



## **Kerem School (Including Kerem Early Years Unit)**

### **FIRST AID POLICY**

#### **1. Provision of First Aid**

The Appointed Person is the person who takes charge in the event that a pupil or staff member is involved in an accident or becomes ill. The Welfare Officer (Lindsay Elliott) undertakes this role at Kerem School (Norrice Lea site) and the Early Years Co-ordinator at the Kerem Early Years Unit.

The Appointed Person (Lindsay Elliott) will ensure that:-

- (a) All First Aid boxes contain adequate and up to date contents and are marked with a white cross on a green background. List as advised by First Aid Trainers.
- (b) In the event of an accident or illness that an Ambulance or other professional help is summoned if required.
- (c) The Nominated First Aiders are adequately and periodically trained in the provision of First Aid every 3 years.
- (d) Early Years staff have Paediatric First Aid training every 3 years.
- (e) All teachers have a basic knowledge of First Aid and Paediatric First Aid training.
- (f) A portable First Aid kit accompanies all offsite activities.
- (g) There are up to date health plans for each child with a specific medical condition and staff are aware of medication and treatment needed. (See Administration of Medicines Policy)

In Kerem School, Norrice Lea site, First Aid boxes are provided in the dining room, the office and the outdoor sports cupboard. In Kerem Early Years Unit, First Aid boxes are provided in both the upstairs and downstairs toilets. At the EYU, all staff have Paediatric First Aid training and all staff will have been trained in basic First Aid. The Nominated First Aiders at Kerem School (synagogue premises) are currently Mrs Elliott and Gail and, at the Kerem Early Years Unit Miss Cowen has full training and all of members of staff are trained in paediatric first aid (see appendix 2). Other staff may become Nominated First Aiders upon completion of appropriate training and award of a First Aid certificate. There will always be at least one qualified first aid (paediatric in EYFS) on each school site, whenever children are present.

#### **2. Emergency Procedures**

##### **2.1 Illness or Accident**

If anyone should become ill or suffer injury the procedures below should be followed.

- (a) First Aid should be rendered wherever possible by a Nominated First Aider. Therefore a Nominated First Aider should be immediately summoned in the event that someone becomes ill or suffers and injury. The patient should be given all possible reassurances, and if absolutely necessary, removed from danger.
- (b) The First Aid posts are the Dining Room and the office in Kerem School and the office in Kerem Early Years Unit. However it may be necessary to administer First Aid at the location of person requiring it. In an emergency if the person requiring First Aid needs to lie down, the School Medical room is used (located downstairs in the female cloakroom). Careful hygiene procedures are in place for dealing with spillage of bodily fluids. The area is sealed off quickly to avoid contamination and a caretaker informed as soon as possible to remove any spillage on the floor.

Gloves are worn when disposing of bloody or soiled tissues. These are then disposed of through a double bagging system and placed in a sanitised box near the Medical Room.

- (c) If an ambulance is required, the emergency “999” service should be used. Hatzola (number on office phones) should be contacted first as their response is usually faster. If the Appointed Person decides that calling an ambulance is not appropriate, then she will make contact with the pupil’s parent to pick the pupil up from the school premises.
- (d) As soon as possible after the incident, every case of injury or accident must be fully and accurately reported in the Accident Book and, where possible, detailed statements should be obtained from witnesses. The Accident Book is kept in the school office on both sites. The Head Teacher will investigate all accidents that require an entry to be made in the Accident Book and will report periodically to the Vice Chairman of Governors.
- (e) An accident report must be completed in the Accident Book in the school office for accidents or incidents requiring an ambulance to be called, whether for employees, pupils, members of the public. Where necessary, the accident/incident should be reported in accordance with RIDDOR requirements. (See Appendix 1 for classification of serious/major injuries requiring reporting for RIDDOR). All records will be kept for three years after the date of an incident.
- (f) A central record will be kept of all instances where First Aid has been given to staff, pupils or visitors by either Nominated First Aiders or the Appointed Person.
- (g) All pupils with identified specific medical needs must have an Individual Health Plan in accordance with the administration of Medicines policy. The School will be responsible for following the procedures set down in a pupil’s Individual Health Plan.
- (h) Medical records shall be kept in the School offices.

Appendix 3 gives clear instructions on Kerem’s accident reporting procedure and should be followed.

Reviewed September 2017. Next review September 2018.

## **APPENDIX 1**

### Definition of Major Injury Accidents

The following accidents must be reported to the HSE as quickly as is possible. A report must also be sent within 15 days using the HSE’s website at [www.hse.gov.uk/riddor/reportable-incidents.htm](http://www.hse.gov.uk/riddor/reportable-incidents.htm). The incident Contact Centre (ICC) is open from 8.30 to 5.00 Monday to Friday on 0845 300 9923.

- fractures, other than to fingers, thumbs and toes
- amputations
- any injury likely to lead to permanent loss of sight or reduction in sight
- any crush injury to the head or torso causing damage to the brain or internal organs
- serious burns (including scalding) which:
  - covers more than 10% of the body
  - causes significant damage to the eyes, respiratory system or other vital organs
- any scalping requiring hospital treatment
- any loss of consciousness caused by head injury or asphyxia
- any other injury arising from working in an enclosed space which:
  - leads to hypothermia or heat-induced illness
  - requires resuscitation or admittance to hospital for more than 24 hours

Injuries that lead to a person being incapacitated (absent, or unable to do their normal work which he or she would reasonably be expected to do) for over seven consecutive days (starting the day after the accident and includes weekends and rest days) must also be reported to HSE. The report must be made within 15 days of the accident.

## **APPENDIX 2**

### **Sports First Aid**

- Daniel Moses - March 2015

### **Safe & Sound Paediatric First Aid Blended Course**

#### **Completed on 04/01/16**

- Lindsay Elliott
- Judith Wolinsky
- Tracey Cowen
- Sabiha Dalwai
- Sharon Walters
- Shosh Hill
- Ruth Stahl
- Sarah Brand
- Chaya Gorman
- Gideon Forbes
- Hayley Rosenberg
- Carly Vinokur
- Zach Ford
- Alyson Burns
- Lindsay Elliott
- Gill Borman
- Anna Godlfarb
- Nicole Teacher
- Michele Ellis
- Avital Fisher
- Nicole Wise

### **First Aid in the Work Place**

- Gail Buranathai - May 2017

### **First Aid at Work**

- Lindsay Elliott – August 2016

### **Safe and Sound Paediatric First Aid Blended Course**

#### **Completed on Friday 2<sup>nd</sup> September 2016**

- Hannah Landsberg
- Julia Dagul
- Rita Gigi
- Nadine Stalick
- Miriam Haziza
- Karen Leader
- Aviva Shoolman
- Dani Reindorp

### **Paediatric First Aid**

- Gail Buranathai – August 2017

# **A-Z OF FIRST AID PROCEDURES**

## **Accidents**

Accidents to staff or pupils which require first aid should be reported and an accident report in the Accident Book completed. Serious playground accidents etc are recorded in the incident book by Mrs Elliott or whoever treats the pupils.

## **Asthma Management**

Children with Asthma are encouraged to keep their asthma puffer/preventer with them. Pupils must take asthma puffers to sports lessons.

## **Classroom illness/injury**

All injuries or illnesses that occur during class time will be monitored by the classroom teacher and, if necessary, referred to Mrs Elliott or Gail for First Aid. When students in the class require First Aid the classroom teacher will send the student to the office. Serious injuries or illness are assessed by suitably qualified staff. If necessary a parent of an ill child or, in a parent's absence, an 'emergency contact' will be contacted and asked to take the child home. The child is signed out of school in the register.

## **Educational Visits**

Field trips and visits from school require careful planning. (See Outings policy). Staff leading visits should always take with:-

- a list of pupils in the party
- home phone numbers of pupils
- a basic first aid kit
- a mobile telephone.

## **Emergencies - Illness or Accident**

If anyone should become ill or suffer injury as a result of an accident the procedures below should be followed.

- First Aid should be administered, but only as far as knowledge and skill permit. The patient should be given all possible reassurances, and if absolutely necessary, removed from danger.
- The First Aid post is in the school office. Mrs Elliott and Gail are trained First Aiders. If circumstances necessitate it, one of the above named should be summoned immediately to tend to the patient. Staff throughout the school have received training in basic First Aid to enable them to deal with situations in the playground and on educational visits.
- Transport to hospital. If an ambulance is required the emergency "999" or "112" service should be used. Hatzola (0300 999 4 999) should then be contacted. It may be appropriate to transport a pupil to a casualty department without using the ambulance service but it should be noted that this should always be on a voluntary basis. Where possible contact should be made with a parent to take the child to hospital. These will be cases of a less severe nature than those requiring transport by ambulance. No casualty should be allowed to travel to hospital unaccompanied.

- Accident Book. As soon as possible after the incident every case of injury or accident must be fully and accurately reported in the Accident Book and, where possible, detailed statements should be obtained from witnesses. The Accident Book is kept in the school office. The Head may need to investigate the accident further and may report to the Governors. An accident report must be completed for all major accidents (to employees, pupils, members of the public) in the Accident Book in the school office, and an entry must be made in the incident register, which is held in the school office for minor injuries. (See 'Major Injury Accidents and Conditions' on next page for classification of serious/major injuries)
- All pupils with identified specific medical needs must have a written treatment plan. A protocol must be signed by parents on entry to the school (or as soon as a condition is identified) – See Appendix 2. First Aid equipment for each pupil is in their classroom and the office. There are clear instructions for each pupil. These should be displayed clearly as should the location of the medicine.

## **First Aid**

Children at Kerem School needing first aid or medical attention should be sent to Mrs Elliott or Gail.

At the EYU all staff are qualified to administer paediatric first-aid.

## **First Aid Equipment**

First aid boxes are provided in the office, the dining room and the outdoor sports cupboard, and a small kit is in each classroom. The EYU first aid boxes are located in the downstairs toilet and upstairs large toilet.

## **Medical Information**

On entry to school, medical information is required to assist staff in their duty of care. The onus is upon the parent/guardian to ensure that medical information including emergency contacts is accurate and up-to-date, including Asthma management plans and Individual Health plans.

## **Medication**

The school acknowledges that certain students may require prescribed medication during the school day. No medication will be administered to children without the expressed written permission of the parents/guardians. A medication proforma is to be completed and returned to the school office each time medication is to be administered. These forms are available upon request from the office in the main school and Mrs Kirschner in the EYU.

Medication is to be stored in the fridge or medical cabinets clearly labelled. Medication cannot be stored in the child's bag or within the classroom (except asthma inhalers). Parents/guardians are able to come to school and administer medication to their child. Please inform the office staff and class teacher.

## **Playground Accidents**

Staff on playground duty should have a First Aid kit with them. If there is a serious injury the teacher will summon help from the office or, if necessary, the security guard.

## **Serious injury/illness**

Serious injuries or illness are assessed by suitably qualified staff. In the case of serious accident, the parent/guardian, or in their absence an 'emergency contact' will be contacted as soon as possible. The immediate action to be taken will be decided by the Head Teacher, Deputy or delegate. All staff members have the authority to call an ambulance immediately in an emergency.

Parents/guardians of ill children or, in their absence, 'emergency contacts' will be contacted to take the child home or to hospital.

All staff need to be aware of pupils with serious allergies who might require EpiPens. Information about these pupils is displayed in the office, Dining Room, Staff Room and classrooms.

## **Treatment of Injury**

Cuts and abrasions are treated with water/antiseptic wipes only and covered with normal plasters if needed. Antiseptics and creams will not be used.

Regular plasters/adhesive tapes will be used on a child unless parents/guardians indicate on the medical register that other adhesive dressings should be used.

Ice will be used on injuries, where needed. It will be applied for short periods of time to the site of the pain. A cold compress will be applied to minor head/facial injuries.

## **Major Injury Accidents and Conditions**

These are defined as follows:-

- Extreme loss of blood (including prolonged loss of blood from a nose bleed).
- fracture of the skull, spine or pelvis
- fracture of any bone in the arm, wrist, leg or ankle (but excluding a bone in the hand or foot)
- amputation of a hand or foot
- amputation of a finger, thumb or toe, or any part of these if the bone/joint is completely severed
- the loss of sight of an eye, a penetrating injury to an eye, or a chemical or hot metal burn to an eye
- either injury (including burns requiring immediate medical treatment or loss of consciousness, resulting in either case from an electric shock from any electrical circuit or equipment, whether or not due to direct contact. (This therefore includes cases where a person is injured by arcing or flashover without actually touching live equipment)
- loss of consciousness resulting from lack of oxygen
- any acute illness requiring medical treatment, plus any loss of consciousness resulting (in either case) from the absorption of any substance by inhalation, ingestion or through the skin
- acute illness requiring medical treatment where there is reason to believe that this resulted from exposure to a pathogen or infected material
- Any other injury which results in the injured person being admitted immediately into hospital for more than 24 hours.