

# **DRUMMAHOE P.S.**



## **First Aid & Emergency Treatment Policy**

**(inc. Infectious & Communicable  
Diseases & Head Lice)**

## **First Aid:**

Under duties set out in the Health and Safety (First Aid) Regulations 1982, Drumahoe P.S. recognises its responsibilities in providing adequate and appropriate equipment, facilities and personnel to enable suitable first aid to be given at the school. It is important to remember that first-aid is to be provided for accidents, emergencies or illnesses which are unexpected, unplanned and not part of a pattern or series.

It is a fairly obvious statement to make, but bears repeating, that pupils who are ill should not attend school; parents who insist on sending poorly children to school could ultimately be open to a charge of child neglect or abuse; social services might need alerting. Most first-aid consists of making the patient comfortable whilst an ambulance is called. It is a management decision as to when an adult should accompany a sick child to hospital in the ambulance – whilst the parents are contacted. If in doubt we will send a member of staff with the child.

The school's responsibility ceases as the child is entrusted to the care of the NHS ambulance personnel. A member of school staff cannot give permission for any treatment at casualty: the Accident and Emergency staff will have to decide over questions like blood transfusions, haemophilia etc.

Drumahoe P.S. has at least one designated member of staff responsible for First Aid. This person has an up to date First Aid at Work certificate (HSENI approved). Those designated staff members who hold a current first aid at work certificate will attend a two day refresher course every three years. They are also responsible for maintaining the correct contents of all First Aid boxes and administering basic First Aid when necessary and appropriate.

A correctly stocked first-aid box is available at all times, stored out of the reach of children. A portable first-aid kit is taken with any group during outings from Drumahoe P.S.

Confidential medical information on each individual child will be available to the Staff, including names and contact information etc. on SIMS.net.

A record book is kept on any incident that requires first aid intervention and must be signed by the staff member(s) involved

All hospitalisation due to accidents and injuries occurring at Drumahoe P.S. must be reported to the Principal and an Accident Report Form must be completed.

The Principal and the designated member of staff will ensure that there is a fully trained First-Aider available at all times in school. The Principal will be responsible for enabling the members of staff concerned to receive adequate first aid training.

The location of the First Aid box and the names of any other qualified First-Aiders will be clearly displayed around the premises.

A First Aid box will be taken on all off site visits or outings. This is the responsibility of the designated First-Aider, or where this is not possible, the Principal.

### **Suggested Contents of a First Aid Box:**

There are no legal requirements for the contents of a first aid box, but as a guide it should include the following items:

- A leaflet giving general guidance on first aid;
- 20 hypo-allergenic plasters or micropore tape and melolin;
- 2 sterile eye pads, with attachment:
- Cotton wool;
- Lint dressings ( of assorted sizes with micropore tape to attach);
- 6 medium sized individually wrapped sterile unmedicated wound dressings approximately 10 cms x 8 cms;
- 6 safety pins;
- 2 crepe bandages;
- 2 triangular bandages;
- Scissors;
- Salt and water saline solutions;
- Blue plasters
- Disposable gloves;
- Fever / scan thermometer.

### **Health, Illness and Emergency**

Drumahoe P.S. is committed to encouraging and promoting good health and to dealing efficiently and effectively with illnesses and emergencies that may arise while children are in our care.

#### **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 First-Aider will be notified and take responsibility for deciding upon the appropriate action.
- The First-Aider will assess the situation and decide whether the child needs to go straight to hospital or whether they can safely wait for their parent/carer to arrive.
- If the child needs to go straight to hospital, an ambulance will be called. The parent/carer will also be contacted. A member of staff will accompany the child to the hospital
- If the child does not need to go straight to hospital but their condition means they should go home, the parent/carer will be contacted and asked to collect their child. In the meantime, the child will be made as comfortable as possible and be kept under close supervision. From this point on, the provisions of the school's Infectious and Communicable Diseases policy will govern the child's return to school if applicable.

- If and when the child is feeling sufficiently better and does not need to go home, they will be resettled back into class, but will be kept under close supervision for the remainder of the day.
- Parents/carers will be made fully aware of the details of any incidents involving their child's health and safety, and any actions taken by the school and its staff.
- All such accidents or incidents will be recorded in detail and logged in the Incident Record Book or the Accident Record Book.
- The Principal 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 circumstances where the designated First-Aider(s) is/are absent, the Principal will assume all responsibilities, or nominate an appropriately trained replacement.
- Wherever possible, children who are prescribed medication should receive their dosage at home. If it is necessary for medication to be taken during sessions at school, the children should be encouraged to take personal responsibility for this, where this is appropriate. Parents/carers and staff should discuss such situations at the earliest possible opportunity and decide together on the best course of action – **see Policy on the Administering of Medication.**
- Staff have the right to decline such a request from a parent/carer if they are in any way uncomfortable with this.

### **Closing the School in an Emergency**

In very exceptional circumstances, Drumahoe P.S. 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 or bomb scare/explosion.
- Death of a member of staff.
- Serious assault on a staff member by the public.
- Serious accident or illness.

In such circumstances, the Principal and staff will ensure that all steps are taken to keep both the children and themselves safe. All staff and children will assemble at the pre-arranged venue, where a register will be taken. Steps will then be taken to inform parents/carers and to take the necessary actions in relation to the cause of the closure. All children will be supervised until they are safely collected.

## **Policy for Infectious and Communicable Diseases**

Our School is committed to the health and safety of all children and staff who play, learn and work here. As such, it will sometimes be necessary to require a sick child to be collected early from school or be kept at home while they get better. In such cases, the provisions of the First Aid and Emergency Treatment policy will be implemented.

In accordance with the procedures set out in the First Aid and Emergency Treatment policy, parents/carers will be notified immediately if their child has become ill and needs to go home. Sick children will be comforted, kept safe and under close supervision until they are collected.

If a child has had to go home prematurely due to illness, they should remain at home until they are better for at least 24 hours, or according to the times set out in Appendix 1 below – Guidance on Infection Control in Schools. If a member of staff becomes ill at work, similar restrictions on their return will apply.

If a child or member of staff becomes ill outside school hours, they should notify the school as soon as possible. The minimum exclusion periods outlined in Appendix 1 will then come into operation.

If any infectious or communicable disease is detected in school, the School will inform parents/carers personally as soon as possible. The School is committed to sharing as much information as possible about the source of the disease and the steps being taken to remove it.



## Policy on the Treatment of Head Lice

The Northern Ireland regional policy for the control of head lice was introduced on 24 March 1999 and reflects recently issued national guidance. The Western Education and Library Board, Homefirst Community Trust, Western Health and Social Services Trust and the Department of Public Health Social Services and Public Safety subsequently issued guidelines.

Head lice are described in the regional policy as a problem of the wider community and not primarily a problem of schools. Drumahoe Primary School does, however, recognise that as part of this community it can make a contribution by supporting parents in promoting and maintaining healthy, thriving children.

### Principles

- Head lice are a problem of the whole community and are passed on by close family members and friends in the home and neighbourhood as well as in school
- Head lice are transferred by direct, prolonged, head-to-head contact
- Head lice infestation is not a serious physical health problem
- Clear diagnosis is important - treatment should only be started if a living, moving louse is discovered
- The main responsibility for the identification of head lice is that of the parents or guardians. They should identify and treat any head lice problem and seek help from their doctor or health visitor if necessary

### School Procedure

Information to help parents detect and treat suspected cases of head lice will be supplied as part of the school's communication with parents ( Ref. Head Lice – Your Questions Answered – Department of Public Health Social Services and Public Safety)

Parents are urged, as in all health matters, to seek diagnosis from a medical professional and to treat the problem immediately for the benefit of the child, family and community.

If a member of staff sees a living, moving louse in a child's hair a letter (**see Appendix 1**) will be sent to the parent. The reply slip should be signed and returned inside two days. If no reply is obtained, the school nurse will be contacted (Angela Ryan/Christine Diamond – 71865104). The nurse may then contact the parents to offer advice and support. Information will remain confidential at all times.

If a definite diagnosis of infection is confirmed within a class in school, then the school will issue that class with a general information letter (**see Appendix 2**).

**Children who have, or are thought to have, head lice will not be excluded from school unless the parent/guardian blatantly fails to follow school/medical advice in treating the problem.**



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INVESTOR IN PEOPLE

**Appendix 1:**

Dear Parent

It has been reported to me that a head louse was seen in \_\_\_\_\_'s hair today.

There is no need to be alarmed. We may be wrong, but to avoid embarrassment I would ask you to check your child's hair for yourself using a fine comb and, if required, treat the problem. Your doctor, health visitor or chemist will be able to provide you with further help and support. The School Nurses (Angela Ryan & Christine Diamond – 71865104) are also available for support and information.

As we will treat this matter in confidence there is no need to keep your child off school. I would, however, request that you return the slip below in a sealed envelope addressed to myself to confirm receipt of this letter.

Thank you.

Yours sincerely

T.R. McMaster  
(Principal)

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**DRUMAHOE PRIMARY SCHOOL**

I have received your letter dated \_\_\_\_\_ regarding a possible case of head lice. I will check my child's hair and treat any problem.

Signed: \_\_\_\_\_ (Parent/Guardian)



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INVESTOR IN PEOPLE

### Appendix 2:

Dear Parent

A case of head lice has been reported to me today. Please check your child's head immediately and, if necessary, treat thoroughly with any lotion recommended by a chemist or doctor. Routine head inspections are no longer carried out in schools but the following may answer some questions:

#### How do you catch head lice?

- Head lice cannot jump or fly. They like to live close to the scalp. They are only caught when two people's heads are in contact for some time.

#### How do you know you have got head lice?

- Signs of head lice include: live or dead lice in the hair, nits (empty egg cases), an itchy head, a rash round the neck or ears, dark gritty dust on pillows or collars.

#### A weekly family check for head lice

- Wash the hair and using a fine-toothed comb (available from chemists), comb the wet hair from the roots over a sheet of white paper. If nits or eggs are found keep combing every other day for a week to ensure that there are no live lice. If one is found, tell those in close contact and begin treatment.

#### Sometimes head lice "return" because the treatment was not carried out thoroughly and eggs survived.

- Hair should not normally be treated more than twice in three weeks. If the problem persists, speak to the doctor or School Nurse (Angela Ryan – 71865104).

I hope you find this information is helpful.

Yours sincerely

T.R. McMaster  
Principal