

	Name of School	Corbets Tey School
	Policy Review Date	Autumn Term 2021
	Next Review Date	Autumn Term 2022
	Reviewed by	Governor Name: Jeff Stafford Governor Signature: 

Healthcare and First Aid Policy

Equality Impact Assessment

The school aims to design and implement services, policies and procedures that meet the diverse needs of our provision, population and workforce, ensuring that none are placed at an unreasonable or unfair disadvantage over others. We are confident that this policy does not place anyone at an unreasonable or unfair disadvantage, and is compliant with relevant equalities legislation.

Ethos

At Corbets Tey School we believe it is of paramount importance that children and young people are in school as often as possible in order that they can make the best possible progress. The health and wellbeing of our students is of paramount importance and we wish to support all parents or carers who have any concerns about their child or young person.

In order to maintain a clean and healthy environment for all our students we ask that parents or carers refrain from bringing their child or young person to school if they are sick and displaying signs of illness. Parents and carers should be mindful that COVID-19 can present with different symptoms in children and a PCR test should be taken if in any doubt plus a Lateral Flow Tests should be used daily.

Corbets Tey School recognises its responsibility to promote a culture where health issues are discussed in an open and positive way to achieve high standards.

Aims:

- To ensure signs of sickness are identified
- To ensure sick students are cared for appropriately
- To protect students and staff from preventable infection
- To enable staff and parents or carers to be clear about the requirements and procedures when students are unwell
- To deal efficiently and effectively with emergencies that may arise while students are in our care

Procedures for Sick Students

If a student becomes ill in school the following procedures will be followed.

- If a student appears to be unwell or informs staff that they are unwell, the class teacher will decide in consultation with Senior Leaders whether the student is too unwell to remain in school.
- If a student has sickness or diarrhoea they will be sent home immediately, they should not return to school for 48 hours after their last case of sickness/diarrhoea.
- If a student is unwell, they will be taken to the school office and a member of staff will contact parents or carers.
- If contact cannot be made with parents or carers then staff will contact the emergency contacts provided by the parents or carers that are recorded on SIMS.
- The student will be made comfortable while they wait to be collected.
- If necessary, a first aider will be consulted for advice on an illness.
- If parents or carers emergency contacts cannot be reached, the student will be made

comfortable and monitored and staff will continue to try to make contact.

- If a notifiable disease is suspected or illness reaches notifiable levels, the Lead First Aider will contact the Local Authority and the school will follow the advice given.
- In the case of an emergency when the student's health is at risk, an ambulance will be called and a member of staff will accompany the student to hospital. The parent or carer or authorised adult will be contacted.
- If a student is off sick from school parents or carers are expected to ring in each morning and leave a message giving the reason for their child or young person's absence.

First Aid

Under duties set out in the Health & Safety (First Aid) Regulations 1981, the School recognises its responsibilities in providing adequate and appropriate equipment, facilities and personnel to enable suitable first aid to be given at the School. The school has a First Aid Risk Assessment to ensure that we provide enough qualified first aiders.

The School has a number of designated members of staff responsible for First Aid (Appendix A). First aiders hold current First Aid Certificates. The Lead First Aider is the Health & Safety Officer and is responsible for maintaining that the correct contents are contained within the first aid cupboard in the medical room. All first aid trained staff are responsible for administering First Aid when necessary and appropriate. Several members of staff also hold the Paediatric First Aid qualification.

The names of staff who are nominated First Aiders or who have completed First Aid qualifications are provided during induction of new staff and is displayed in the administration offices, in the medical room, all classes and in Appendix A.

The Headteacher or Business Manager will ensure that there is a fully trained First Aider (or an appointed person in the event of there being no alternative) available at all times during the school day. The Headteacher or Business Manager will also be responsible for enabling the members of staff concerned to receive adequate First Aid training.

The medical cupboard, located in the first floor Health and Safety Office, will be regularly checked by the Lead First Aider to ensure its contents are up to date, in good condition and fulfil the criteria set out in the Health and Safety (First Aid) Regulations 1981.

The location of the main First Aid supplies, and the names of any other qualified first-aiders, will be clearly displayed around the School's premises.

A First Aid kit will be taken on all off site visits or outings. This is the responsibility of the first aider accompanying the group on the visit, or where this is not possible, the teacher or lead member of staff.

The department of Health has now confirmed that new auto-injectors can only be given to students who have been prescribed an auto-injector and theirs is not available, out of date, faulty... or they require an additional dose following the administration of their own auto-injector. This new legislation allows school staff to administer an emergency AAI to any student who has been assessed as being at risk of anaphylaxis. Therefore, there are now spare pens onsite that can be used in an emergency. They are held within the white cabinet by the reception window in the reception office. One is labeled as "Reception and Junior" (ages 4-7yrs) and the other is labelled "Junior to Secondary" age (8-16yrs). These are to be used ONLY for a student that already has a plan in place, and ONLY where the pen is broken or is not working properly.

In the Event of a Major Accident, Incident or Illness

In the event of such an event, the following procedures will apply:

In the first instance, the lead first aider or other first aid trained person will be notified and take responsibility for deciding upon the appropriate action. The parents or carers will be contacted. The first aider will assess the situation and decide whether the student needs to go straight to hospital or whether

they can safely wait for their parent or carer to arrive. If the student needs to go straight to hospital, an ambulance will be called. A member of staff will accompany the student to hospital and act as a responsible adult in the best interests of the student. Health professionals are responsible for any decisions on medical treatment when parents or carers are not available.

If the student does not need to go straight to hospital but their condition means they should go home, the parent or carer will be contacted and asked to collect their child or young person. In the meantime, the student will be made as comfortable as possible and be kept under close supervision.

Parents or carers will be made fully aware of the details of any incidents involving their child or young person's health and safety, and any actions taken by the school.

All accidents, injuries, illnesses, and any healthcare or first aid administered by the school, will be recorded on CPOMS. Accidents of a more serious nature will need to be reported to the Local Authority and to the Lead First Aider or Senior Staff. Please refer to the Accident Reporting Protocol in the Health and Safety Policy for 'Online Reportable Accidents'. Students sent home due to feeling unwell will be recorded on CPOMS with details of advice given to parents or carers regarding return to school.

The school will follow Havering Council's accident reporting procedure. The Council will in turn report any accidents to the HSE where necessary. The Headteacher, Business Manager or Teaching staff and other relevant members of staff should consider whether the accident or incident highlights any actual or potential weaknesses in the school's policies or procedures, and act accordingly, making suitable adjustments where necessary.

In the Event of a Minor Accident, Incident or Illness

In first instance, the Lead First Aider or other first aid trained person will be notified and take responsibility for deciding upon any appropriate action.

If the student does not need hospital treatment and is judged to be able to safely remain at the school, the first aider will remove the student from the activities and, if appropriate, treat the injury/illness themselves.

If and when the student is feeling sufficiently better, they will be resettled back into the activities, but will be kept under close supervision for the remainder of the session. Dependent upon the type of injury, (i.e. bump to the head, not requiring hospital treatment) the teacher or lead member of class staff will telephone the parents or carers to inform them that the child or young person has had an accident.

At the end of the session, the teaching staff will fully inform the parent or carer on handover of the student of the incident or accident and any treatment given.

If the injury or illness incurred is such that the student remains unwell but does not warrant hospitalisation, the parent or carer will be contacted immediately and asked to collect their child or young person. Until the parent or carer arrives, the student will be kept under close supervision and as comfortable as possible (from this point on, the provisions of the Health Protection's infectious and communicable disease advice will govern the student's return to the School).

All accidents, injuries, illnesses and any healthcare or first aid administered by the school, will be recorded on CPOMS and notified to the Local Authority if appropriate. Students sent home due to feeling unwell will be recorded on CPOMS with details of advice given to parents or carers regarding return to school.

The school will follow Havering Council's accident reporting procedure. The Council will in turn report any accidents to the Health & Safety Executive where necessary. The Head Teacher, Business Manager or Teaching staff and other relevant members of staff should consider whether the accident or incident highlights any actual or potential weaknesses in the school's policies or procedures, and act accordingly, making suitable adjustments where necessary.

Student Seizures

All student seizures lasting more than 1 minute should be recorded on CPOMS. This information can then be made available for medical professionals and/or parents or carers as needed. Seizures lasting less than one minute do not need to be recorded. The Healthcare and First Aid record sheet should also be completed if first aid is administered or a student goes home or to hospital as a result of their seizures.

Medication

Please see: Administration and Storage of Medication Policy

Sun Protection

Teachers and staff should be aware of the dangers posed to students and themselves by over exposure to the sun. In hot weather, parents or carers are encouraged to provide sun screen for their child or young person. A store of named sun protection should be requested from parents or carers and kept on the premises. Students will be encouraged to wear a hat when playing outside in the sun. In hot weather, staff will encourage students to drink water frequently. Staff should also ensure that shady areas out of the sun are always available to students when playing outside.

Closing the School in an emergency

In very exceptional circumstances, the School may need to be closed at very short notice due to an unexpected emergency. Such incidents could include:

- Serious weather conditions (combined with heating system failure)
- Burst water pipes.
- Discovery of dangerous structural damage
- Fire, bomb scare or explosion
- Death of member of staff or student
- Serious assault on a staff member or student by a member of the public
- Serious accident or illness
- Pandemic (see whole school risk assessment)

In such circumstances, under the direction of the Headteacher, the teaching staff will ensure that all steps are taken to keep both the students and themselves safe. All staff and students will assemble at the pre-arranged assembly point (**See Fire Action Plan and Emergency Evacuation Plan**) where a register will be taken.

Steps will then be taken to inform parents or carers and necessary actions will be taken in relation to the cause of the closure. All students will be supervised until they are safely collected.

Exclusion of sick students from school

We understand the needs of working parents or carers and do not aim to exclude their child or young person from school unnecessarily. However, the decision of the school is final when requesting the exclusion of a student for illness or infection.

Decisions will take into account the needs of the student and those of the group.

Students with infectious or contagious diseases will be excluded for certain periods. If a member of staff suspects that a student has an infectious or contagious disease, they will request that parents or carers consult a doctor before returning their child or young person to school.

We recommend that no student may attend the school while suffering from one of the communicable diseases and they should be excluded for the minimum periods recommended. Please see guidelines to illness and communicable diseases provided by Public Health England.

Coughs and colds do not normally require the student to be excluded from normal activities but this depends on the severity and how the student is able to cope with the school routine. If a student appears unwell, we may ask the parent or carer to take their child or young person home. Parents and carers should be mindful that COVID-19 can present with different symptoms in children and a PCR test should be taken if in any doubt plus a Lateral Flow Tests should be used daily.

Although exposure of students to a communicable disease is not in itself sufficient reason to require their exclusion from school, any student who becomes a home contact of diphtheria, poliomyelitis, typhoid and paratyphoid fevers will be excluded.

A student who has sickness or diarrhoea whilst at the school is to be collected immediately and kept away for 48 hours following the last bout of sickness or diarrhoea.

Parents or carers will always be contacted and informed if their child or young person has a high temperature of 101F / 38C or above.

To prevent the spread of conjunctivitis, suspected cases will be reported immediately to parents or carers who will be requested to take their child or young person from school to be seen by a doctor.

Chicken Pox – Students need to be absent from school for a minimum of 5 days from the onset of the rash. After this time, if all the spots have dried and scabbed over, the child or young person can return to school.

Parents or carers will also be contacted if their child or young person develops a rash or suspected thrush. This will need to be checked by a Doctor whose advice should be followed.

Associated Documents

Health and Safety Policy

Accident Reporting Protocol

Guidance on infection control in schools and other childcare settings (2017)

Supporting Students at School with Medical Conditions (2017)

Meeting the Medical Needs of Students Policy

Administration and Storage of Medication Policy

First Aid Risk Assessment

Fire Action Plan and Emergency Plan

Appendix A

CORBETS TEY SCHOOL - FIRST AIDERS			Renewal Date
Karen Hoffman	First Aid at Work Level 3 + Epipen	Admin	21 September 2023
Danielle Thompson	First Aid at Work Level 3 + Epipen	Apple	25 March 2024
Nicola Jones	First Aid at Work Level 3 + Epipen	Sycamore	21 June 2024
Sarah Collins	First Aid AT Work Level 3 + Epipen	Grape	21 April 2024
Samantha Hornsby	Emergency First Aid at Work		04 September 2022
Amanda Day	Emergency First Aid at Work		04 September 2022
Samantha Schembri	Emergency First Aid at Work		03 September 2023
Sharon Keeling	Emergency First Aid at Work		04 September 2022
Allanna Solomon	Emergency First Aid at Work		04 September 2022
Claire Sealey	Emergency First Aid at Work		04 September 2022
Leanne Whalley	Emergency First Aid at Work		04 September 2022
Vasanthi Rubeen Varma	Emergency First Aid at Work		04 September 2022
Claire Cadd	Emergency First Aid at Work		04 September 2022
Rothna Chowdhury	Emergency First Aid at Work		04 September 2022
Joanna Lazenby	Emergency First Aid at Work		04 September 2022
Angelique Charalambous	Emergency First Aid at Work		03 September 2023
Heidi Phipps	Emergency First Aid at Work		03 September 2023
Halldora Donoghue	Emergency First Aid at Work		04 September 2022
Katy Hatch	Emergency First Aid at Work		07 September 2022
Emma Raison	Emergency First Aid at Work		04 September 2022
Samantha Shirley	Emergency First Aid at Work		04 September 2022
Vivien Maxey	Emergency First Aid at Work		23 February 2022
Patricia Mealand	Emergency First Aid at Work		03 September 2024
Lynne Clark	Emergency First Aid at Work		01 September 2024
Charlotte McCarthy	Emergency First Aid at Work		01 September 2024
Maria Potter	Emergency First Aid at Work		01 September 2024
Jessica Hitchings	Emergency First Aid at Work		01 September 2024
Rebecca Santini	Emergency First Aid at Work		01 September 2024
Charlotte Crafer	Emergency First Aid at Work		01 September 2024
Vicky Tear	Emergency First Aid at Work		01 September 2024
Ashleigh Bryant	Emergency First Aid at Work		01 September 2024
Joanne Leahy	Emergency First Aid at Work		01 September 2024
Ria Langley	Emergency First Aid at Work		01 September 2024
Lindsey Fox	Emergency First Aid at Work		01 September 2024
Melanie Devlin	Emergency First Aid at Work		01 September 2024
AVELON - FIRST AIDERS			Renewal Date
Pauline Burgin	First Aid At Work Level 3 + Epipen		02 July 2023
Angela Spicer	Emergency First Aid at Work		01 September 2024
Jessica Charlwood	Emergency First Aid at Work		01 September 2024
Sarah Hough	Emergency First Aid at Work		04 September 2022
Emily Lucke	Emergency First Aid at Work		04 September 2022
Karen Robinson	Emergency First Aid at Work		28 January 2022
Jackie Bird	Emergency First Aid at Work		01 September 2024
Lynne Wade	Emergency First Aid at Work		04 September 2022
Florence Bello-Osagie	Emergency First Aid at Work		01 September 2024

Charlotte Hayes	Level 3 Emergency First Aid at Work	02 April 2022
Natalie Cook	Emergency First Aid at Work	01 September 2024
Sarah Attawia	Emergency First Aid at Work	01 September 2024
Jenna Marling	Emergency First Aid at Work	01 September 2024
Sarah Jane Foss	Emergency First Aid at Work	03 September 2023
Lorraine Burr	Emergency First Aid at Work	01 September 2024
Lesley Stevens	Emergency First Aid at Work	01 September 2024
Jade Hickey	Emergency First Aid at Work	01 September 2024

CORBETS TEY SCHOOL -PAEDIATRIC FIRST AIDERS			Renewal Date
Karen Hoffman	Paediatric First Aid Level 3 + AED	Admin	24 September 2021
Sarah Collins	Paediatric First Aid Level 3 + AED	Grape	07 May 2022
Vivien Maxey	Paediatric First Aid Level 3 + AED	Swimming	07 May 2022
Nicola Jones	Paediatric First Aid Level 3 + AED	Sycamore	22 May 2024
Danielle Thompson	Paediatric First Aid Level 3 + AED	Apple	16 April 2024
Bobbi-Jane Freeman	Paediatric First Aid		14 February 2023
Nikki Lehane	Paediatric First Aid		14 February 2023
Jayne Brennan	Paediatric First Aid		14 February 2023
Debbie Fulker	Paediatric First Aid		14 February 2023
Allanna Solomon	Paediatric First Aid		14 February 2023
Katie Burwood	Paediatric First Aid		14 February 2023
Lorraine Killoran	Paediatric First Aid		14 February 2023
Suzanne Holland	Paediatric First Aid		14 February 2023
Jacqueline Mudford	Paediatric First Aid		14 February 2023
Charlotte Hammond	Paediatric First Aid		14 February 2023
Patricia Bell	Paediatric First Aid		14 February 2023
Alix Oakley	Paediatric First Aid		14 February 2023

Appendix B

Recommended absence period for preventing the spread of infection

This list of recommended absence periods for preventing the spread of infection is taken from non-statutory guidance for schools and other childcare settings from Public Health England. For each of these infections or complaints, there [is further information in the guidance on the symptoms, how it spreads and some 'do's and don'ts' to follow that you can check](#).

Infection or complaint	Recommended period to be kept away from school
Athlete's foot	None.
Bacillary Dysentery (Shigella)	Microbiological clearance is required for some types of shigella species prior to the student or food handler returning to school.
Campylobacter	Until 48 hours after symptoms have stopped.
Chicken pox (shingles)	Cases of chickenpox are generally infectious from 2 days before the rash appears to 5 days after the onset of rash. Although the usual exclusion period is 5 days, all lesions should be crusted over before students return to nursery or school. A person with shingles is infectious to those who have not had chickenpox and should be excluded from school if the rash is weeping and cannot be covered or until the rash is dry and crusted over.
Cold sores	None.
Conjunctivitis	None.
Cryptosporidiosis	Until 48 hours after symptoms have stopped.
Diarrhoea and/or vomiting (Gastroenteritis)	Children and adults with diarrhoea or vomiting should be excluded until 48 hours after symptoms have stopped and they are well enough to return. If medication is prescribed, ensure that the full course is completed and there is no further diarrhoea or vomiting for 48 hours after the course is completed. For some gastrointestinal infections, longer periods of exclusion from school are required and there may be a need to obtain microbiological clearance. For these groups, your local health protection team, school health advisor or environmental health officer will advise. If a student has been diagnosed with cryptosporidium, they should NOT go swimming for 2 weeks following the last episode of diarrhoea.

Infection or complaint	Recommended period to be kept away from school
E. coli (verocytotoxigenic or VTEC)	The standard exclusion period is until 48 hours after symptoms have resolved. However, some people pose a greater risk to others and may be excluded until they have a negative stool sample (for example, pre-school infants, food handlers, and care staff working with vulnerable people). The health protection team will advise in these instances.
Flu (influenza)	Until recovered.
Food poisoning	Until 48 hours from the last episode of vomiting and diarrhoea and they are well enough to return. Some infections may require longer periods (local health protection team will advise).
Giardia	Until 48 hours after symptoms have stopped.
Glandular fever	None (can return once they feel well).
Hand, foot and mouth	Students are safe to return to school or nursery as soon as they are feeling better, there is no need to stay off until the blisters have all healed.
Head lice	None.
Hepatitis A	Exclude cases from school while unwell or until 7 days after the onset of jaundice (or onset of symptoms if no jaundice, or if under 5, or where hygiene is poor. There is no need to exclude well, older students with good hygiene who will have been much more infectious prior to diagnosis.
Hepatitis B	Acute cases of hepatitis B will be too ill to attend school and their doctors will advise when they can return. Do not exclude chronic cases of hepatitis B or restrict their activities. Similarly, do not exclude staff with chronic hepatitis B infection. Contact your local health protection team for more advice if required.
Hepatitis C	None.
Impetigo	Until lesions are crusted and healed, or 48 hours after starting antibiotic treatment.
Measles	Cases are infectious from 4 days before onset of rash to 4 days after so it is important to ensure cases are excluded from school during this period.

Infection or complaint	Recommended period to be kept away from school
Meningococcal meningitis/ septicaemia	If the student has been treated and has recovered, they can return to school.
Meningitis due to other bacteria	Once the student has been treated (if necessary) and has recovered, they can return to school. No exclusion is needed.
Meningitis viral	None.
MRSA (meticillin resistant Staphylococcus aureus)	None.
Mumps	5 days after onset of swelling (if well).
Ringworm	Exclusion not needed once treatment has started.
Rotavirus	Until 48 hours after symptoms have subsided.
Rubella (German measles)	5 days from appearance of the rash.
Salmonella	Until 48 hours after symptoms have stopped.
Scabies	The infected student or staff member should be excluded until after the first treatment has been carried out.
Scarlet fever	Students can return to school 24 hours after commencing appropriate antibiotic treatment. If no antibiotics have been administered the person will be infectious for 2 to 3 weeks. If there is an outbreak of scarlet fever at the school or nursery, the health protection team will assist with letters and factsheet to send to parents or carers and staff.
Slapped cheek syndrome, Parvovirus B19, Fifth's disease	None (not infectious by the time the rash has developed).
Threadworm	None.

Infection or complaint	Recommended period to be kept away from school
Tuberculosis (TB)	Students and staff with infectious TB can return to school after 2 weeks of treatment if well enough to do so and as long as they have responded to anti-TB therapy. Students and staff with non-pulmonary TB do not require exclusion and can return to school as soon as they are well enough.
Typhoid and Paratyphoid fever	Seek advice from environmental health officers or the local health protection team.
Warts and verrucae	None.
Whooping cough (pertussis)	A student or staff member should not return to school until they have had 48 hours of appropriate treatment with antibiotics and they feel well enough to do so or 21 days from onset of illness if no antibiotic treatment.