



Bosworth
Independent
School

First-Aid Policy

Reviewed	December 2024
Next Review Date	December 2025
Lead for Review	School Nurse

Contents

Introduction.....	3
Aims	3
Objectives	3
Medical Facilities	3
First Aid Training and Qualifications.....	3
Accident Procedure.....	4
Illness	4
Off Site Visits.....	4
First Aid Kit Provision	5
Students' Medical Conditions.....	5
Hygiene/Infection Control	5
Emergency Procedures	5
Head Injury	6
Accident Recording.....	6
Informing Parents	6
Additional Notes	6
Appendix 1 Key Points.....	8
Appendix 2 Management of Asthmatic Students	9
What to Do In The Event Of an Asthma Attack.....	10
Careplans / Staff Training.....	10
Appendix 3 Management of Diabetic Students	10
Careplans/ Staff Training.....	11
Medication.....	11
Medication Supplies	11
Offsite	11
Appendix 4: Current List of First Aid Trained Staff.....	12

Introduction

Bosworth Independent School will undertake to ensure compliance with the relevant legislation, NMS, DFE guidance and Health & Safety good practice with regard to the provision of first aid for students, staff and visitors and will make sure that procedures are in place to meet that responsibility.

Aims

- To identify the first aid needs of the School
- To ensure that first aid provision is available at all times when people are on School premises, and also off the premises whilst on School trips subject to DFE and other legislative guidance and requirements consistent with good practice.
- To ensure that first aid is delivered in a timely and competent manner when needed.

Objectives

- To appoint the appropriate number of suitably trained people as First Aiders to meet the needs of the School and to maintain current qualifications for those people
- To provide relevant training and ensure monitoring of training needs
- To provide sufficient and appropriate resources and facilities
- To inform staff and parents of the School's first aid arrangements
- To keep accident records and to report to the HSE as required under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR)

Medical Facilities

The School is required by the National Minimum Boarding Standards to ensure that suitable accommodation is provided in order to cater for the medical and therapy needs of students.

The School Medical Room and Sickbay are located at The Newton Building.

First Aid Training and Qualifications

There will, at all times be First Aid Trained Staff available for students whilst they are in School. All Boarding Staff are required to undertake First Aid Training and receive an update every 3 years (Appendix 4).

The School Nurse is a qualified Registered Nurse who, when on duty, will take the lead in First Aid/Health related matters. All staff will either send students to her in Bosworth Hall or call her to wherever she is required. The Nurse will delegate duties to other staff as and when necessary in order to maximise care of students. It will on occasions be necessary to prioritise where she needs to be.

When the Nurse is not on duty, First Aid trained staff will deal with each situation as per their level of training. If required, they can contact Bosworth's nominated GP surgery Leicester Terrace Health Care Centre 01604 633682 (Boarding Students) or between 6pm and 8am/plus Weekends 111 or 999 as appropriate. In the case of Day Students, parents should be notified of serious injuries or if their son/daughter becomes unwell during the School Day. Those under 16 must be collected by a Parent/Guardian.

The member of staff who is On Call 'Out of Hours' should be informed Tel: 07971590398

Staff have a duty to inform the School Nurse of all First Aid/Health issues via The Data Management System as soon as possible to maintain student records and for any required after care. The Head teacher, Assistant Heads and Head of Boarding will be notified of any serious incidents which occur.

Accident Procedure

1. An adult at the scene of an accident needs to make a quick assessment of the severity of the accident.
2. Small cuts and grazes
 - a. Small cuts and grazes occurring during a lesson can be cleaned and a plaster applied if the injury occurs in an area where there are first aid boxes. This enables the lesson to continue with minimum disturbance to the teacher or class.
 - b. Students who sustain an injury of this type at School outside lessons should be told to report directly to the Nurse.
3. Serious Injuries are any injuries that may require a qualified First Aider or medical attention.
 - a. Send a messenger to Reception to request an ambulance if the need is obvious. If possible, the person with the casualty should call an ambulance (for example via mobile phone) as the Ambulance control will want full details of the casualties condition); dispatch another to meet the ambulance and direct it to the incident. The Nurse, if on duty should be notified.
 - b. For lesser emergencies call for a nominated trained First Aider to make an assessment and if necessary contact the Nurse for advice.
 - c. Stay with the casualty while waiting for assistance.
5. Accident Report Forms must be completed for all injuries by the person who has dealt with the injury and sent to Head of Operations.

Illness

Any student feeling unwell should be initially assessed by a trained First Aider in the building they are in at the time. If after assessment and the First Aider requires additional assistance then the Nurse should be notified. On the instruction of the nurse the student maybe sent to the Medical Room accompanied by another student if necessary, who should be told to return as soon as the student is received by the Nurse OR the nurse may decide to walk to the building in which the student is.

Any student having difficulty with breathing, dizziness, or feeling faint must remain with a teacher or other member of staff. A messenger should be sent to fetch the Nurse or in her absence a First Aid Trained member of Staff. A list of staff qualified as First Aiders and Appointed Persons, at the date of publication of this Policy, is in Appendix 4. This list will be kept up to date, made available on the notice board in the Staff Room, and published in the Staff Handbook.

Off Site Visits

It is the responsibility of the member of staff taking students 'off site' to liaise with the Nurse about any pre-existing medical conditions and to follow any advice given. A First Aid Kit must be taken on all 'off site' occasions.

First Aid Kit Provision

First aid kits are available at the following locations:

- The Medical Room
- Bosworth Hall Reception
- The Newton Building Reception
- All floors of The Newton Building (marked on map)
- Science laboratories (Bosworth Hall)
- Science Prep Rooms
- Bosworth Hall Kitchens
- All Boarding Houses

Off site visits: Portable first aid kits available from the School Nurse.

Sports: PE Staff have their own portable kits.

The School Nurse is responsible for restocking First Aid Kits. Staff must notify her if stock is low or if expiry dates are reached. Boarding staff and Reception staff are responsible for checking each Kit at the end of every half term. The Nurse is responsible for checking the science laboratories annually and maintaining sufficient stock for the Medical Centre.

Students' Medical Conditions

A list of students who suffer from medical conditions, together with details of those conditions, is updated by the Nurse as conditions arise. Copies of this list are kept on the Sharepoint Individual health care plans are prepared for students with a more serious medical condition, such as diabetes, anaphylaxis or epilepsy, and information is available to relevant staff who come into regular contact with these students.

Training is provided for staff by the Nurse as the need arises.

Hygiene/Infection Control

Basic hygiene procedures must be adhered to by staff. Single use disposable gloves must be worn when treatment involves blood or other body fluids and disposed of with dressings, etc. in the medical waste bin provided in the Medical Room. Wherever possible, staff should wash their hands before dealing with any first aid issues.

Emergency Procedures

Where an injury or other medical condition is an emergency, an ambulance should be called. Ideally, this will be on the advice of the School Nurse or a First Aider, but there may be circumstances where it is apparent that such a call must be made immediately.

Parents will be informed when an ambulance has been required to be called. If a parent is unable to accompany their child to hospital a member of staff will attend if under 16 or deemed necessary until parents arrive. In the case of a Boarding student a member of staff will accompany them to hospital and remain with them.

Accident Recording

An Accident Report Form is completed for each incident, generally by a person witnessing the events. If not generated by the Nurse, the Report Form is then forwarded to the Head of Operations who will complete any further details required.

Informing Parents

Where the incident has required the issue of medication, or dressings which will need review after School, the Nurse will provide the student with a note to take home or phone the parents.

The parents will be telephoned in the event of any head injury, if an ambulance is called, or any other circumstances where the professional judgement of the Nurse dictates that such contact should be made.

Additional Notes

1. In the event of an injury or illness at work sustained by an employee or a visitor, the School policy is applied to ensure the health, safety and welfare of the person concerned.
2. If a first aid emergency occurs, staff or students reacting should always take care of their own welfare also. For example, staff or students should check the vicinity of the injured person is safe by being careful of traffic or ensuring that the source of injury such as an electric current or a falling object will not endanger them as well.

HEAD INJURY CHECKLIST FOR FIRST AIDERS

Minor head injury symptoms - assess the child for signs of the following:

- Nausea
- Mild headache
- Tender bruising or mild swelling of the scalp
- Mild dizziness

These are signs of a minor head injury – follow the Minor head injury protocol (appendix 4)

If no symptoms – follow Bump to Head protocol (appendix 5)

Severe Head Injury symptoms – assess the child for signs of the following:

- Unconsciousness briefly or longer
- Difficulty in staying awake
- Seizure
- Slurred speech
- Visual problems including blurred or double vision

- ☒ Difficulty in understanding what people are saying/disoriented
- ☒ Confusion (Rule out signs of confusion by asking them the date, where they are, what year group they are in)
- ☒ Balance problems or loss of power in arms/legs/feet
- ☒ Pins & needles
- ☒ Amnesia
- ☒ Leakage of clear fluid from nose or ears
- ☒ Bruising around eyes/behind ears
- ☒ Vomiting repeatedly
- ☒ Neck pain

These are signs of a severe head injury – follow the Severe head injury protocol (appendix 6)

If the Student has either of the following, treat the injury with the Severe Head Injury Protocol and call 999 immediately:

- ☒ If the Student has had brain surgery in the past
- ☒ If the Student has a blood clotting disorder

Minor head injury protocol

Anyone who has suffered a Head injury must be assessed by a competent First aider, who will be using the Head Injury Checklist. Contact parent to notify of head injury and communicate plan of action. ☒ Rest ☒ Observation – Complete observation checklist and repeat every 15 minutes until the child feels better or is collected by a parent/carer/returns to boarding ☒ If the injured person's symptoms subside, they may return to class / work. ☒ Parent/Houseparent should be initially informed of their child injury by phone, requesting they read the Head Injury Advice letter sent by email. First Aider must inform the teacher / colleague, who will continue to monitor the injured person, and notify the First Aider if notices any changes in their conditions / have any concerns

Bump to head protocol

Anyone who has suffered a Head injury must be assessed by a competent First aider, who will be using the Head Injury Checklist. The First Aider must observe the injured person for a minimum of 15 minutes. If the person begins to display head injury symptoms, they will be referred to the emergency services for further assessment and medical support. If there are no changes / symptoms during observation period, then student / staff can return to normal lessons. First Aider must inform the teacher / colleague, who will continue to monitor the injured person, and notify the First Aider if notices any changes in their conditions / have any concerns.

Severe head injury protocol

If unconscious, you should suspect a neck injury and do not move the student. CALL 999 FOR AMBULANCE. Notify parent asap If the ambulance service assesses the pupil over the phone and determine that no ambulance is required, student is to be sent home. Parent informed by phone, requesting they read the Head Injury Advice email sent to their attention by email.

Record the Accident reported as per school guideline

On return to school, the school nurse must liaise with parent to determine the nature of PE activities to be allowed. The school nurse must then liaise with PE teacher and inform of arrangements/agreement made with parents. It is ultimately the parent's responsibility to sign-off the child's return to PE/sports activities

Appendix 1 – Key Points

Guidance on the use of adrenaline auto-injectors in schools (Department of Health 20th September 2017)

'Schools may administer their "spare" adrenaline auto-injector (AAI), obtained, without prescription, for use in emergencies. The school's spare AAI can be administered to a pupil whose own prescribed AAI cannot be administered correctly without delay.

The MHRA would like to clarify that, in principle, a legal exemption under Regulation 238 permits a school's adrenaline auto-injector(s) to be used for the purpose of saving a life, for a pupil or other person not known by the school to be at risk of anaphylaxis (and thus does not have medical authorisation/consent in place for the spare device). This might be, for example, a child presenting for the first time with anaphylaxis due to an unrecognised allergy. The provision under Regulation 238 should be reserved for exceptional circumstances only, that could not have been foreseen. The normal expectation would be for those at risk of anaphylaxis to have been clearly identified by the school in advance, to reduce the risk of equivocation, and potential delay in adrenaline auto-injector administration, in the event of an anaphylactic emergency.

AAIs can be used through clothes and should be injected into the upper outer thigh in line with the instructions provided by the manufacturer.

Bosworth Independent School adheres to the Department of Health Guidelines as specified above published 23rd March 2023

If a student with a history of anaphylaxis (with or without a formal diagnosis) shows signs that they may be having an anaphylactic reaction, 999 must be called and the operator informed that the symptoms could be due to an allergic reaction. BIC will aim to stock enough, in date AAI's (Epi-Pens) dependent on national supply, to academic buildings, Bosworth Hall and boarding houses where those with anaphylactic history reside. It is however the responsibility of parents of those prescribed an AAI to make sure their son/daughter is sent to School with the prescribed

medication. Those prescribed an AAI should always carry it with them (this applies to day students and boarders)

Key Points:

- -If a student is prescribed an Epi-Pen then it is the parent(s) responsibility to supply their child with a minimum of 2 'in date' devices. One which the student MUST carry with them at all times and a spare which will be stored in Bosworth Hall kitchen plus additional spare devices (stocked by Bosworth) at Newton cafe, Medical Centre plus the Boarding House resided in (if relevant) Parents will be asked to give written consent for a spare Epi-Pen to be administered (prescription of an Epi-Pen is taken as medical authorisation)
- -BIS will endeavour to have a small supply of Epi-Pens (AAIs) in specified places designated by the School Nurse (see above)
- -In the event of a suspected anaphylactic reaction 999 must be called IMMEDIATELY stating that someone is potentially having an allergic reaction. Appendix 2 Management of Asthmatic Students

Guidance on the use of emergency salbutamol inhalers in schools (Department of Health March 2015)

From 1st October 2014 the Human Medicines (Amendment) (No. 2) Regulations 2014 will allow schools to buy salbutamol inhalers, without a prescription, for use in emergencies.

The emergency salbutamol inhaler should only be used by children, for whom written parental consent for use of the emergency inhaler has been given, who have either been diagnosed with asthma and prescribed an inhaler, or who have been prescribed an inhaler as reliever medication.

The inhaler can be used if the pupil's prescribed inhaler is not available (for example, because it is broken, or empty).

Schools are not required to hold an inhaler – this is a discretionary power enabling schools to do this if they wish. Schools which choose to keep an emergency inhaler should establish a policy or protocol for the use of the emergency inhaler based on this guidance.

- BIC has a list of students in the School that have been diagnosed with asthma or prescribed a reliever inhaler, a copy of which is kept next to the First Aid Cupboards in Bosworth Hall, Nazareth House Reception and Queens Reception in addition to The Health Alert Spreadsheet circulated to Boarding Houses, On-Call Staff, Activity Leader and accessible to all staff on the P:Drive))
- BIC do hold emergency inhalers. Emergency inhalers only to be used by students with asthma with written parental consent for its use
- Appropriate support and training for staff in the use of the emergency inhaler will take place if and when required (when written parental permission is given)
- In the event that a student is prescribed an inhaler they will be instructed by the School nurse to carry it at all times when at School, in boarding or on offsite trips including sport.
- The below information will be displayed next to the First Aid Boxes throughout the School;

What to Do In The Event Of an Asthma Attack

- Keep calm and reassure the student
- Encourage the student to sit up and slightly forward
- Use the student's own inhaler
- Remain with the student while the inhaler is located
- Immediately help the student to take two separate puffs of salbutamol
- If there is no immediate improvement, continue to give two puffs at a time every two minutes, up to a maximum of 10 puffs
- Stay calm and reassure the student. Stay with the student until they feel better. The student can return to school activities when they feel better
- If the student does not feel better or you are worried at ANYTIME before you have reached 10 puffs, CALL 999 FOR AN AMBULANCE
- If an ambulance does not arrive in 10 minutes give another 10 puffs in the same way

Care plans / Staff Training

An asthmatic student who arrives with a previous care plan and or a medical confirmation letter detailing their condition must have a current care plan in place. This will be managed by the nurse who will circulate to relevant staff. Day students should provide a previous care plan where possible parents will be liaised with regarding any changes. Written parental permission must be sought in order for BIC staff to use an Emergency Inhaler. Confirmation of which students fall into this category will made known to staff.

Relevant care information will be circulated to the appropriate staff and training performed when the nurse feels it necessary ie When student first arrives at BIC, when his/her condition/treatment changes.

Appendix 3

Management of Diabetic Students

- BIC is an inclusive community that aims to support students with diabetes, ensuring they participate fully in all aspects of school life.
- It recognises that diabetes is a long-term medical condition where the amount of glucose in the blood is too high because the body is unable to use it properly
- BIC is aware that diabetic students need immediate access to their medicine, monitoring devices and hypo packs all times and therefore appropriate steps are taken to ensure easy access to these items
- All staff are aware of what to do if a diabetic student becomes unwell
- BIC understand that students with diabetes may be embarrassed about their condition and will work with them to minimise this
- Staff will work in partnership with other stakeholders, such as medical professionals, parents, students, etc to ensure a diabetic student receives the care he/she requires in a respectful, confidential manner that includes the student at all times.
- Staff will be briefed on the basics of diabetes and what to do in an emergency situation

Care plans/ Staff Training

A diabetic student will have a care plan, managed by the nurse, in the case of day students this will be provided by the parents/secondary care team and relevant information be shared appropriately amongst staff. Boarding students will have a care plan put together by the nurse plus primary/secondary care teams. It must be recognised that information from international students is often minimal. Relevant care information will be circulated to the appropriate staff and training performed when the nurse feels it necessary ie When student first arrives at BIC, when his/her condition/treatment changes

Medication

- It may be necessary for insulin to be stored in a fridge. Therefore BIC will ensure that diabetic students and staff have easy access to a controlled medical fridge specifically for this purpose. Boarding students will have a fridge provided in their room for this purpose.
- Students are advised to carry their insulin with them at all times, within appropriate storage devices.
- In most cases Diabetic Students will administer their own medication, any student who requires support with this will attend the Medical Centre
- If the student uses an insulin pump a supply of short acting insulin will be kept in the boarding house (if boarding) for emergency use.
- A supply of Dextro Energy tablets will be available in Bosworth Hall Reception, Nazareth House Reception and Queens Reception and the relevant Boarding House. Diabetic student will also be expected to carry similar with them at all times.

Medication Supplies

Students are advised to ensure they have adequate supplies of their medication and advise the nurse if they are running low so that Leicester Terrace Health Care Centre can be notified.

Offsite

Staff must ensure that they have completed a Risk Assessment before any student is taken off site. Each Diabetic student should only leave the school site once the Trip leader has accessed and retained a copy of their individual care plan and has checked that all control measures are in place (e.g. medications, blood glucose monitoring equipment, etc.)

APPENDIX 4

Trained First Aiders September 2024

NEWTON BUILDING

Caroline Adams -School Nurse

Paul Boothman - Teacher

Daniel Mattock - Teacher

Virginia Gregg - Teacher

Chloe Brooks - Boarding

Alison Barnes - Teaching

Hannah Rooney - Teaching

Zahra Champsey - Teacher

Kathy Green -Boarding

Elizabeth Maher -Teacher

Sam Stacey -Teacher

Kirsten Rowland -Teacher

Patrick Higgins -Boarding

Katherine Sherliker -Boarding

Behrooz Moniri - Teacher

Patrick Hicks -Boarding

Simon Cooper -Boarding

Lorraine Sherliker -Admin/Reception (Newton & Bosworth Hall)

James Jeffreys -Teacher (PE)

Maria Lazar -Cafe

Georgina Neil -Teacher

Trained First Aiders

BOSWORTH HALL

Stephen Webster - Teacher

Anthony Billington - Operations/Maintenance

John Gibbs -Operations/Maintenance

Kayleigh George - Operations/Cleaning

June Crook - Operations/Cleaning

Daria Wiencaszek -Kitchen

Caroline Radwell -Kitchen

Sue Stead -Teacher

Oluwasegun Ajayi -Boarding

Anna Madson -Boarding

Hannah Mcdonald -Boarding

Helen Smith -Boarding

Jeff Shipway -Boarding

Tina Bezzina -Boarding

Chloe Foster -Boarding

Nadia Belo -Boarding

Kathy Green -Boarding

Elizabeth Lennon -Boarding