Exeter School

First Aid Policy

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1. OVERVIEW

Exeter School is fully committed to taking all reasonable steps to ensure the health and safety of its pupils and staff, as detailed in its Health and Safety Policy. This policy details the School's First Aid provision in relation to accidents to staff or pupils on School premises or engaged in School-sponsored events out of School hours.

The School's First Aid provision on site is wide-ranging and supported by easy access to the Accident & Emergency Unit of the RDUH Hospital, which is located near the Barrack Road entrance to the Senior School.

The school's policy is to carry out written Risk Assessments on a regular basis and the principle of written assessments as a means of preventing risks or reducing them to a sufficiently low level to allow an activity to go ahead, is seen as essential. Exeter School will do its best to minimise risks, but it cannot guarantee a risk-free education for its pupils.

2. ILLNESS / INJURY TO PUPILS DURING SCHOOL HOURS

2.1. IMMEDIATE ACTION

The member of staff in charge of the lesson, sporting activity or extra-curricular activity should render appropriate emergency first aid, as necessary, and decide whether the condition merits further medical attention. If further medical attention is required, the school nurse (ext. 227) should be informed at once (tel. ext. 227 or 282) or if unavailable, a qualified first aider, initially via contacting the staff in the Bursary (ext. 282).

If necessary, an ambulance will be called, but the pupil must remain with a member of staff who has a first aid qualification. **The Bursary staff must be informed when an ambulance is called.**

In all cases the member of staff concerned should inform the Head's PA of the incident, who will notify the form tutor and head of year and inform a member of SLT The form tutor will telephone the parents (at work if necessary) and take any other administrative action. In the event of appropriately qualified staff not being available, the member of staff in charge must continue to take full responsibility for dealing with the pupil until another suitable adult can be found to take over.

2.2. JOURNEY HOME

If the pupil is not well enough to go home unaided, then their parents should be asked if they can fetch him or her, failing this a taxi should be ordered (for pupils over the age of 16 and in the Exeter area only).

2.3. ACCOMPANYING TO HOSPITAL

Every pupil going to hospital must be accompanied by an appropriate adult, who will stay with the pupil until their parent or guardian arrives, or they are able to go home.

2.4. HEAD INJURIES

Children frequently sustain minor head injuries, but it is nonetheless important that procedures are in place for reporting any head injury, and that there is clear understanding of what symptoms and signs should be looked for in children who have sustained a head injury at school. Following a head injury in the Junior School, pupils will be assessed by a first aider and any necessary treatment will be given. The school nurse will be called for further advice if the first aider attending to the pupil is concerned. Senior School pupils will be seen by the school nurse/first aider in the medical room or attended to by the school nurse if not able to be moved.

Any pupil who sustains a head injury, however minor, will be given advice on head injuries and will be advised to return to the first aider/school nurse if they feel more unwell while at school. Parents will be contacted to make them aware if a pupil has sustained a head injury or if any mark, bump, or cut has been caused by the injury and advice given. https://www.nhs.uk/conditions/head-injury-and-concussion

If an adult or a child who has had a head injury has any of the following, they must go to A&E:

- a bruise, swelling or cut that's larger than 5cm on their head
- an open wound on your head
- been knocked out but have now woken up
- vomited (been sick) since the injury
- a headache that does not go away
- a noticeable change in behaviour, like being more irritable, losing interest in things around them or being easily distracted (especially in children under 5)
- the person with the head injury has been drinking alcohol or taking drugs just before the injury
- the child has been crying more than usual (especially in babies and young children)
- have problems with memory
- a blood clotting disorder (like haemophilia) or they take medicine to help prevent blood clots
- had brain surgery in the past

Symptoms sometimes do not appear until a few days or weeks later. Also go to A&E if you think someone has been injured intentionally.

Call 999 if:

Someone has hit their head and has:

- been knocked out and has not woken up
- difficulty staying awake or keeping their eyes open
- a fit (seizure)
- fallen from a height more than 1 metre or 5 stairs
- problems with their vision or hearing
- a black eye without direct injury to the eye
- clear fluid coming from their ears or nose
- bleeding from their ears or bruising behind their ears
- numbness or weakness in part of their body
- problems with walking, balance, understanding, speaking or writing
- hit their head at speed, such as in a car crash, being hit by a car or bike or a diving accident
- a head wound with something inside it or a dent to the head

Also call 999 if you cannot get someone to A&E safely. Do not drive to A&E. The person you speak to at 999 will give you advice about what to do.

Help from NHS 111

If you're not sure what to do or are worried about a head injury, call 111 or get help from 111 online. NHS 111 can tell you the right place to get help.

2.5. CONCUSSION

If a pupil sustains a head injury and concussion is suspected, the Graduated Return to Activity and Sport (GRAS) protocol will be initiated. The school nurse, school staff or pitch side coaches can diagnose a concussion injury if trained and confident to do so. Parents will be informed of all suspected/concussion injuries and a copy of the school's guidance on the GRAS protocol will be emailed to parents by the school nurse. Parents will be advised to seek further medical advice if they are concerned. If concussion is diagnosed, the pupil will be 'off games' for a minimum 48hrs and in line with the GRAS protocol, , they will be added to the concussion list and form tutors, heads of year, sports staff and other necessary staff in school will be made aware by the school nurse. After a minimum of 48hrs and only if symptoms allow, the school nurse will assess if the pupil is able to commence a GRAS. The sports staff will support and guide the pupil through a series of exercises to gradually return them to full sport in school. More information regarding GRAS is available on the sports page of the intranet under 'Sports Health'.

2.6. INJURIES AT HOME MATCHES

The responsibility in the first instance lies with the member of Exeter School staff who is in charge of the match. As they may well be the referee, he/she may need to seek further adult help where possible - e.g., school physio, other staff, or parents on the touchline. The first aid kit must always be available beside the pitch. Injuries must be reported as detailed below.

2.7. INJURIES AT AWAY MATCHES

Injuries to Exeter School pupils will normally be dealt with medically by the 'away' school first aid staff, but it is, of course, the responsibility of the member of staff in charge of the team to take care of the pupil in question. If the pupil is hospitalised, the Exeter School staff must ensure that an adult remains with the pupil until parental help arrives. Injuries must be reported as detailed below.

It is the responsibility of pupils and their parents to report head injuries which occur at club and fixtures external to Exeter School

2.8. REPORT

All injuries or illness affecting pupils should be reported to the school nurse as soon as possible and the procedures laid down in the Accident Reporting Policy must be followed. All injuries will be logged on the pupil's confidential health notes in iSAMS. All injuries which have been caused as a result of any school apparatus or equipment, injuries which leave any mark/bump/cut or damage to the pupil and injuries caused by sporting activities will need to be recorded and an Accident/Incident form will be completed.

3. SPILLAGE OF BODY FLUIDS

Any spillage of body fluids must be reported to the Operations Team for thorough cleaning. Body fluid disposal kits are kept by the school nurse and the operations team.

4. SCHOOL MEDICAL ROOM, STAFFING AND FIRST AID KITS

4.1. MEDICAL ROOM

The School Medical Room is located within the Bursary. It is manned throughout school hours either by the school nurse or, in their absence, by qualified first aiders who have completed an Appointed Persons qualification.

The school nurse is on site five days a week to cover first aid and be available for pupils who wish to talk privately about concerns they may have. The school nurse also provides advice to staff relating to general concerns they may have about pupils.

4.2. FIRST KITS

These are located in the following areas of the school:

Main Hall Foyer	Alumni	Bursary
Andrews Hall	Admissions	Minibuses x10 and people carrier
Music Hall	Kitchen	CCF Store
Sports Department	Reprographics	Firing Range
Swimming Pool Reception	Drama	Armoury
Gym	DT x2	Operations x4
Staff Common Room	Art x2	Garage
Head's Office	Science x3	Groundman's Office
Library	History Office	Cricket Pavilion
Daw Building Foyer	Modern Foreign Languages Office	Astro Sports Cabin
Sixth Form Centre	GJM Office in Wolfson	Maintenance Vehicle
Junior School Office	Classics Office	

An Emergency Salbutamol Inhaler Kit is kept in the Swimming Pool Reception and Generic Adrenaline Auto-injectors (EpiPens) can be located in the Swimming Pool Reception, Dining Hall and Medical Room.

There are also x4 Generic Adrenaline Auto-Injector kits held in the PE Office. These are available for sports staff to take on sports fixtures in the event that a pupil does not have their own Adrenaline Auto-injector. Please see Allergy and Anaphylaxis policy for further information.

All emergency medication kits are checked monthly by the school nurse.

The school nurse is the co-ordinator of the first aid kits and is responsible for restocking them termly. First aid kits are also available to be taken on school trips – please see the Off-Site Trips and Visits Policy for further details.

4.3. FIRST AIDERS

A list of Staff holding First Aid Qualifications is held by the Bursary Office Manager.

5. HEALTH ARRANGEMENTS FOR PUPILS AT SCHOOL

Parents are required to complete a Confidential Health Questionnaire when their children join the school. The following guidelines are published to parents through the New Parents Handbook.

- Pupils who are already sick should not be sent to school.
- Those who become ill during the school day must report to the Medical Room in the Bursary.
- No ill pupils are allowed to go home without permission of the school nurse, Bursary first aider and/or Heads of Year, Heads of Section or Form Tutors.

- There is a signing out book at the Head's office that must be filled out before leaving the premises for appointments.
- Pupils with regular medication, i.e., antihistamines (for hay fever), tub grip (for sports injuries), must provide their own. The school cannot be expected to supply this except in unavoidable circumstances.
- If children are unable to play sport, parents must email offgames@exeterschool.org.uk This cannot be provided by the medical room.
- Pupils prescribed an Adrenaline Auto-Injector should always carry at least one with them (Senior School), and it is recommended that parents provide a second, in date spare Adrenaline Auto-Injector to be held in the medical room. This is then taken as a spare, by staff, on school trips and sporting fixtures. Sixth form pupils are encouraged to take responsibility for their own health and should be encouraged to carry two in date spare Adrenaline Auto-Injectors with them at all times. For Junior School pupils, x2 in date Adrenaline Auto-Injectors should be provided by parents and will be kept in the Junior School office. Trip leaders and sports coaches will check that pupils have their prescribed Adrenaline Auto-Injectors with them prior to any off site activity, please also see the Allery and Anaphylaxis Policy.

Pupils with particular medical conditions (e.g. asthma, epilepsy, diabetes, severe allergy will have an Individual Healthcare Plan held by the school nurse and a 'red flag' on their iSAMS record visible to all staff. Pupils with asthma should carry their inhaler with them in their school bag. Pupils with diabetes should have a snack/glucose tablet in their bag to treat hypoglycaemia and a glucometer. Any emergency medication will be named and held in an unlocked cupboard in the Medical Room. The school nurse ensures that all staff have regular updates on the use of Adrenaline Auto-Injectors and other emergency medication.

Parents are asked to update the school nurse of any changes in medical circumstances which may affect their child during his/her time at the school.

6. STORAGE OF MEDICATION

All medication purchased by the school nurse is kept in a lockable cupboard in the Medical Room and records of medication administered to pupils are kept on each pupil's confidential iSAMS record.

The school nurse holds a spare Salbutamol Inhaler for use by pupils who have been prescribed one and where parents have consented.

7. ADMINISTERING MEDICATION

Pupils are not permitted to carry any medication on them while in school. The school nurse stocks basic over the counter medicines and will be able to dispense these with parental consent. The form required for parental consent is below as Appendix 2. The following is a list of medication which may be given to pupils if they attend the first aid room in the bursary and can be given to a pupil if their parent has consented to this:

- Paracetamol tablets
- Calpol six plus or other paracetamol suspension
- Lemsip (from age 16)
- Ibuprofen (from age16 or separate parental consent)
- Antihistamines - Loratadine/Cetirizine Hydrochloride 10mg tablets or Benadryl Cetirizine oral solution 1mg/1ml
- Throat Lozenges

- Rennies (from age 12)
- Bonjela junior
- Salbutamol inhaler *
- Antiseptic cream
- E45 cream
- Deep Heat
- Waspeeze
- Freeze spray
- Anthisan cream

* Salbutamol inhalers are for known asthmatics (as identified above).
It is expected that pupils should always have their own inhaler with them. There is a spare asthma inhaler in school, as per government policy:
https://www.gov.uk/government/publications/emergency-asthma-inhalers-for-use-in-schools

At school, the school nurse (or, in her absence, the Bursary staff) and Junior School reception staff should be the only members of staff to give medication to pupils, other than in an emergency.

The only medicines to be administered by non-medical staff are Paracetamol, Ibuprofen, Throat Lozenges, Antihistamines, Lemsip and Dioralyte. Appendix 1 gives further details regarding the processes involved for the administering of medication by non-medical staff.

Prescribed medication must be handed in to the Bursary or to the Junior School reception) in the original packaging with the name of the pupil and the dose required clearly marked.

Senior School pupils who need to take regular medication due to a health condition may carry this on them but only where this has been discussed with parents and where there is an Individual Healthcare Plan (IHCP) in place. The responsibility for this and for the correct administration of the medication lies with the parents.

8. HEALTH AND SAFETY IN SPORT
It is a requirement of the school that pupils wear mouth guards for certain contact sports such as rugby and hockey. Their use may also be advisable, in certain circumstances, for cricket.

The school has available a number of cricket helmets for use by pupils, in net practices, practice games and School matches. The wearing of helmets is now compulsory when batting.

9. FIRST AID FOR STAFF
Both teaching staff and non-teaching requiring first aid should first enlist the support of a colleague who should take the member of the staff to the most convenient of the locations listed above. If any doubt exists as to severity of the injury/illness an ambulance should be called, and the Heads PA/ Bursary notified immediately. All incidents should be reported through the procedures laid down in the Accident Reporting Policy.

8. DEFIBRILLATORS
Sudden cardiac arrest is when the heart stops beating and can happen to people of any age and without warning. If this does happen, quick action (in the form of early CPR and defibrillation) can help save lives. A defibrillator is a machine used to give an electric shock to restart a patient's heart when they are in cardiac arrest. Modern defibrillators are easy to use and safe.

There are five defibrillators in School:

- Medical Room
- On the outside wall of the Chapel
- Swimming Pool Reception
- Sports Hall Entrance Hall
- On the outside wall of the changing rooms by the all-weather pitches

The defibrillators are checked monthly, it is the responsibility of the school nurse to ensure the battery and pads remain in date and are replaced when expired.

The school nurse runs regular training sessions in the use of the defibrillator for all interested staff and pupils.

Appendix 1 - Administration of medicines by non-medical Staff.
There may be times when a pupil is unwell and would benefit from being given an over-the-counter medicine to relieve symptoms of minor illnesses. The only medicines to be administered by non-medical staff are - paracetamol, ibuprofen, throat lozenges, anti-histamines, Lemsip and Dioralyte.

Consent for pupils to be given over the counter medicines is collected on the Confidential Health Questionnaire or individually for each school trip. *Pupils of age can also consent to their own treatment. Where there are issues with parental consent in relation to administering any medication, these will be flagged on iSams.

Any member of staff who is required to administer medication on a school trip will be trained to do so by the school nurse. Information pertaining to a pupil's consent to be given medication will be passed on.

Medicine	**Reason for administration**
Paracetamol 500mg tablets/caplets 1-2 tablets, 4 hourly as required Children 10-15 years 1 tablet, children over 16 years 1-2 tablets Not to exceed 4 doses in 24 hours	Headache, sore throat, toothache, period pain, high temperature, cold and flu symptoms
Ibuprofen 200mg tablets 1-2 tablets 6-8 hourly as required Must not be given to those with asthma For children aged 12 and over only Not to exceed 3 doses in 24 hours	Headache, muscular pain, backache, migraine, period pain, dental pain, high temperature, cold and flu symptoms
Antiseptic throat lozenges (eg Strepsils) Lozenges are to be sucked 2-3 hourly as required	Sore throat and cough
Dioralyte replacement (electrolyte powder) 1 sachet dissolved in water after each loose bowel movement as required	To replace essential body water and salts in the treatment of diarrhoea
Lemsip cold and flu 1 sachet dissolved in hot water Contains Paracetamol 650mg and Phenylephrine Hydrochloride 10mg (decongestant) **For children aged 16 and over** Not to exceed 4 sachets in 24 hours	For the relief of cold and flu symptoms and blocked nose Caution contains paracetamol: check when the child last took a dose of paracetamol.
Certrizine Hydrochloride Antihistamine 10mg Tablets For children aged 12 and over One to be taken daily	For the treatment of cold or allergy symptoms such as sneezing, itching, watery eyes, or runny nose

When giving medicines to pupils the following procedure should be followed:

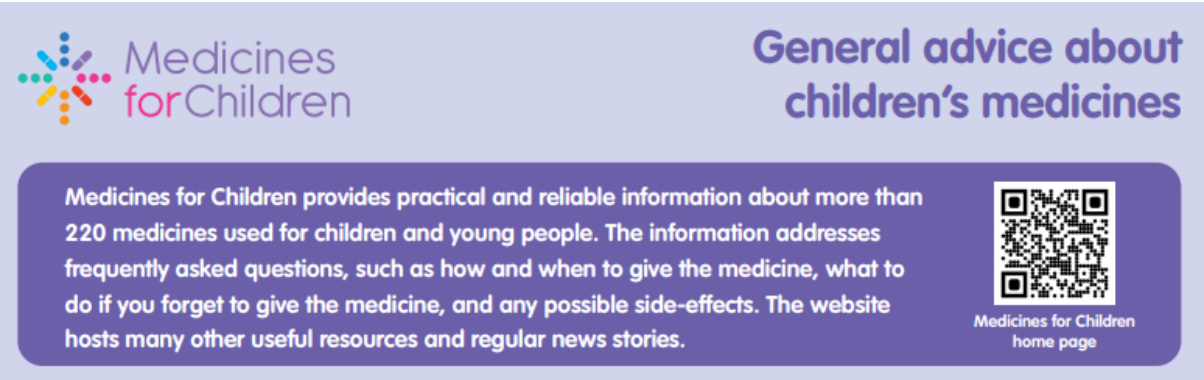
- The reason for giving the medicine should be established
- The contraindications of giving the medication should be known or checked – that is if a pupil has a particular allergy to a medicine or the pupil has a health condition which advises that they should not have particular medicines
    - Asthmatics should not be given Ibuprofen without medical advice as this can bring on an asthma attack
    - Taking Ibuprofen with food is advisable as this medicine can irritate the stomach
- With the pupil, check whether
    - they have taken this medicine before and if not whether they are allergic to any medication
    - they have taken any medication recently and if so what have they taken
- Check the medicine is in date
- Check the age of the pupil and that you give the right dose for their age
- The pupil should be seen to take the medication by the person issuing it
- Any medication given to pupils in school including on school trips must be recorded, this should include the date and time, the name of the pupil, the name and dose of the medication given and reason for giving the medication

Please use the record sheet below when you give pupils any medicines. This should then be returned to the school nurse.

*** Gillick Competence**

The school respects the confidentiality and rights of pupils as patients. This includes the right of a pupil assessed to be 'Gillick Competent' to give or withhold consent for his/her own treatment.

Gillick competence is a term originated in England and is used in medical law to decide whether a child (under 16 years of age) is able to consent to their own medical treatment, without the need for parental permission or knowledge.



Record of medication administered

Pupil Name	Reason medication required?	Treatment given AND CORRECT DOSEAGE	Member of staff administering medication	Date medicine administered	Time medicine administered

Appendix 2 - Parental agreement for Exeter School to administer medicine

The school will not give your child medicine unless you complete and sign this form, and the school or setting has a policy that the staff can administer medicine.

Name of school	
Name of child	
Date of birth	
Group/class/form	
Medical condition or illness	
Medicine	
Name/type of medicine *(as described on the container)*	
Expiry date	
Dosage and method	
Timing	
Special precautions/other instructions	
Are there any side effects that the school/setting needs to know about?	
Self-administration – y/n	
Procedures to take in an emergency	
Parent/Guardian Name	
Daytime telephone no.	
Relationship to child	
Address	
I understand that I must deliver the medicine personally to school staff	

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to Exeter School Staff administering medicine in accordance with the school policy. I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature(s):_____ Date:_____

Parent/Gurdian Name: _____