

# d'Auvergne First Aid Policy

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## **Aims**

The aim of this policy is to set out guidelines for all staff in school in the administering of first aid to children, employees, and visitors. Teachers and other staff in charge of children are expected to use their best endeavours at all times, particularly in emergencies, to secure the welfare of the children at the school in the same way that parents might be expected to act towards their children. In general, the consequences of taking no action are likely to be more serious than those of trying to assist in an emergency.

## **Sharing of Information**

This policy, and policies it references, shall be shared with all employees during their induction. At d'Auvergne, we ensure that we have the required number of trained First Aiders on site and at off-site trips. These staff members receive refresher training as and when required. The list of trained First Aiders is displayed in each classroom and in the school office. This is updated on a regular basis.

## **Class Medical List**

Each class holds an up-to-date class medical list, a list of children with specific dietary requirements and other medical conditions, e.g. asthma. All food allergies/medication requirements that the school has been informed of are displayed in the photocopying/filing room for all staff, including lunchtime supervisors, to be informed of. It identifies whether these children have medication in school for these medical needs. The child is informed that they need to report to a staff member if they begin to feel unwell or experience any concerning symptoms.

## **Children with Specific Dietary Requirements**

A full risk-assessment must be completed when food-tasting activities take part at school. Staff are to consider all known dietary requirements and how to minimise risks. Staff are also to complete the Level 2 Food and Hygiene training prior to preparing any food for children at school.

## **Children with Specific Needs**

It is the responsibility of the SENCO to share information and the responsibility of each member of staff to familiarise themselves with the medical plan for children with specific needs. Staff will receive additional training where specialised equipment is required, such as breathing apparatus.

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### **School Staff Training**

A person is suitably qualified in First Aid if they have undertaken St. Johns Ambulance Paediatric First Aid course or other approved provider training. Training is updated as often as required.

School staff are trained by the School Nurse in the administration of treatment in the unlikely event of an anaphylactic reaction. Training sessions are repeated each year as a refresher for existing staff and as initial training for new staff. This explains the condition, the symptoms and how to respond to an anaphylactic reaction. It also outlines the stages and procedures for giving the treatment.

### **Application**

If a child or adult on-site sustains a major injury or injury of the following nature, then a qualified First Aider must be consulted immediately:

- any respiratory difficulties
- cut or serious bang to the head
- loss of consciousness
- suspected sprain or break
- burns
- stings: i.e. bees/wasps/insects (due to the possibility of allergic reaction)

In addition, a qualified First Aider should be consulted regarding children who are known to have a specific illness i.e. diabetics/pupils known to have allergic reactions/pupils with Epipens in school – irrespective of the type of illness or injury sustained. All staff are trained annually in the administration of Epipens and asthma inhalers.

In the event of a major injury the school will follow the 'Stay Calm and in Control' procedure detailed in the Education Department's 'Administration of Medicines in Schools: Health and Safety Operational Policy', a First Aider must be notified first, and an ambulance called immediately after by the First Aider or another First Aider who is supporting. Children with specific needs have a health care plan to ensure their safety; this should always be consulted. There is an additional school policy in place for Administration of Medicines.

### **Procedures**

The member of staff responsible for the child should either carry out first aid, if qualified, or take the child to a First Aider. An informed assessment will be carried out and the appropriate treatment given. Cleaning of cuts and grazes and applying plasters will take place in the first aid room where possible.

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If a child needs to be sent home or to a doctor or hospital owing to injury in school then this must be authorised by the Headteacher or, in his absence, by a member of the senior leadership team. Parents are to be informed of the situation as soon as possible.

In the event of minor injury, once treated, the class teacher must be informed so that they can liaise with parents/carers/after school clubs at the end of the school day. Should the child be feeling unwell or been physically sick in school, the class teacher must be notified so that an informed decision can be made.

If the decision is that the child needs to go home/parents be notified, then the office should be contacted to confirm authorisation with the Head Teacher/School Business Manager and parents contacted.

### **Incident Reporting**

All incidents requiring first aid (whether minor or major) must be recorded in the school First Aid book. This is situated in the photocopying/filing room off the staff room (Appendix 2). All incidents that require hospital treatment must be recorded as a Notifiable Accident by completing a Notifiable Accident report. This should be completed by the First Aider involved and a member of the School Office Team. This on-line recording form can be found on the desktop of all admin users (Admin staff, Headteacher and School Business Manager).

All accidents/injuries and first aid records will be monitored by the Headteacher and School Business Manager to help identify trends as part of the school's risk assessment process.

### **Head Injuries**

The school recognise that accidents involving a person's head can be problematic because the effects of the injury may not be evident and only become noticeable after a period. Where emergency treatment is not required, a phone call will be made, as soon as possible, to the parent / carer to inform them of the incident. The teacher of the child's class will also be informed and a 'Head bump' letter will be completed and sent home with the child for the child's parent / carer. 'Head bump' letters are kept in the accident book in the photocopying/filing room next to the staff room (Appendix 1). These highlight the important symptoms to be observant of.

### **First Aid Materials, Equipment and Facilities**

All staff must acquaint themselves with the position of the first aid kits. These are kept in the first aid cupboard in each classroom (marked with a green cross) and in the first aid room.

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Staff are asked to report any depletion in stock to the Lead First Aider (Yvonne Huelin) who is responsible for replenishing the boxes and for conducting a check of contents (every six months as a minimum).

A first aid kit must be taken out onto the playground during break-times. First aid kits must also be taken on all school trips by the nominated First Aider/s for the group.

The administering of items such as antiseptic creams, etc. are not permitted in case of allergic reaction. Cuts and grazes are treated with gauze, clean water (or saline solution) and Elastoplast plasters / micropore applied where necessary.

### **Body Fluid Spillages – Prevention of Risk of Infection**

Body fluid spillage or contamination (blood, faeces, urine or vomit) that is identified is cordoned off by members of staff immediately and addressed by the Caretaker or Assistant Caretaker. Plastic gloves are always worn whilst managing these spillages. Absorbent material such as paper towels or tissues may be used to limit the spread of liquid soiling. The material may then be more easily scraped into a toilet or a plastic bag for disposal. Cleaning the soiled area with hot water and detergent is usually adequate. Spillage kits are used by the Caretaker for larger quantities of fluid. Hands will be washed thoroughly after cleaning is completed. After clearing vomit or diarrhoea from carpets the Caretaker will clean the area with a carpet shampoo or steam cleaner, if available.

Toilet seats, flush handles, wash-hand basin taps, surfaces and toilet door handles will be disinfected if they have come into contact with the child or body fluid. Hot water and detergent will be used for this purpose. Commercial sanitising sprays and cleaners or alcohol-based wipes may be used on toilet seats and other surfaces after visible soiling has been removed by thorough cleaning.

### **Protection Aids**

Disposable gloves must be worn when dealing with all injuries which involve the loss of blood. Sterile wipes and mouth guards should be used for any resuscitation situations. The appropriate disposal of cleaning and treatment resources is always to be ensured.

### **Off-site Activities**

At least one first aid kit will be taken on all off-site activities, along with individual pupil's medication such as inhalers, epipens, etc. A first aider will accompany all off-site visits.

### **Transport to Hospital or Home**

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If the attending first aider deems the injury/situation to be requiring immediate hospitalisation, then no hesitation should be taken and they are to call '999' as soon as possible and then inform the Headteacher or Deputy Headteacher when possible. Where the injury is an emergency and the child is in immediate danger, an ambulance will be called immediately, following which the parent will be called.

Where hospital treatment is required, but it is not an emergency, then the Headteacher (or a member of the office team in his absence) will contact the parents for them to take over responsibility for the child. If the parents cannot be contacted, then the Headteacher may decide to arrange transport for the child to hospital.

Where the Headteacher arranges transport for a child, all consideration for safety and adequate seat restraint will be made for the travel. No individual member of staff will be left alone with the child in a vehicle.

<b>Published</b>	<b>September 2018</b>
<b>Reviewed by Rena Nelson</b>	<b>October 2024</b>
<b>Review Date</b>	<b>Annually or when required</b>

## **Appendix 1**

d'Auvergne School  
La Pouquelaye, St. Helier, JE2 3GF  
Tel: 01534 625858  
Email: [admin@dauvergne.sch.je](mailto:admin@dauvergne.sch.je)  
Headteacher: Mr R S Cooper

Date:.....

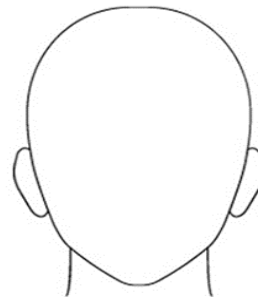
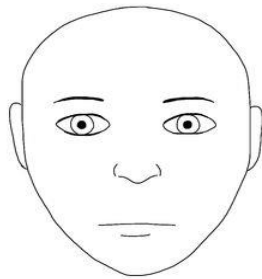
Dear Parent or Guardian

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Your child ..... sustained a head injury today at school and has been assessed by a qualified First Aider.

Please see the location of the injury:



He/she has been observed and he/she seems to have developed no further complications or ill effects. Sometimes, however, the onset of concussion can be delayed and if any of the following symptoms occur, your child should be taken to hospital or seen by your doctor immediately.

If your child:

- Feels sick or vomits
- Becomes drowsy
- Complains of an increasing headache
- Starts to bleed from the nose or ears
- Starts to have a fit
- Becomes confused or irritated
- Develops slurred speech
- Develops any unexplained symptoms

It is always better to be cautious when dealing with bumps to the head.

Yours sincerely,

First Aiders Name:.....

Class Teachers Name:.....

## **Appendix 2**

<b>Date/Time</b>	<b>Name</b>	<b>Incident/Accident</b>	<b>Follow up action</b>	<b>Signed</b>
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