



St Chad's CofE Nursery and Infant School

COVID-19 Addendum to the First Aid Policy

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Policy Approved **Signed: N Iqbal** **Date: 04.06.2020**

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First Aid Procedures during the COVID-19 (Coronavirus) pandemic

This addendum has been created to help schools outline the first aid procedures they will put in place once phased reopening begins. We have created this addendum in accordance with the latest government guidance surrounding schools' wider reopening from 1 June 2020.

Statement of intent

The school aims to act in accordance with its First Aid Policy as much as possible, however, we understand that we must remain compliant with the relevant first aid legislation while the school observes social distancing and infection control guidelines. This addendum sets out what additional actions the school will take once phased reopening begins.

The information in this addendum is under constant review and kept updated to reflect any changes to national or local guidance.

Enforcing new procedures

- The school carries out a risk assessment which is used to help inform any changes to first aid provision, including the number of first aiders needed on site.
- The school ensures that additional first aid procedures are communicated effectively to all pupils.
- Staff are informed about their legal responsibilities regarding first aid and the additional procedures in place.
- The school informs parents of any changes to provision outlined in this policy.
- The school acknowledges that where conflicts between the relevant legislation and government guidance on managing the coronavirus pandemic arise, the legislation outlined in section 1 of this policy must be followed.

Social distancing and infection control measures

Every 'bubble group' will be issued with a First Aid kit bag which will contain normal first aid equipment plus aprons, gloves and face masks in case PPE is needed. 'Bubble' bumbags must be taken outside during all playtimes and lunchtimes.

In the event of a first aid incident taking place during playtime or lunchtime, where the injury is minor, first aid treatment will be given outside. If the injury is serious e.g. heavy bleeding wounds, gashes, sprains, nose bleeds or a bumped head then the child should be brought into their bubble classroom for first aid to be administered.

When administering first aid, the relevant staff are advised to:

- Wash hands before and after administering first aid, using soap and water or alcohol- based hand sanitiser.
- Always wear gloves and an apron when dealing with First aid incidents.
- Keep at least two metres away from others, where practicable.
- If possible interact side-by-side when administering first aid. eg under normal circumstances it will be sufficient to use a cold compress and hand it to the child to hold to their wound while you sit 2 metres away.
- If a plaster is needed to a small cut then this can be applied.
- Dispose of any waste in a suitable bin.
- Ensure frequently touched surfaces and equipment have been cleaned and disinfected before use.
- If an ice pack is used, discard after use.
- Limit the number of people administering first aid to an adult within each 'class bubble'
- Ensure that all recipients of first aid are kept at least two metres apart from others, e.g. other recipients.





The school acknowledges that under normal circumstances the use of gloves is adequate PPE to administer first aid. For prolonged periods when the 2 metres rule cannot be followed, school recommend the wearing of aprons, gloves and a mask.

when a prolonged period needs to be spent with the child and the 2 metre rule cannot be followed, wear gloves, apron and a face mask.

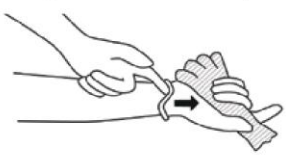






Correct use of PPE

Putting on PPE

Before putting on the PPE, perform hand hygiene. Use alcohol hand sanitiser or soap and water.

| | | | |
|--|--|---|---|
| <p>1 Put on your plastic apron, making sure it is tied securely at the back.</p>  | <p>2 Put on your surgical face mask, if tied, make sure securely tied at crown and nape of neck. Once it covers the nose, make sure it is extended to cover your mouth and chin.</p>  | <p>3 Put on your eye protection if there is a risk of splashing.</p>  | <p>4 Put on non-sterile nitrile gloves.</p>  |
|--|--|---|---|

Taking off PPE

| | | | |
|---|---|---|--|
| <p>1 Remove gloves, grasp the outside of the cuff of the glove and peel off, holding the glove in the gloved hand, insert the finger underneath and peel off second glove.</p>  | <p>2 Perform hand hygiene using alcohol hand gel or rub, or soap and water.</p>  | <p>3 Snap or unfasten apron ties the neck and allow to fall forward.</p>  | |
| <p>Snap waste ties and fold apron in on itself, not handling the outside as it is contaminated, and put into clinical waste.</p> | | | |
| <p>4 Once outside the patient room. Remove eye protection.</p>  | <p>5 Perform hand hygiene using alcohol hand gel or rub, or soap and water.</p>  | <p>6 Remove surgical mask.</p>  | <p>7 Now wash your hands with soap and water.</p>  |

Once removed, PPE must be double-bagged and put into the clinical waste outside.



Overview of when PPE is required

| First Aid | Example | Gloves | Apron | Mask | Glasses/Visor |
|---------------------------------------|---|--------|-------|------|---------------|
| 2 m distance can be observed. | Cold Compress or plaster needed Child can hold cold compress to injury Trip/bump/no mark seen. Graze or small mark | YES | YES | NO | NO |
| 2m distance cannot be followed | As above but when accident requires closer contact Fall/bumped head sprain / break Ice pack needed | YES | YES | YES | NO |
| 2m distance cannot be followed | Gash/bleeding wound/injury to eye/mouth | YES | YES | YES | NO |
| 2m distance cannot be followed | Nose bleed | YES | YES | YES | NO |
| 2m distance cannot be followed | Toilet accident/Intimate care | YES | YES | YES | NO |
| 2m distance cannot be followed | EMERGENCY Dizziness / fainting /choking / seizures / | YES | YES | YES | NO |
| 2m distance cannot be followed | Asthma attack or inhaler required | YES | YES | YES | NO |
| 2m distance cannot be followed | Vomiting/diarrhoea / coughing / spitting | YES | YES | YES | YES |



First aiders

The school ensures that there is a minimum of one paediatric member of staff on site. Where possible, there will also be at least one Emergency First Aider on site during school hours. Where a first aider must be sent home due to showing symptoms of coronavirus, the school ensures that the minimum number of first aiders on site is maintained and arranges cover where necessary.

Where cover must be arranged, the school ensures that:

- Adequate cover is in place before the member of staff leaves the premises.
- In the event that the member of staff must lawfully remain on site, the individual is isolated in a designated room and follows the school's social distancing and infection control measures.
- Symptomatic individuals strictly do not administer first aid
- Alternative arrangements are in place to minimise the need for a symptomatic first aider to administer first aid or where first aid provision is compromised, e.g. high-risk activities are suspended.

In more serious cases of first aid where there is bodily fluid, staff members who are considered critically vulnerable will not be asked to administer first aid. The other 'non-critically vulnerable' bubble staff member will carry out first aid in these incidents.

First aid training

First aiders' training is kept up-to-date.

Where a first aider is unable to renew their training due to the coronavirus pandemic, they are instructed to:

- Check if they are eligible for an extension.
- Ensure they requalify before 30 September 2020.
- Undertake any training that can be done online where face-to-face training is not required or available.

Administering and handling medication

When administering medication, staff are expected to:

- Follow the procedures set out in the Administering Medication Policy.
- Adhere to the school's social distancing and infection control measures as much as possible.
- Minimise the time spent in close proximity to others where maintaining a distance of two metres is not possible – staff should use side-by-side interaction with others instead.
- Minimise face-to-face contact where side-by-side interaction is not practical.

The school acknowledges that the use of gloves and a mask is required to administer inhaled medication.

When handling and storing medication, staff are advised to:

- Wash their hands for at least 20 seconds with soap and water or use an alcohol-based hand sanitiser before and after they handle medication.
- Wash and disinfect frequently touched surfaces before contact, including any receptacles for storing medicine, where required.
- Minimise the number of people handling medication.
- Ensure that medication or medical equipment brought in from home is safe to be taken home again.

III health and infection

Where an individual must wait on the school premises to go home when showing symptoms of coronavirus, staff ensure that:

- The individual is isolated in a cool, well-ventilated, designated area (Learning Zone).
- They adhere to the school's social distancing and infection control measures. Use of gloves, mask and apron is recommended.



- Areas used by the individual are cleaned and disinfected once they leave, e.g. toilets.

Parents who must collect their unwell child from school are informed that they must call 999 if their child becomes severely unwell or their life is at risk.

- In the event that a symptomatic individual requires first aid or medication, staff wear PPE when required to administer first aid or medication.
- If a member of staff has helped care for a symptomatic individual and develops symptoms themselves, they are sent home immediately.
- The procedures are outlined for booking a test for anyone developing symptoms through an online portal. They should self-isolate for 7 days and their fellow household members should self-isolate for 14 days. If a staff member tests positive the rest of her bubble class should be sent home and advised to self-isolate for 14 days.

Cardiopulmonary resuscitation during COVID pandemic.

Emergencies

Guidance for Cardiopulmonary resuscitation (CPR) has been updated due to the COVID-19 outbreak.

Accidents and emergencies are managed in line with this policy.

When administering emergency first aid, social distancing restrictions do not apply.

A member of staff calls 999 immediately if a symptomatic individual becomes severely unwell or their life is at risk. **If COVID is suspected inform 999 when call made.**

In ADULTS it is recommended that you **do not** perform rescue breaths or mouth-to-mouth ventilation; perform chest compressions only.

In CHILDREN cardiac arrest is more likely to be caused by a respiratory problem (asphyxial arrest) therefore chest compressions alone are unlikely to be effective. **It is vital that Rescue breaths should still be performed in children.**

If you have concerns for a child who appears unresponsive with no obvious signs of life:

Shout for help, Someone dial 999 emergency help.

Approach with care (gloves and apron, disposable resuscitation face shield)

Free from danger (check surroundings)

Evaluate (are they responsive? Are they breathing? During COVID do not listen for breathing by placing your ear or cheek close to the patients mouth.

Start CPR straight away **give 5 initial rescue breaths.**

If still no signs of life start CPR with:

30 chest compressions : 2 breaths each cycle to the beat of Nellie the Elephant.

Doing rescue breaths will increase the risk of transmitting the COVID-19 virus, either to the rescuer or the infant/child. However, this risk is small compared to the risk of taking no action as this will result in certain cardiac arrest and the death of the child.

If you are required to perform cardiopulmonary resuscitation (CPR) adopt appropriate precautions for infection control. If the decision is made to perform mouth-to-mouth ventilation the risk is mitigated by **placing a disposable resuscitation face shield with a one way valve over the child's mouth.** These face shields are kept in school and one is available in each of the first aid bags.

Should you have given mouth-to-mouth ventilation there are no additional actions to be taken other than to monitor yourself for symptoms of possible COVID-19 over the following 14 days. (Covid 19 .gov advice) Should you develop such symptoms you should follow the advice on what to do on the [NHS website](https://www.nhs.uk).



Monitoring and review

This addendum is reviewed by the headteacher in reaction to any new government advice and updated guidance. Once the school resumes regular activity, and if deemed appropriate by the headteacher, all sections within this appendix will expire.



COVID 19 Procedures

How COVID-19 is spread

Spread of COVID-19 is most likely to happen when there is close contact (within 2 metres or less) with an infected person. It is likely that the risk increases the longer someone has close contact with an infected person.

Respiratory secretions (droplets) containing the virus are likely to be the most important means of transmission; these are produced when an infected person coughs or sneezes.

There are 2 common routes people could become infected:

1. Secretions can be directly transferred into the mouths or noses of people who are nearby (within 2 metres) or possibly could be inhaled into the lungs.
2. It is possible that someone may become infected by touching a person, a surface or object that has been contaminated with respiratory secretions and then touching their own mouth, nose, or eyes (such as shaking hands or touching door knobs then touching own face).

Remember... *Catch it, Kill it, Bin it.*

General guidance

The best way to protect yourself and others is through rigorous cleaning, personal hygiene and regular hand hygiene. An increased frequency of cleaning and disinfection of all surfaces and equipment, using standard household cleaning and disinfection products, is recommended.

After contact with any member of the public, clean your hands thoroughly with soap and water or alcohol hand sanitiser at the earliest opportunity. This advice is applicable to all situations, regardless of whether there was close contact or the minimum 2 metre social distancing was maintained.

Avoid touching your mouth, eyes and nose.

There are **no** additional precautions to be taken in relation to cleaning your clothing or uniform other than what is usual practice.

Wearing PPE

Clean your hands thoroughly with soap and water or alcohol sanitiser before putting on and after taking off PPE. In all circumstances, the safe removal of the PPE is a critical consideration to avoid self-contamination. Use and dispose of all PPE according to the instructions which is to double bag and place immediately in an outside bin.

First aid, personal care.

If physical contact is likely to be made where it is not possible to maintain a 2 metre or more distance away from an individual, disposable gloves, a surgical mask and a disposable plastic apron are recommended.

Providing assistance to unwell individuals

If you need to provide assistance to an individual who is **symptomatic** and may have COVID-19, wherever possible, place the person in a place away from others. Our COVID treatment room/pod is the Learning Zone. This room is a treatment room only. PPE is stored and available for use as recommended. This includes mask, disposable gloves and apron.



Parents of a sick child will be telephoned and will be asked to collect their child immediately.

If a staff member reports they feel unwell /develops symptoms of COVID-19, however mild, they should go home immediately, self-isolate for 7 days and request a COVID swab test. Refer to the advice on the [NHS website](#) and the [Stay at home guidance](#).

Cleaning the area where assistance was provided

Cleaning will depend on where assistance was provided. Public areas where a symptomatic individual has passed through and spent minimal time in (such as corridors) but which are not visibly contaminated with body fluids can be cleaned in the usual way. However, all surfaces that a symptomatic individual has come into contact with must be cleaned and disinfected.

When there is an anticipated risk of contamination with splashes, droplets of blood or body fluids.

The use of a fluid repellent surgical face mask is recommended alongside gloves and apron. Additional use of disposable eye protection (such as face visor or goggles) should be risk assessed and used ONLY in this situation..

If there has been a blood or body-fluid spill

Keep people away from the area. Use a spill-kit (staff toilets) using PPE and following the instructions provided with the spill-kit. If no spill-kit is available, still using PPE place paper towels/roll onto the spill and double bag and dispose in outside bins.

Contacts of the person you have assisted

Advise for anyone who has had close contact with the individual is that if they go on to develop symptoms of COVID-19 (a new continuous cough, a fever, or a loss of, or change in, normal sense of taste or smell), they should self-isolate and follow the advice on what to do on the [NHS website](#).