



## First Aid Policy

**The safety and well-being of every pupil must be a prime concern for all staff while they are in our care. It is essential for all colleagues to be vigilant and sympathetic when a pupil has been injured or their health compromised in other ways. As the first adult responding to an incident, any member of staff, whether trained in First Aid or not, should assume supervisory responsibility for the circumstances until relieved of these responsibilities by a school First Aider or a medical professional. It is vital to refer such cases as required to a School First aider immediately and never to leave a student alone.**

If there is any doubt regarding the severity of a situation, the person should always be referred to the Hospital. In the most serious cases requiring that the victim leave the premises, either to return home or for further medical treatment, the Head of Section and the Headmaster should be notified as soon as possible.

The School First aiders (annex 1) have the responsibility to provide First aid treatment and/or refer pupils to parents, the doctor or hospital wherever this may be appropriate.

During school hours, any person requiring assistance must visit the First aid room, or if needed the First aider will come to the person. After 4 pm, the first aid room is not manned, so anyone requiring assistance should see security at the front of the school who will call a first aider. If the person is unable to walk, then 226166660 should be called and a first aider will come to them.

### First aid Kits

Fully equipped First aid kits are available from the following locations on campus:

- First aid Room
- Front Office
- Science Preparation Room
- Sports Hall
- Staff Kitchen
- Canteen

The action to be taken in general cases is as follows:

**In the case of a life-threatening accident or illness** – Immediately call 112 for an ambulance and start CPR if necessary, asking for help from another adult if alone (the Lead First aider should be informed). Ask for the parents to be contacted. CPR should never be interrupted until an ambulance arrives. The Lead First aider will provide emergency first aid and will accompany the pupil to the hospital. The Lead First aider should remain with the pupil at the hospital until the arrival of the parent(s) or their designated guardian, or until completion of treatment and discharge from the hospital.

**In the case of bone, joint or muscular injury or injury to the head (non-life threatening and other than minor grazing)** – Immediately refer to a School First aider who will make a judgement to provide First aid treatment and/or refer to hospital. **In all cases the student must not be left unaccompanied.** In the case of the former, consider the application of an ice-pack, elevation or immobilization of



injured area, and the application of appropriate dressings. Where hospital treatment is required, parents should be contacted, reassured and requested to collect the child. If the parents are unable to respond quickly, the Lead First aider or other responsible adult will accompany the pupil to the hospital by taxi, whilst the school continues to attempt to make contact with parents. The Lead First aider or *responsible adult* should remain with the pupil at the hospital until the arrival of the parent(s) or their designated guardian, or until completion of treatment and discharge from the hospital.

In any instance of knocks to the head, the Lead First aider will always contact parents to inform them.

**In all cases requiring external medical treatment, the Lead First- Aider will fill in the appropriate forms, irrespective of the time of day. Care of the injured person must take precedence over all other activity at the time.**

**In the case of blood injury** – Call a First aider and apply pressure to the wound using a sterile dressing or clean cloth. If the wound is on a limb, the limb should be kept elevated.

Plastic gloves and sterile dressings (available in the First aid kits, First aid Room, Front Office, Preparation Room, Sports Hall and Staff kitchen) should be used.

**In the event of the spillage of body fluids** – If any bodily fluid (e.g. blood, urine, vomit) has been spilled, the area must be disinfected as soon as possible after the occurrence and the following procedures should be followed:

- Avoid getting bodily fluid on yourself.
- Wear disposable gloves.
- All contaminated material to be put in waste bags and placed in the sanitary bins in the ladies bathroom.
- Whilst on the school premises members of the cleaning team are available to assist with the cleaning up of bodily fluids.

**In the case of illness** – Any person feeling unwell should report to the First aid room, and if after 4pm to the Front Office, or if necessary, a first aider should be called to the person. Should, in the opinion of the first aider, the pupil need to go home or be referred to an hospital, the parents will be contacted by the school, normally by the Academic Secretaries. Pupils must visit First Aid when feeling unwell before permission to go home is given; contact to parents must be made by school.

**In the case of gastric illness / diarrhoea** - Parents should be advised that a pupil with gastric illness involving vomiting or diarrhoea should remain at home until 48 hours after symptoms have abated and parents are asked to inform the school.

**In the case of head lice** – If a pupil is discovered to have live head lice, parents will be asked to collect them immediately; parents will be contacted by the school. The child should not return to school until guarantees have been made that treatment has begun.



Other procedures include:

## Medication

No pupil should ever bring medication, whether prescribed or not, onto school premises without a medical prescription having been scanned and sent through to [medical@obs.edu.pt](mailto:medical@obs.edu.pt). All such medication should be handed in at the entrance gate, to be given to the First aider, who will dispense it as required, making a note of this on the first aid log. Only a medical prescription is acceptable; a note from parents is not sufficient. Parents will be advised of this regularly.

**Asthma Sufferers** – Secondary pupils should keep inhalers in their bags. Primary pupils should lodge their inhaler, clearly labelled, in the First aid Room. If an Asthma attack occurs, an ambulance should be called, and the parents contacted. (*Asthma attack – school's procedure - see Annex A E1*)

Any student requiring an inhaler should not be in school if the inhaler is out of date and no replacement has been provided by parents.

**Diabetes Sufferers** – Pupils who are Insulin-dependent diabetics will have their own programme of treatment. This should be discussed with the parents and the pupil, and information made known to staff. A specific care plan should be signed by the parents and the school. Should a sudden hypoglycaemia (blood glucose level of less than 4mmol/litre (or 70mg/dl) occur or any signs of unconsciousness an ambulance should be called and the parents contacted. (*Hypoglycaemia – School's procedure - see Annex A E2*)

**Anaphylactic Shock** – Pupils with a known severe allergy should keep their own EPI-PEN (adrenaline) in their school bag. In any case, an emergency EPI-PEN is kept in the First aid Room, in the Emergency Medication box and this should be used immediately should an allergic reaction occur. An ambulance should be called and the parents contacted. (*Anaphylaxis – School's procedure - see Annex A E3*)

Any student requiring an EPI-PEN should not be in school if the EPI-PEN is out of date and no replacement has been provided by parents.

## Epilepsy

This is caused by a temporary malfunction in the brain's biochemistry and it is usually controlled by medication. There are two principal forms of seizure:

1. Petit Mal/Absence: No specific aid is required, but the seizure should be noted and reported to the Lead First aider. The pupil will be unaware of the seizure. Symptoms: the pupil looks blank, stares and may have a slight twitching or blinking for a few seconds.
2. Grand Mal/Convulsive: This is alarming for the onlooker but not normally harmful for the pupil except in case of injury. The aim is to protect the pupil from injuring him or herself during the seizure and then provide care once he or she has regained consciousness. Be aware of the effect on other pupils who may be frightened. Warning signs: the pupil may cry out, their body stiffen and then fall to the floor. This would be followed by convulsions.



3. Alternatively, the seizure may begin with an “aura” or warning, e.g. visual, auditory. The pupil will be unconscious or only semi-conscious and may well be incontinent. He or she may salivate, and the saliva could be flecked with blood (if tongue or cheeks have been bitten). The seizure may last a few minutes. The seizure should be noted and reported to the Lead First aider. If a convulsive episode occurs, an ambulance should be called and the parents contacted. (*Epilepsy – School’s Procedure - See Annex A & E4*)

**Medical Records** – A request for updated medical information will be sent to all parents for completion on a termly basis. Details regarding allergies, asthma, diabetes, etc should be recorded on SIMS by the Lead First aider. Any serious medical conditions will be made known to the whole staff. Specific Risk Assessments will be required for serious medical conditions.

**Illness/Accident Log** – All incidents of accident and/or illness to any individual in School, must be recorded in the log. A simplified log will be shared with all staff, so teachers can at any moment check whether a student is in the first aid room, and any serious accidents will be immediately emailed to SLT.

**Slips with First aid treatment** – Form 2 students and below will be given a slip when they have been subject to first aid treatment. Where a student has knocked their head or has had an accident at school (more than a simple graze) the First aider will email or call parents. This will allow parents to be informed at all times and, if necessary, monitor any possible concussion symptom.

Any repeated situation of students using First Aid as an ‘escape’ from lessons/activities must be referred to the Safeguarding Team immediately; as should any other concern with the students’ general wellbeing, ie recurrent lack of breakfast, recurrent pains that may require medical assistance.

**Cases of emergency, accident or illness occurring out of School, but while involved in School business** – If an emergency, accident or illness should occur outside School (e.g. during a sports event, field trip, school trip or visit etc), the accompanying member of staff should decide whether to treat the pupil (in the case of minor incidents) or refer the pupil to hospital. The member of staff should always err on the side of caution. In all cases other than easily treated, minor incidents, parents and a senior member of staff at School should be contacted. If there is any doubt regarding the severity of a situation, the pupil(s) should always be referred to the Hospital. Procedures described above for incidents in School should be adopted. Incidents should be recorded on CPOMS.

**Diseases and dangerous occurrences** – The school has some characteristics that make it the ideal place for the acquisition and transmission of infectious diseases. A large number of children meet daily and they may suffer several infections due to the immaturity of their immune system. Viruses, bacteria or other microorganisms that cause disease, can be introduced from the external environment and can be transmitted between members of the school community and can initiate a way back, causing a constant exposure to microorganisms, regardless of where they originate. In the event of an outbreak among students at the school we will proceed to inform parents and teachers through the usual channels: information letter, phone calls, etc.



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## **Return to school after absence due to infectious/contagious disease**

Any student who is absent due an infectious/contagious disease may only return to school with a medical note confirming recovery, (Covid-19 is an exception to this rule). This note should be emailed to [medical@obs.edu.pt](mailto:medical@obs.edu.pt)

**Last Reviewed: September 2024**

**Next review: September 2025**



## Annex 1

The following table notes those members of staff with Paediatric First aid qualifications:

| <b>Name</b>           | <b>Location</b>                                 | <b>Valid Until</b> |
|-----------------------|-------------------------------------------------|--------------------|
| <b>Lidia Ferreira</b> | <b>First Aid room</b><br>(226166662 or ext 209) | Jul 2025           |
| Fátima Mota           | Primary building                                | Jul 2025           |
| Dina Lourenço         | Blue House (226166661 or<br>ext 201)            | Jul 2025           |
| Michelle Silveria     | Secondary building<br>(226166661 or ext 220)    | Jul 2025           |
| Joana Saraiva         | Blue House (226166666<br>or ext 205)            | Jul 2025           |
| Stacey Howard         | Primary building                                | Jul 2025           |
| Raquel Nunes          | Labs (phone ext 216)                            | Jul 2025           |
| Lenita Lefevre        | Primary building                                | Jul 2025           |
| Paula Oliveira        | Primary building                                | Jul 2025           |
| Anne-Maria Eastley    | Primary building                                | Jul 2025           |
| Patrícia Alves        | Secondary building                              | Jul 2025           |
| Telma Monteiro        | Primary building                                | Dec 2025           |