



Perrott Hill

BRITISH SCHOOL • PRAGUE

First Aid Policy

School Administration & Leadership

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Qualified & Trained First Aiders (with Certification)

| Name | School Section | Role |
|-----------------------------------|--|--|
| Mr. Michal Hajek | Kindergarten/Pre-School & Primary School | Deputy School Director |
| Ms. Radka Žáková | Kindergarten/Pre-School & Primary School | Head of Early Years |
| Ms. Arianne Elbaum-Rejsek | Kindergarten/Pre-School & Primary School | Head of Primary School |
| Ms. Karolína Stříbrná | Kindergarten/Pre-School & Primary School | Head of Czech Language Programme |
| Ms. Tereza Anýžová | Kindergarten/Pre-School & Primary School | Deputy Head of Primary School |
| Ms. Pavlína Daliková | Kindergarten/Pre-School & Primary School | Registration & Admissions |
| Ms. Caroline Fischl-Prosslinerová | Kindergarten/Pre-School & Primary School | Physical Education Teacher (Primary) |
| Mr. Natalie Joselová | Kindergarten/Pre-School & Primary School | School Secretary |
| Mr. Richard Jackson | Secondary & High School | Head of Secondary & High School |
| Mr. Geoff Price | Secondary & High School | Physical Education Teacher (Secondary & High School) |
| Ms. Anna Aldorfová | Secondary & High School | Maturita Coordinator |
| Ms. Elena Gonata | Secondary & High School | School Counsellor |
| Ms. Michaela Mrázková | Secondary & High School | School Secretary |
| Ms. Veronika Dudová | Secondary & High School | Examinations Coordination Officer |

First Aid Policy

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First Aid Policy

1. Rationale

The First Aid procedure at Meridian International School is in operation to ensure that every student, member of staff and visitors will be well looked after in the event of an accident, no matter how minor or major.

It is emphasized that the *team* consists of qualified First Aiders and not trained doctors or nurses. **The school currently employs a number of First Aiders with certification (please see PAGE 2 of this policy).** First Aiders in the Kindergarten and Pre-School section have special training in pediatric first aid.

In the event of an accident all members of the school community should be aware of the support available and the procedures available to activate this.

This policy has been written in accordance to the guidelines arranged in the First Aid Law 64/2005 Sb. by the Ministry of Education in the Czech Republic (a law specific for schools in the Czech Republic)

https://msmt.cz/file/38830_1_1/




and

by the U.K. Department of Education in their 'Guidance on First Aid for Schools' practice guide. For further information, this document is available at the following weblink:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/306370/guidance_on_first_aid_for_schools.pdf

1. Purpose of the Policy

The purpose of the policy is therefore:

-  To provide effective, safe First Aid covers for students, staff, and visitors.
-  To ensure that all staff and students are aware of the system in place.
-  To provide awareness of Health & Safety issues within school and on school trips, to prevent, where possible, potential dangers of accidents.

NB: The term 'First Aider' refers to those members of the school community who are in possession of a valid First Aid at work certificate or equivalent. This includes the majority of teachers and staff.

2. Responsibilities of First Aiders

Assess the situation before taking any action.

- ✚ Ensure that their qualification (provided by the school) are always up to date.
- ✚ Ensure that first aid cover is available throughout the working hours of the school week.
- ✚ Always attend a casualty when requested to do so and treat the casualty to the best of their ability in the safest way possible. This includes wearing gloves where any loss of blood or body fluid is evident, calling for help from other First Aiders or Emergency Services.
- ✚ Help fellow First Aiders at an incident and provide support during the aftermath.
- ✚ Act as a person who can be relied upon to help when the need arises.
- ✚ Ensure that their portable first aid kits are adequately stocked and always to hand.
- ✚ Insist that any casualty who has sustained a significant head injury is seen by professionals at the hospital, either by sending them directly to hospital or by asking parents to pick up a child to take them to hospital; ensure that parents of all head injuries promptly.
- ✚ Ensure that a child who is sent to hospital by ambulance is either accompanied in the ambulance at the request of paramedics or followed to the hospital by a member of staff to act in loco parentis if a relative cannot be contacted.
- ✚ Met at hospital by a relative.
- ✚ The First Aider need not be the member of staff to accompany the casualty to hospital, however, an appropriate person should be sent.
- ✚ Liaison must occur with the teacher in charge of cover, to ensure that lessons are covered in the event of an absent teacher.

Ensure that everything is cleared away, using gloves, and every dressing etc. be put in a yellow bag for contaminated / used items and sealed tightly before disposing of the bag in a bin. Any bloodstains on the ground must be washed away thoroughly. No contaminated or used items should be left lying around.

3. Responsibilities of the School Deputy Director

The School Deputy Director will:

- ✚ Provide adequate First Aid cover as outlined in both Czech and UK regulations
- ✚ Monitor and respond to all matters relating to the health and safety of all persons on school premises.
- ✚ Ensure all new staff are made aware of First Aid procedures in school

4. Responsibilities of the Heads and Deputy Head of School






Heads and Deputy Head of School will:

- ✚ Ensure that they always obtain the history relating to a student not feeling well, particularly in the cases of headaches, to ensure that no injury has caused the student to feel unwell.
- ✚ Ensure that in the event that an injury has caused a problem, the student must be referred to a First Aider for examination.
- ✚ At the start of each academic year, provide the first aid team with a list of students who are known to be asthmatic, anaphylactic, diabetic, and epileptic or have any other serious illness.

5. Responsibilities of Teachers




Teachers will:

- ✚ Familiarise themselves with the first aid procedures in operation and ensure that they know who the current First Aiders are.
- ✚ Be aware of specific medical details of individual students when publicised by the Head of School.
- ✚ Ensure that their students are aware of the procedures in operation.
- ✚ Never move a casualty until they have been assessed by a qualified First Aider unless the casualty is in immediate danger.
- ✚ Send for help to the Secretary's office as soon as possible either by a person or telephone, ensuring that the messenger knows the precise location of the casualty. Where possible, confirmation that the message has been received must be obtained.

-  Reassure, but never treat, a casualty unless staff are in possession of a valid First Aid Certificate or know the correct procedures; such staff can obviously start emergency aid until a First Aider arrived at the scene or instigate simple airway measures if clearly needed.
-  Send a student who has minor injuries to the Secretary's office if they are able to walk where a First Aider will see them; this student should be accompanied.
-  Send a student who feels generally 'unwell' to their respective Head of Deputy Head of School and not to a First Aider, unless their deterioration seems uncharacteristic and is causing concern.
-  Ensure that they have a current medical consent form for every student that they take out on a school trip which indicates any specific conditions of medications of which they should be aware.
-  Have a regard to personal safety.





6. Responsibilities of Administration Staff

Our Staff will:

-  Call for a qualified First Aider, unless they are one themselves, to treat any injured student. This should be done by telephone in the case of minor injuries in the case of serious injuries, giving the specific location of the casualty.
-  Support the First Aiders in calling for an ambulance or contacting relatives in an emergency.
-  Send students who simply do not feel well to their respective Head or Deputy Head Teacher.

7. Responsibilities of the School

The school will:

-  Ensure that any staff NOT to administer paracetamol or other medications unless they have proper training and have express permission of the parent.
-  All the prescribed medicine must be kept as name clearly labelled and in locked cabinet in the medical room.
-  Keep 3 First Aid Boxes available in different sections of the school (first aid box at admin office will be also used for school trips).
-  Ensure that there is always two trained First Aiders at all times

8. Students with Specific Medical Needs

Students which have specific medical needs – such as those who have specific allergies (such as nuts), need epi-pens, regular medication, inhalers, or any other form of medical condition – will be properly catered and cared for. It is the duty of parents to notify the school of any specific condition or medication. If medication needs to be stored in the school, it will be done so securely and safely. A member of staff, with First Aid certification, will administer medication only well certain necessity demands it. The school should also be made aware of dose and frequency of medication, as well as the expiry date.

APPENDIX A: HYGIENE CONTROL

1. Hand Hygiene

1.1 Hand Washing

Hand washing is the single most important part of prevention of infection.

1.2 Warm Soap & Water

Hands should be washed with liquid soap and warm water:

- After visiting the toilet;
- Before and after preparing food;
- After any cleaning procedures;
- After contact with body substances i.e. blood, vomit, urine, saliva, faeces;
- After touching or cleaning up after animals;
- When hands look or feel dirty.

1.3 Abrasions

Any abrasion or cut etc on hands should be covered with a waterproof dressing or appropriate barrier e.g. gloves.

2. Clearing Up

2.1 Personal Protective Equipment (PPE)

Disposable non-powdered vinyl or latex-free CE-marked gloves and disposable plastic Aprons must be worn where there is a risk of splashing or contamination with blood/body fluids. Goggles/safety glasses should also be worn if there is a risk of splashing to the face. Correct PPE should be used when handling cleaning chemicals (COSHH applies).

2.2 Cleaning Equipment

When spillages occur, clean using a product that combines both detergent and disinfectant. Use as per manufacturer's instructions and ensure that it is effective against bacteria and viruses and suitable for use on the affected surface. Never use mops for cleaning up blood and body fluid spillages- use disposable paper towels and discard in clinical waste receptacle. A spillage kit should be available for blood spills.

1.1 Blood

- Cuts and abrasions on the hands of the member of staff attending to the person should be covered with waterproof dressings, or disposable nonpowdered vinyl or latex-free CE-marked gloves must be worn.
- Soak up any spillage with paper towels. Clean area with disinfectant or bleach solution.
- Soiled tissues/paper towels should be double bagged and placed in designated bin.
- Hands should be washed with soap and water after attending to the person.

1.2 Vomit

- Disposable non-powdered vinyl or latex-free CE-marked gloves should be worn. Plastic apron may be necessary to protect clothing in some circumstances.
- Cover with chlorine granules or spillage compound, preferably non-effervescent, if available and surface suitable. It should be noted that chlorine granules mark carpets and their use on carpeted areas should be avoided. Assessment applies and the area should be well ventilated when granules applied. Granules should not be used in unventilated areas. Leave for 2 minutes.
- Soak up with paper towel. Dispose of by double bagging and place in a designated bin.
- Clean area with hot water and detergent if chlorine granules have been used, or detergent and disinfectant solution if not.
- Wash gloves with hot water and detergent before removing and place in a designated bin.
- Wash hands after removing gloves.

1.3 Diarrhoea/Faeces/Urine

- Disposable non- allergenic gloves should be worn. Plastic apron may be necessary to protect clothing.
- Cover with chlorine granules or spillage compound, preferably non-effervescent, if available and surface suitable. Assessment applies and the area should be well ventilated when granules are applied. Granules should not be used in unventilated situations. Leave for 2 minutes.
- Soak and clean up with paper towels. Dispose of by double bagging and place in a designated bin.
- Clean area with hot water and detergent if chlorine granules, or detergent and disinfectant solution if not.

Wash hands after removing glove

1.1 Needles and Syringes

- Disposable non- allergenic gloves should be worn if handling needles and syringes.
- Place in an empty drink can, coffee tin or required bin.
- Notify the police.
- Wash gloves with hot water and detergent before removing and dispose in designated bin.
- Wash hands after removing gloves.
- If at any time you have been pricked by a needle seek medical advice from your doctor or hospital.

2. General Hygiene

2.1 Toilet Accidents

Disposable non- allergenic gloves should be worn. Plastic apron may be necessary to protect clothing.

- Clean with tissues and/or paper towels.
- Place clothes in a plastic bag.
- Help wash and dry person.
- If using a non-disposable towel, place in a bag with clothes when the person is dry.
- Dispose of tissues and/or paper towels by double bagging and place in a designated bin.
- Wash gloves with hot water and detergent.
- Double bag clothes.
- Wash gloves again before removing.
- Wash hands after removing gloves (dispose of gloves in designated bin).

3. Vulnerable Children

Some medical conditions make children vulnerable to infections that would rarely be serious in most children; these include those being treated for leukaemia or other cancers, on high doses of steroids and with conditions that seriously reduce immunity (immunosuppressant). School will normally have been made aware of such children. These children are particularly vulnerable to chickenpox, measles and parvovirus B19- if exposed to any of these then the parent must be informed and medical advice sought.