environment. There will always be at least one qualified first aider on site whenever children are present. The First Aiders are able to respond to first aid issues as they arise during the school day, on school trips and in the Boarding House. If a staff member thinks that their job role requires a first aid qualification or they would like first aid training, then they should discuss this with their line manager or the School Nurse.

### First Aiders - Byron House (including EYFS)

The School will ensure that a member of staff with a Health and Safety Executive (HSE) recognised Paediatric First Aid qualification is always available to children in the pre-prep age group in school and on trips, thus complying with Early Years legislation.

A comprehensive list of First Aid qualified staff is included in Appendix 1 of this document. The following members of staff are required, as part of their job description, to hold a suitable First Aid qualification:

- School Nurse
- Boarding House Master / Mistress
- All members of staff who have boarding duties where they may be left responsible for a group of children
- Staff who provide First Aid cover for the Medical Room at Senior House
- Byron House Secretary
- Senior House Secretary
- Byron House Teaching Assistants including EYFS (who must hold a Paediatric First Aid qualification)
- Byron House DT Teacher
- Senior House DT Teacher
- Catering Staff
- Facilities Manager
- Laboratory Technician
- Sports Teachers

### **First Aid Training**

The staff identified above will be obliged to attend an initial appropriate first aid course that is recognised by the HSE and to attend a re-qualification course every 3 years. Courses will be delivered in-house by the School Nurse who has had appropriate training. Courses will be scheduled by the Director of Studies in liaison with the School Nurse to run at the beginning of each Term as required & will take place on the School premises.

### **Chronic Illness and Emergency Care Training**

The School Nurse will provide Anaphylaxis and Asthma training to all staff at the beginning of the Michaelmas term each year. In addition, if a child joins the School with specific medical needs then staff training will be organised as part of the Individual Health Care Planning process.

### **First Training - EYFS Requirements**

Paediatric first aid courses must be EYFS compliant as described in EYFS Practice Guidance.

### **Maintenance of First Aid Training Record**

- The HR & Compliance Officer will inform the School Nurse if a new member of staff joins the school who is required by their job description to hold a First Aid qualification.
- The HR & Compliance Officer will inform the School Nurse if an existing member of staff changes their job description and thereby is required to obtain a First Aid qualification.
- The School Nurse will maintain a list of staff members who hold a first aid qualification.
- After attending a training programme, the member of staff will provide the School with 2 copies of their certificate. One to be kept in the individual's personnel file (to be given to the HR & Compliance Officer) and one to be kept by the School Nurse.
- The HR & Compliance Officer will ensure that training information is maintained on the PASS system.

### **First Aid Boxes**

The School Nurse is responsible for ensuring that all First Aid Boxes meet statutory requirements. All First Aid Boxes are checked every half-term. If a first aid box is used then the first aider must restock the items removed from supplies held at Byron House or Senior House.

### **Critical Injury Packs**

The Critical Injury Packs contain advanced first aid products, designed to treat bleeding injuries that are life threatening. The pack may be provided where the risk of severe bleeding injuries has been identified to supplement first aid kits conforming to the British Standard (BS 8599-1:2019). Staff will be trained on how to use them as they update in a three yearly rotation as needed. There are two of these; one located at Byron House Reception and another at Senior House Reception. The school nurse is capable of using them as needed in an event that would require them.

### **First Aid Boxes - EYFS Requirements**

EYFS first aid boxes are appropriately stocked for the age of the children they are to be used for.

First Aid Boxes are located in the following areas:

#### **Medical Room:**

Sports Kits x3  
Medium Visit Kits x2  
Small Visit Kits x9

#### **Senior House**

Reception  
Kitchen  
Science Laboratory x2  
Music Department  
Swimming Pool  
DT Room  
Art Room

#### **Byron House**

Reception  
Kitchen  
Hall  
Big Room  
1<sup>st</sup> Floor Classroom Block  
DT Room

#### **Boarding House**

Kitchen  
Field Bag  
Chapel Bag

Hinsley Hall  
Back stage

#### **Garden House**

Reception  
First Floor

#### **Other Locations**

Pavilion  
Maintenance Workshop  
Minibuses  
Garden club shed

#### **After-School Performances**

Staff organising after school evening performances are asked to nominate a first aider for the event on the [Events Planning Form](#). If staff are unsure about the appropriate level of cover required they need to seek advice in advance from the School Nurse or Bursar.

#### **After School Performances - Byron House (including EYFS)**

EYFS staff must nominate a suitably trained Paediatric First Aider to provide first aid cover for the event.

#### **School Visits**

When an activity is taking place offsite the designated leader of the party should ensure that they have details of any pupils/children with medical conditions and any treatment they require. They are also responsible for collecting a first aid kit from the School Nurse and for reporting any accidents that occur offsite.

Individual medical needs for all children will be identified on the school [Risk Assessment Form](#) and [Consent and Medical Form for Educational Visits](#). The School Nurse can assist with planning individualised care in advance of the trip. While visit locations have a legal duty to provide first aid cover, the school has a duty of care to ensure pupils remain safe. There must be adequately qualified staff and procedures in place to ensure first aid care can be delivered quickly and safely, without risking further harm to the pupil or placing the rest of the group at risk from being left unsupervised.

Within the current staffing ratio of around 1:10 for visits (1:6 for EYFS), one member of staff is to be appointed the nominated first aider (NFA) by the visit organiser. The NFA is responsible for carrying the first aid kit and visit mobile phone (to be collected from the bursary office). Prior to leaving school the visit organiser is to check that all members of staff have entered the relevant visit mobile phone number into their personal phones. Should a pupil become ill or injured during the visit, the supervising member of staff is to call the NFA for assistance, the NFA will then move to the incident with their group and pass their pupils under the supervision of the teacher of the sick or injured pupil. The NFA can then attend to the child requiring treatment in the knowledge that their own pupils are under supervision.

#### **School Visits - Byron House (including EYFS)**

EYFS staff must nominate a suitably trained Paediatric First Aider to provide first aid cover for the trip. They will need to collect an EYFS first aid kit from Byron House reception.

#### **Dealing With a First Aid Event**

##### **Duties of a First Aider**

- Respond promptly to calls for assistance.
- Give immediate assistance to casualties with injuries or illness.
- Ensure that an ambulance or professional medical help is summoned as appropriate.
- Record details of the accident and treatment.
- Clear the scene safely.
- Replace any first aid supplies used.

The rules of First Aid learned in training must be applied rigorously and professional help summoned if deemed necessary. An Emergency First Aid booklet is available for reference in each box or bag. In addition, specific guidance can be found in the following documents:

- [Guidelines for Dealing with Medical Incidents](#)
- [Guidelines for Staff Managing Head Injuries in Children](#)

- **Head Injury Form**

If in any doubt, the First Aider should summon help from:

- Another School First Aider from the list of First Aiders
- School Nurse: 272752 or 07740 109343
- NHS 111
- Emergency services: 999

A list of all of the First Aiders in the school is kept by the Senior School Secretary and the Byron House Receptionist. There is always a qualified First Aider on duty during school hours, based in the Medical Room at Senior House.

**For Byron House (including EYFS)** during school hours there is always a paediatric trained First Aider located at Byron House Reception.

**For the Boarding House** there is always a qualified First Aider on duty outside school hours.

### **Bodily Fluid Spillage**

Specific guidance can be found in the following documents: **Body Fluid Spillage Policy** (see Appendix 3).

Following an incident within the school or boarding house, any bodily fluids must be dealt with according to the policy. It is the responsibility of first aiders and the facilities department to ensure this is done effectively.

### **Bodily Fluid Spillage - Byron House (including EYFS)**

Any incidence involving bodily fluids at Byron House must also be dealt with in accordance with the policy.

### **Contacting Parents / Guardians**

For all but the most minor consultations, parents/guardians should be contacted if their child has received the attention of a First Aider. This should be done as soon as possible after the event. In the case of a head injury, the **Head Injury Form** should be completed and emailed or given to their parent or guardian. Please refer to **Guidelines for Dealing with Incidents** for further guidance.

### **Accident Reporting**

All accidents/ incidents should be recorded on PASS in the Child's medical records, please refer to the **Medical Records Policy**. Accidents requiring remedial action or referral to hospital or GP must also be reported on the school Accident/ Incident Report Form.

### **Accident Reporting - Byron House (including EYFS)**

For any accident or incident occurring in EYFS, a full written record of any accident, injuries and first aid treatment given will be made using the school **Accident/ Incident Report Form**. All sections of the form will be completed. Parents will be informed of this information on the same day or as soon as reasonably practical.

Completed accident forms will be sent to the School Nurse and Bursar. The Bursar will complete RIDDOR Forms where necessary under the statutory regulations. An over view of all accidents is made by the Bursar to ensure risk assessments are carried out if necessary.

### **Guidance on When to Call an Ambulance** (refer to Appendix 2)

In a life-threatening emergency, if someone is seriously ill or injured and their life is at risk always call 999.

Examples of medical emergencies include (but are not limited to):

- chest pain
- difficulty in breathing such as a severe asthma attack (see Appendix 4)
- unconsciousness
- severe loss of blood
- severe burns or scalds
- choking

- concussion
- drowning
- severe allergic reactions (see Appendix 5)
- diabetic emergencies (see Appendix 6)
- fitting (see Appendix 7)

In an emergency an ambulance will be called by the School Nurse, School Secretary, First Aider or another nominated person.

### **Guidance to Staff for management of Chronic Medical Conditions & Disabilities within School (including Boarders and EYFS)**

As part of the admissions process, parents are required to complete a [Health Questionnaire](#) which highlights on-going medical conditions and any significant past or family medical history. Thereafter, parents are required to update the School Nurse of any other changes that occur throughout the year. Medical information is made available to members of staff within the School if it is deemed important for the safety and wellbeing of the child. For certain medical conditions an Individual Health Care Plan will need to be put in place and is reviewed each term. For children whose condition falls under SENDA, a 'reasonable adjustments checklist' is completed, and a care plan written that is tailored to the needs of the child. This process is co-ordinated by the School Nurse in liaison with parents and relevant school staff. In addition, the School Nurse delivers annual training to all staff on Anaphylaxis and Asthma.

Please refer to Appendices 4-7 for detailed procedures covering Asthma, Anaphylaxis, Diabetes & Epilepsy.

## **Management of Acute Illness**

### **Absence**

If a child is unwell and needs to be kept off school, it is essential that parents telephone or email the School Office on the first morning of absence with brief details. If parents have not communicated with the School, the secretary at Byron House or Senior House will contact parents of an absent child during the morning. For further details, please refer to [Registration & Attendance, Signing In and Signing Out](#). Parents are asked to send an Absence Slip, explaining the child's absence, on the day of his or her return, addressed to the Secretary.

A request to be 'Off-Games' should be addressed to the Form Teacher at Byron House or to the School Nurse at Senior House.

### **Infectious Illnesses (including EYFS)**

Examples are Chicken Pox, Parvovirus, Measles, Mumps, Rubella, Whooping Cough, Scarlet Fever, 'Flu, Vomiting and Diarrhoea. If an infectious illness is suspected or reported in the School, the School Nurse must be made aware immediately. Following current guidelines from Public Health England, the School Nurse will request that a message be sent to members of the School community as appropriate to advise them of the presence of the illness and any measures that need to be taken, liaising with parents as required. This will ensure that parents are aware of the illness, its treatment and the recommended period of time for children who have been infected need to be kept away from school to prevent the illness spreading.

### **Becoming Unwell at School - Senior House**

If a child becomes unwell at school then they will go to the Medical Room at Senior House where an assessment will be made by the School Nurse or a qualified First Aider. Many minor ailments can be treated with non-prescription medication such as paracetamol for a headache. If necessary then parents / guardians will be contacted and suitable arrangements made for the child to go home from school.

The School will follow guidelines set by Public Health England with regard to the recommended period of absence for a particular illness. The aim is to minimise the spread of the illness through the School and we appreciate parents' co-operation in following the guidelines.

### **Becoming Unwell at School - Byron House (including EYFS)**

If a child becomes unwell at Byron House then they will go to Reception where they will be assessed by a qualified first aider, and the School Nurse may be called to attend. If necessary then parents / guardians and / or carers will be contacted and suitable arrangements made for the child to go home from school.

### **Illness in the Boarding House**

The Matron is on hand each morning to administer any medications. She will then note any health concerns that have arisen overnight and liaise with the School Nurse who is on duty from 0800-16.30 during the week. The Nurse will then assess any child that is unwell or injured and decide if they need to see their GP. In this case, the Nurse will liaise with the child's parents to arrange this and a member of the Boarding House staff or a parent will accompany the child to the GP.

Pupils may go back to the boarding house during the school day if they are ill or exhausted. Everyone must know where the boarder is at all times and there must be an adult supervising in the house for the duration of the time that the boarder is there, refer to [Procedure for Sending a Child back to the Boarding House](#).

## **Isolation Area**

This is the annexe, which is self-contained and part of the school, with seating and a bathroom for children from both Byron House, Senior House and the boarding house. This is an area which can be used by children that are traced by the NHS or present during the school day with symptoms that appear to be related to covid. Where they can remain with the school nurse during school hours until collected by a parent or carer. This area will then be cleaned down as needed, 72 hours after being vacated.

## **Medication**

Specific guidance can be found in the following documents:

- [Administration of Medicines Policy](#)
- [Parental Agreement for Medication Administration Form](#)
- [Prescription Medication Record](#)
- [Non-Prescription Medication Formulary](#)
- [Non-Prescribed Medication Record](#)

### **Prescription Medication – Senior House & Boarding House**

If a child is prescribed medication which is required to be administered during the school day, the medicine must be delivered by a parent/carer to the School Nurse. The Parental Agreement for Medication Administration Form must be completed by the parent/carer and the School Nurse will prepare a Prescription Medication Record which must be completed.

### **Prescribed Medication – Byron House (including EYFS)**

Medicine must only be administered to a child where written permission for that particular medicine has been obtained from the child's parent/carer. A Parental Agreement for Medication Administration Form must be completed by the parent/carer, and the Byron House Secretary will prepare a Prescription Medication Record which must be completed. If a child is prescribed medication which is required to be administered during the Byron House school day, the medicine must be delivered by a parent/carer to the Byron House Secretary. Any Medication that is issued to a child at Byron House must be recorded on the Prescription Medication Record. The Byron House Secretary will send an email to parents the same day or as soon as reasonably practicable informing them that their child has been given medication at school. For further information please see the Administration of Medicines Policy.

### **Non-Prescription Medication – Senior House & Boarding House**

A selection of non-prescription medication is available at Senior House and in the Boarding House for the administration of medication in circumstances which do not constitute an emergency, for example giving Paracetamol for a headache. Please refer to the Non-Prescription Medication Formulary for a comprehensive list of the medications available. Parents are asked, as part of the Health Questionnaire, to consent to this procedure. Any Medication that is issued to a child at school or in the Boarding House must be recorded on

the Non-Prescribed Medication Record. For further information please see the Administration of Medicines Policy.

#### **Non-Prescription Medication – Byron House (including EYFS)**

A selection of non-prescription medication is also available at Byron House for the administration of medication in circumstances which do not constitute an emergency, for example giving Paracetamol for a headache. Please refer to the Non-Prescription Medication Formulary. Parents are asked, as part of the Health Questionnaire, to consent to this procedure. For safety reasons, medication cannot be given before 12 noon without consulting a parent or guardian as a child may have already have been given medication before coming to school.

Any Medication that is issued to a child at Byron House must be recorded on the Non-Prescribed Medication Record. The Byron House Secretary will send an email to parents the same day or as soon as reasonably practicable informing them that their child has been given medication at school. For further information please see the Administration of Medicines Policy.

#### **Medication - Boarding House requirements**

All medication is stored in lockable medicine cabinets, and full records are kept of all medication administered using the Prescription Medication Record or Non-Prescribed Medication Record as appropriate. Boarders allowed to self-medicate are assessed as sufficiently responsible to do so, and the confidentiality and rights of boarders as patients are appropriately respected at all times.

## Health Promotion

#### **Sun Protection Policy**

The School takes a proactive approach to protect children and staff against the harmful effects of the sun and has developed a [Sun Protection Policy](#). This policy is sent to parents / guardians at the beginning of every summer term and is always available on the school website.

#### **Immunisation**

Parents are asked to supply details of their child's immunisation history on the [Health Questionnaire](#). The School Nurse will review this information and will contact parents if it appears that some immunisations are missing. Parents are encouraged to contact their GP surgery to arrange for immunisation if necessary. No child shall be denied access to St John's College School due to the fact that they have not received the immunisations recommended by NHS guidelines. Please note that:

- Immunisation against the Human Papilloma Virus has been made available from October 2008 and all children in our Sixth Form are offered the opportunity to be immunised at school.
- The school will support NHS childhood vaccination campaigns such as the NHS 'flu programme for children.



## Appendix 1

### Staff with a First Aid Qualification

NAME	QUALIFICATION DATE	EXPIRY DATE	SUBJECT
BEDFORD, Lisa M	13/12/2022	12/12/2025	Paediatric Infant and Child First Aid Level 3
BROHM, Chantal M	16/01/2022	15/01/2025	Emergency First Aid at Work Level 3
BROWN, Katherine L	02/09/2022	01/09/2025	Paediatric Infant & Child First Aid Level 3
CARTER, Robert J	16/09/2021	15/09/2024	Emergency First Aid at Work Level 3
CHIPPINGTON, Neil R	18/08/2021	17/08/2024	Emergency First Aid at Work Level 3
CLARKE, Julia L	02/09/2022	01/09/2025	Paediatric Infant & Child First Aid Level 3
CLARKE, Timothy W	02/09/2022	01/09/2025	Emergency First Aid at Work Level 3
COBB, Matthew T G	02/09/2021	01/09/2024	Paediatric Infant and Child First Aid Level 3
COPE, Rosemary L	02/09/2022	01/09/2025	Paediatric Infant & Child First Aid Level 3
COX, Charlotte M	14/04/2021	13/04/2024	Emergency First Aid at Work Level 3
CROW, Alan K	14/05/2021	13/05/2024	Emergency First Aid at Work Level 3
DAY, Janice M	02/09/2022	01/09/2025	Paediatric Infant & Child First Aid Level 3
DREWITT, Roger J	14/05/2021	13/05/2024	Emergency First Aid at Work Level 3
FEELY, Sarah L	31/08/2023	30/08/2026	Paediatric Infant and Child First Aid Level 3
FEELY, Sarah L	25/08/2021	24/08/2024	Emergency First Aid at Work Level 3
GILL, Kathryn G	31/08/2023	30/08/2026	Paediatric Infant and Child First Aid Level 3
GILL, Kathryn G	02/09/2022	01/09/2025	Emergency First Aid at Work Level 3
GLITHEROW, Steven P	01/09/2021	31/08/2024	Paediatric Infant and Child First Aid Level 3
GRANT, Anne-Marie	25/08/2021	24/08/2024	Emergency First Aid at Work Level 3
GRAY, Clare M	01/09/2021	31/08/2024	Paediatric Infant and Child First Aid Level 3
HARRIS, Drusilla	02/09/2022	01/09/2025	Emergency First Aid at Work Level 3
HOVELL, Katie E	05/08/2023	04/08/2026	Paediatric Infant and Child First Aid Level 3
IGGLEDEN, Tristan J	02/09/2022	01/09/2025	Emergency First Aid at Work Level 3
KIRK, Simon R	01/08/2022	31/07/2025	Paediatric Infant and Child First Aid Level 3
LEPAGE-DEAN, Oliver R	02/09/2022	01/09/2025	Emergency First Aid at Work Level 3
MAY, Valerie J	21/01/2022	20/01/2025	Emergency First Aid at Work Level 3
MCDERMOTT, Andrew	01/09/2021	31/08/2024	Emergency First Aid at Work Level 3
MILLER, Hannah M	30/08/2021	29/08/2024	Paediatric Infant and Child First Aid Level 3
MILLWARD, David W	30/08/2023	29/08/2026	Paediatric Infant and Child First Aid Level 3
MILLWARD, David W	02/09/2021	01/09/2024	Emergency First Aid at Work Level 3
PEEBLES, Emily C	02/09/2022	01/09/2025	Paediatric Infant & Child First Aid Level 3
ROACH, Jane	01/09/2021	31/08/2024	Paediatric Infant and Child First Aid Level 3
SADLER, Lyndsey J	02/09/2021	01/09/2024	Paediatric Infant and Child First Aid Level 3
TAYLOR, Nicola A	29/08/2021	28/08/2024	Paediatric Infant and Child First Aid Level 3
THOMPSON, Ashleigh N	01/09/2021	31/08/2024	Paediatric Infant and Child First Aid Level 3
THOMPSON, Charles D	02/09/2022	01/09/2025	Emergency First Aid at Work Level 3
WATSON, Liza S	07/05/2021	06/05/2024	Emergency First Aid at Work Level 3
YIP, Kate O	02/09/2022	01/09/2025	Emergency First Aid at Work Level 3

### Contacting Emergency Services

A qualified first aider, the School Nurse or another nominated person will dial 999, ask for an ambulance and then speaking clearly and slowly be ready with the following information:

1. The school telephone number (Senior House: 01223 353532, Byron House: 01223 353817, Boarding House: 01223 327007) or mobile number calling from.
2. The location as follows:
  - The postcode of the building where the ambulance needs to come to (see box below).
  - Give exact location in the school of the person needing help.
3. The name of the person needing help.
4. The approximate age of the person needing help.
5. A brief description of the person's symptoms (and any known medical condition).
6. Inform ambulance control of the best entrance to the school and state that the crew will be met at this entrance and taken to the pupil.

Do not hang up until the information has been repeated back.

Please note that the person calling should be with the child, as the emergency services may give first aid instructions.

**Send a member of staff to wait at the entrance to guide the ambulance service to the person needing help.**

Also ensure that one or more of the following members of staff are informed that an ambulance has been called to the school: Byron House or Senior House Secretary, School Nurse, Bursar, Headmaster, Deputy Headmistress, Byron House Headmistress.

**Ensure that the child's parents / guardians have been contacted.**

**Never cancel an ambulance once it has been called.**

<p>School address -</p> <p><b>St John's College School, then either:</b></p> <p>BYRON HOUSE – 63 Grange Road, Cambridge CB3 9AA</p> <p>SENIOR HOUSE – 73 Grange Road, Cambridge CB3 9AA</p> <p>SPORTS FIELD / PAVILION</p>
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### Body Fluid Spillage Policy

#### Introduction

Blood and body fluids (e.g. faeces, vomit, saliva, urine, nasal and eye discharge) may contain viruses or bacteria capable of causing disease. It is therefore vital to protect both yourself and others from the risk of cross infection. In order to minimize the risk of transmission of infection both staff and pupils should practice good personal hygiene and be aware of the procedure for dealing with body spillages. This document is to be used in conjunction with Public Health England: Guidance on infection control in schools and other childcare settings (September 2014).

There are Body Fluid Disposal Kits available at Senior House reception, in the Boarding House Disabled Toilet and at Byron House reception.

Staff are advised to contact the Head of Maintenance so that he can arrange for a member of his team to help to clean the area appropriately, but the initial clean-up of the situation should be carried out by the person(s) who is at the scene of the incident:

#### Body Fluid Spillage Clean-Up Procedure

1. Cordon off the area until clean-up is completed.
2. Put on disposable gloves from the nearest First Aid kit.
3. Place absorbent towels over the affected area and allow the spill to absorb.
4. Wipe up the spill using these and then place in a bin (which has a bin liner).
5. Put more absorbent towels over the affected area and then contact the Facilities Manager for further help.
6. If a Body Fluid Disposal Kit is available then the instructions for use should be followed. If not then contaminated paper towels need to be placed in a bin with a bin liner, tied up and ideally put in a yellow bin bag or double bagged and put in an outside bin.
7. If the spillage has been quite extensive then the area may need to be closed off until the area can be cleaned correctly.
8. The area must be cleaned with disinfectant following the manufacturer's instructions.
9. An appropriate hazard sign needs to be put by the affected area.
10. The area should be ventilated and left to dry.
11. All reusable cleaning equipment needs to be appropriately disinfected according to the manufacturer's instructions.
12. Anyone involved in cleaning up the spillage must wash their hands.

Please note that:

- The bin that has had the soiled paper towels put in needs to be tied up and ideally placed in the yellow bin or double bagged and put in an outside bin.
- Any article of clothing that has been contaminated with the spill should be wiped cleaned and then put in a plastic bag and tied up for the parents to take home.
- Any soiled wipes, tissues, plasters, dressings etc. must ideally be disposed of in the clinical waste bin (yellow bag). If not available then the gloves being used needs to be taken off inside out so that the soiled item is contained within them. This can be placed in a sanitary waste disposal bin which is regularly emptied.

### **Asthma Emergency Procedures** *(Please also refer to the school Asthma Form)*

#### **Common signs of an asthma attack:**

- coughing
- shortness of breath
- wheezing
- feeling tight in the chest
- being unusually quiet
- difficulty speaking in full sentences
- sometimes younger children express feeling tight in the chest and a tummy ache.

#### **Do . . .**

- keep calm
- encourage the pupil to sit up and slightly forward – do not hug them or lie them down
- make sure the pupil takes two puffs of their reliever inhaler (usually blue) immediately and preferably through a spacer
- ensure tight clothing is loosened
- reassure the pupil.

If there is no immediate improvement, continue to make sure that the pupil takes two puffs of reliever inhaler every two minutes up to 10 puffs or until their symptoms improve.

#### **999**

Call an ambulance urgently for any of the following:

- the pupil's symptoms do not improve in 5–10 minutes
- the pupil is too breathless or exhausted to talk
- the pupil's lips are blue
- you are in any doubt.

Ensure the pupil takes two puffs of their reliever inhaler every two minutes until the ambulance arrives.

#### **After a minor asthma attack**

- Minor attacks should not interrupt the involvement of a pupil with asthma in school. When the pupil feels better they can return to school activities.
- The parents/guardians must always be told if their child has had an asthma attack.

#### **Important things to remember when an asthma attack occurs**

- Never leave a pupil having an asthma attack.
- If the pupil does not have their inhaler and/or spacer with them, send another teacher or pupil to School Reception to get their spare inhaler and/or spacer.
- In an emergency situation school staff are required under common law, duty of care, to act like any reasonably prudent parent.
- Reliever medicine is very safe. During an asthma attack do not worry about a pupil overdosing.
- Send a pupil to get another teacher/adult if an ambulance needs to be called.
- Contact the pupil's parents/carers immediately after calling the ambulance.
- A member of staff should always accompany a pupil taken to hospital by ambulance and stay with them until their parent arrives.

**Do not cancel an ambulance once called, even if the pupil's condition appears to have improved.**

**Anaphylaxis Emergency Procedures**  
(Please also refer to the school EpiPen Policy)

**Anaphylaxis has a whole range of symptoms**

Any of the following may be present, although most pupils with anaphylaxis would not necessarily experience all of these:

- generalised flushing of the skin anywhere on the body
- nettle rash (hives) anywhere on the body
- difficulty in swallowing or speaking
- swelling of throat and mouth
- alterations in heart rate
- severe asthma symptoms (see Appendix 3 for more details)
- abdominal pain, nausea and vomiting
- sense of impending doom
- sudden feeling of weakness (due to a drop in blood pressure)
- collapse and unconsciousness.

**Do . . .**

If a pupil with allergies shows any possible symptoms of a reaction:

- assess the situation
- follow the pupil's emergency procedure closely, these instructions will have been given by the hospital consultant
- administer appropriate medication in line with perceived symptoms

**999**

If you consider that the pupil's symptoms are cause for concern, call for an ambulance (see Appendix 2). State:

- that you believe them to be suffering from anaphylaxis
- the cause or trigger (if known)

While awaiting medical assistance the designated trained staff should:

- continue to assess the pupil's condition
- position the pupil in the most suitable position according to their symptoms

**Symptoms and the position of pupil**

- If the pupil is feeling faint or weak, looking pale, or beginning to go floppy, lay them down with their legs raised. They should NOT stand up
- If there are also signs of vomiting, lay them on their side to avoid choking
- If they are having difficulty breathing caused by asthma symptoms or by swelling of the airways they are likely to feel more comfortable sitting up

**Do . . .**

- If symptoms are potentially life-threatening, give the pupil their adrenaline injector into the outer aspect of their thigh
- Make a note of the time the adrenaline is given in case a second dose is required and also to notify the ambulance crew
- On the arrival of the paramedics or ambulance crew the staff member in charge should inform them of the time and type of medicines given. All used adrenaline injectors must be handed to the ambulance crew

**After the emergency**

- After the incident carry out a debriefing session with all members of staff involved
- Complete an incident form
- Ensure that parents/guardians have replaced any medication used

**Do not cancel an ambulance once called, even if the pupil's condition appears to have improved.**

**Diabetes Emergency Procedures****Hyperglycaemia**

This is when a person's blood glucose level is high (over 10mmol/l) and stays high.

Common symptoms:

- thirst
- frequent urination
- tiredness
- dry skin
- nausea
- blurred vision.

**Do . . .**

Call the pupil's parents who may request that extra insulin be given. The pupil may feel confident to give extra insulin. If a pump is used it should indicate how much insulin to give.

**999**

If any of the following symptoms are present, then call the emergency services:

- deep and rapid breathing (over-breathing)
- vomiting
- breath smelling of nail polish remover.

**Hypoglycaemia**

This is when a person's blood glucose levels are too low (below 4 mmol/l) and may be caused by:

- too much insulin
- a delayed or missed meal or snack
- not enough food, especially carbohydrate
- unplanned or strenuous exercise
- drinking large quantities of alcohol or alcohol without food
- sometimes there is no obvious cause

Common symptoms:

- hunger
- trembling or shakiness
- sweating
- anxiety or irritability
- fast pulse or palpitations
- tingling
- glazed eyes
- pallor
- mood change, especially angry or aggressive behaviour
- lack of concentration
- vagueness
- drowsiness.

**Do . . .**

Immediately give something sugary to eat or drink such as one of the following:

- apple juice or non-diet drink such as cola
- three or more glucose tablets
- five sweets, e.g. jelly babies
- GlucoGel

The exact amount needed will vary from person to person and will depend on individual needs and circumstances, be guided by the person. After 10 – 15 minutes check the blood sugar again. If it is below 4 give another sugary quick acting carbohydrate. This will be sufficient for a pump user but for pupils who inject insulin a longer-acting carbohydrate will be needed to prevent the blood glucose dropping again, such as:

- roll/sandwich
- portion of fruit
- cereal bar
- two biscuits
- a meal if it is due.

If the pupil still feels hypo after 15 minutes, something sugary should be given again. When the child has recovered, give them some starchy food, as above.

### **999**

If the pupil is unconscious do not give them anything to eat or drink; call for an ambulance and contact their parents/carers.

**Do not cancel an ambulance once called, even if the pupil's condition appears to have improved.**

## Epilepsy Emergency Procedures

First aid for seizures is quite simple, and can help prevent a child from being harmed by a seizure. First aid will depend on the individual child's epilepsy and the type of seizure they are having. Some general guidance is given below, but most of all it is important to keep calm and know where to find help.

### Tonic-clonic seizures

Symptoms:

- the person loses consciousness, the body stiffens, then falls to the ground.
- this is followed by jerking movements.
- a blue tinge around the mouth is likely, due to irregular breathing.
- loss of bladder and/or bowel control may occur.
- after a minute or two the jerking movements should stop and consciousness slowly returns.

Do . . .

- Protect the person from injury – (remove harmful objects from nearby).
- Cushion their head.
- Look for an epilepsy identity card or identity jewellery. These may give more information about a pupil's condition, what to do in an emergency, or a phone number for advice on how to help.
- Once the seizure has finished, gently place them in the recovery position to aid breathing.
- Keep calm and reassure the person.
- Stay with the person until recovery is complete.

Don't . . .

- Restrain the pupil.
- Put anything in the pupil's mouth.
- Try to move the pupil unless they are in danger.
- Give the pupil anything to eat or drink until they are fully recovered.
- Attempt to bring them round.

999

Call for an ambulance if . . .

- You believe it to be the pupil's first seizure.
- The seizure continues for more than five minutes.
- One tonic-clonic seizure follows another without the person regaining consciousness between seizures.
- The pupil is injured during the seizure.
- You believe the pupil needs urgent medical attention.

### Seizures involving altered consciousness or behaviour

#### Simple partial seizures

Symptoms:

- twitching
- numbness
- sweating
- dizziness or nausea
- disturbances to hearing, vision, smell or taste
- a strong sense of déjà vu.



### **Complex partial seizures**

Symptoms:

- plucking at clothes
- smacking lips, swallowing repeatedly or wandering around
- the person is not aware of their surroundings or of what they are doing.

### **Atonic seizures**

Symptoms:

- sudden loss of muscle control causing the person to fall to the ground. Recovery is quick.

### **Myoclonic seizures**

Symptoms:

- brief forceful jerks which can affect the whole body or just part of it
- The jerking could be severe enough to make the person fall.

### **Absence seizures**

Symptoms:

- the person may appear to be daydreaming or switching off. They are momentarily unconscious and totally unaware of what is happening around them.

### **Do . . .**

- Guide the person away from danger.
- Look for an epilepsy identity card or identity jewellery. These may give more information about a person's condition, what to do in an emergency, or a phone number for advice on how to help.
- Stay with the person until recovery is complete.
- Keep calm and reassure the person.
- Explain anything that they may have missed.

### **Don't . . .**

- Restrain the person.
- Act in a way that could frighten them, such as making abrupt movements or shouting at them.
- Assume the person is aware of what is happening, or what has happened.
- Give the person anything to eat or drink until they are fully recovered.
- Attempt to bring them round.

### **999**

Call for an ambulance if . . .

- One seizure follows another without the person regaining awareness between them.
- The person is injured during the seizure.
- You believe the person needs urgent medical attention.

**Do not cancel an ambulance once called, even if the pupil's condition appears to have improved.**