



المدرسة الآسيوية الدولية الخاصة ASIAN INTERNATIONAL PRIVATE SCHOOL

Approved by the Ministry of Education-UNE-Affiliated to the Central Board of Secondary Education, New Delhi
Member: Council of the C.B.S.E Affiliated Schools in the Gulf

FIRST AID POLICY

1. Policy Statement

The policy of the School is to ensure there are adequate and appropriate equipment and facilities for Asian International Private School.

The Asian International Private School Health Manual is designed to guide school nurses, school administrators, and others, in the development, implementation, evaluation, and quality improvement activities of school health services.

2. Purpose

- ✦ To identify how / where first aid is given to children and adults at Asian International Private School.
- ✦ To identify those members of staff who are qualified to administer first aid.
- ✦ To state the designated person to take charge of first aid arrangements as determined in the health and safety policy.
- ✦ To record the location and contents of first aid boxes.
- ✦ To provide information for employees on first aid arrangements on travelling, in school, school bus, etc
- ✦ To explain first aid provision both on and off the school premises (on school visits/ matches).
- ✦ To have at least one qualified person on the school site when children are present.
- ✦ To show how accidents are to be recorded and parents informed.
- ✦ To ensure access to first aid kits.
- ✦ To ensure hygiene procedures for dealing with the spillage of body fluids are in place (see appendix below).
- ✦ To make arrangements for pupils with particular medical conditions (for example, asthma, epilepsy, diabetes – see appendix below).
- ✦ To provide guidance on when to call an ambulance.

3. Roles and Responsibilities

Responsibility for the implementation of the provision of first aid at Asian International Private School is delegated by the Board of Governors to the Principal.

3.1 The Principal

The Principal determines the number of Appointed Persons, who oversee the management of the medical room. The Principal also determines the number of First Aiders and the level of training they should receive. The number of Appointed Persons and First Aiders is reviewed annually by the Principal or more frequently when required (for example, following an accident or emergency).

When determining the appropriate number of appointed persons and First Aiders, the Principal will take into account:

- ✦ The number of staff (and pupils) present at any one time;
- ✦ The distribution of staff;
- ✦ The number and location of first aid boxes;
- ✦ The level of experience of the staff;



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- ✦ The number of staff and pupils with disabilities or specific health problems;
- ✦ The size, nature and location of the school premises to which members of staff normally have access in the course of their employment;
- ✦ Whether they are travelling;
- ✦ Arrangements for off-site activities;
- ✦ Arrangements for out of school hour activities such as parents' evenings;
- ✦ Parts of the school premises with different levels of risk;
- ✦ The types of activity undertaken;
- ✦ The proximity of professional medical and emergency services;
- ✦ Any unusual or specific hazards (e.g. working with hazardous substances, tools or machinery)

3.2. OSH Officer

- ✦ Must have appropriate training.
- ✦ Skills and knowledge will vary with each type of workplace, as will the number required
- ✦ Need to have access to appropriate first aid kits and where appropriate, first aid rooms and occupational health centers.
- ✦ Identify hazards that could result in injury or illness
- ✦ Assess the likelihood and severity (the risk)
- ✦ Determine and provide the appropriate first aid facilities and training - and evaluate these
- ✦ Review the requirements on a regular basis or as circumstances change.

4. Practice and Procedure

4.1 The School has a clinic on the premises which adheres to all mandatory requirements set by the Abu Dhabi Education Council and HAAD for the establishment and the management of School clinics and the provision of School-based health services.

The Owners, The Principal and the School nurse are responsible for fully understanding and strictly adhere to all of the Council and HAAD regulations, policies, and standards relating, directly or indirectly, to the establishment and management of School clinics and the mandatory provision of School health services to all School students in AIS.

The school holds and maintains a HAAD healthcare facility license for School clinics. A copy of the school clinic's valid HAAD healthcare facility license is displayed at all times in the School clinic along with a copy of the School nurse's valid HAAD healthcare professional license of the category of registered School nurses. These may never be removed or tampered with.

The Principal ensures that the School clinic is never used for any purposes other than the provision of School health services. School clinic furniture and equipment shall not be transferred to other Schools, according to the School clinic requirements set by HAAD. School clinics is designed to maintain the segregation between male and female students at all times.



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4.2 School Nurses

The School employs full-time School nurses who hold a valid HAAD healthcare professional license for registered School nurses.

The School nurses are available on School premises on a full-time basis, every school day, including exam days, according to the ADEK-approved School calendar. School nurses shall comply with professional qualifications requirements set for School nurses by HAAD, and meet the expectations for their performance criteria.

It is mandatory for all Schools to appoint a female School nurse in all-female student Schools and a male School nurse in all-male student Schools. In co-education School environments: A female School nurse shall attend to all male and female students from KG1 to year 6 A female School nurse will only attend female students, from year 7 to Year 12. A female or male School nurse may attend to male students from year 7 to year 12.

4.3 Incident Report Forms

All incidents should be recorded in line with guidance and procedures contained within the AIS Incident Reporting Policy. All accidents to staff and students must be reported in writing, using the incident reporting form according to the severity. Entities have a duty to ensure that all incidents, no matter how small or trivial they may appear, are recorded and investigated. These include standard incident handling forms (forms G, G1 and G2) and specified timelines for reporting. The completed forms should be retained by the reporting staff member and a copy should be given to the Health and Safety committee.

FORM G: To be submitted to the concerned Sector Regulatory Authority

- for fatalities within 24 hrs
- for other Serious Incidents within maximum of 3 working days from the date of incident

FORM G1: Appropriate Investigation to be completed and submitted to SRA as soon as practicable

Maximum 30 Calendar Days from Date of incident –For all Serious Incidents notified to SRA by FORM G

FORM G2: All non-serious incidents not requiring notification to SRA should be investigated and results recorded using this form (G2).

4.4 Dealing with blood and other body fluid spillages

During school hours the following procedure must be followed as recommended by the Health and Safety executive.

- Use of Gloves are mandatory for all blood / body fluid spillages.
- Soiled wipes, tissues, plasters, dressings etc. must be disposed of in the clinical waste bin.
- When dealing with spillages, place absorbent paper hand towels on the affected area.
All liquid material should be completely absorbed into the towels.



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4. Remove towels with gloved hand and place in clinical waste yellow bag.
5. Wipe the area with a suitable disinfectant
6. Place a 'Wet floor hazard' sign if appropriate over the area.
7. Ventilate the area well.
8. Clean any reusable equipment by soaking in disinfectant solution or wiping it with disinfectant, before removing gloves, and putting them in the bag.
9. Place the bag in the clinical waste bin in the School Clinic.
10. Wash your hands with soap and water/ hand sanitizer.

Gloves should be worn when dealing with bodily fluids in particular.

4.5 Clinical Waste Disposal

Clinical waste is anybody fluid, stained wipes, tissues, plasters, or dressings. This may include vomit and urine. It also includes the sharps bins where the diabetic needles are disposed.

It is vital these items are not put in the general rubbish collection bins which may be a health risk to the refuse collectors.

Bins for medical waste are compliant with H&S Policy. The School Nurse arranges collection when the bins are full, or when appropriate.

Sharps bins are also collected and replaced.

4.6 Supporting students with Medical Needs in the School

4.6.1 Definition of medical needs

Students at Asian International Private School, during their time with us, may be affected by a wide range of medical needs. These needs include:

- ⬇ Long term medical conditions: Asthma, diabetes, cystic fibrosis and epilepsy.
- ⬇ Recurring medical conditions: Chronic fatigue syndrome / ME, leukemia, allergies
- ⬇ Life threatening conditions: leukemia, cystic fibrosis.
- ⬇ Operations, road traffic accidents and sports injuries resulting in a period of recuperation.
- ⬇ Mental health: anxiety disorders, eating disorders, mood disorders (including depression)
- ⬇ Effects of treatment for diagnosed medical conditions: steroids, chemotherapy, radiotherapy, and medications affecting performance.
- ⬇ Infectious diseases:
- ⬇ Degenerative conditions where deterioration in eyesight or physical mobility are expected: Duchenne muscular dystrophy
- ⬇ Short term medical conditions: Finishing off a course of antibiotics, apply a lotion.
- ⬇ Transient conditions: Headaches, earache, muscle strain.

Information regarding medical needs is kept on file in the medical records area. The School Nurse is responsible for ensuring that staff are kept up to date and correctly informed about a child's medical condition.



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4.6.2 Long Term Medical Needs

The School must know about any medical conditions before a child starts school, or when a student develops a condition. The School Nurse will take responsibility for students with medical needs by liaising with parents. In these cases, a health care plan will be drawn up.

This must include:

- ✚ Details of a pupil's condition
- ✚ Special requirements e.g. dietary needs, pre-activity precautions
- ✚ Medication and any side effects
- ✚ What to do and who to contact in an emergency
- ✚ The role the school can play.

4.6.3 Short term medical needs

The School Nurse is responsible for the health needs of all students.

Parents must be aware that they should keep their child at home if they are unwell.

4.7 Administering Medication in school

School nurses shall ensure that they fully understand and strictly adhere to all HAAD standards that regulate the administration of medications in Schools at all times. Medications shall only be administered by the School nurse as prescribed by a HAAD-licensed physician for acute or chronic conditions or as required in an emergency situation.

The School Nurse may be supported by a qualified First-aider. However, medication must be administered solely by the School Nurse and is authorized to do so.

No pupil should be given medication without his/her parent's written consent.

Consent for 'over the counter' remedy is given on the medical information sheet that is filled in when a child starts at school. There is a separate consent form for other medication that is brought in to school. If consent is withheld or the form is not in the file, medication may only be given on the instruction of the School Nurse.

If medication is be administered to the child check:

- ✚ Name of child.
- ✚ No adverse reactions to medication are noted on the medical form.
- ✚ Medication is in date.
- ✚ Correct dose for the age of child.
- ✚ Document dose and time given.
- ✚ Give child a note to take home.
- ✚ Monitor child for adverse effects to medication, report to parents.



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4.8 Head Lice

If staff suspect a child of having headlice they should have a discrete word with parents at the end of the day and a letter should be sent to all parents in the year group informing them that a case of headlice has been confirmed.

On no account should a child's hair be brushed with anything other than his or her own hairbrush.

4.9 "EPIPEN" Procedure (If available)

If a child known to have a severe allergic reaction likely to cause anaphylaxis is exposed to his or her particular allergen the correct procedure is as follows:

1. Two members of staff stay with the child while the EPIPEN is administered (NOTE TIME).
2. A third member of staff
 - a. Dials 999 to call for an ambulance
 - b. Calls the School Nurse requesting immediate medical assistance
 - c. Informs the child's parents
3. On arrival of ambulance, one member of staff should accompany the child to hospital, taking EPIPEN Box. A second member of staff should follow by car. Staff should then remain with the child until his or her parents arrive.

4.10 General procedures to minimize accidents

- ✚ First Aid kits should always be out of children's reach or in the possession of a member of staff.
- ✚ Children should always be supervised when using scissors, compasses and other sharp tools. Teachers' scissors must always be kept out of the children's reach. Scissors should not be used as part of wet play time activities.
- ✚ With the exception of some students where a prior agreement has been made with parents (i.e. children going to the Music School for individual lessons) children in the KGsection should never walk around the campus alone and only in exceptional cases should any children leave the school without an accompanying adult.
- ✚ Children should never be asked to plug in or unplug electrical appliances.
- ✚ Matches must be locked in the first aid cupboards. All staff should be alert to potential risks and hazards and report defects and faults to the OSH.

4.11 Guidelines for storing medication

Medication includes pharmaceutical drugs, homeopathic remedies and vitamins that are bought over the counter.

Some medicines may be harmful to anyone to whom they are not prescribed. It is important that medication is locked where appropriate.

Medicines that require refrigeration must be kept in a safe and secure fridge.

Medicines must be kept in their original container.



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4.12 Guidelines for children carrying their own medication

In some instances, it is more appropriate for a child to keep medication themselves.

Inhalers – Over the age of 7, an asthmatic child must be encouraged to keep their inhaler with them for immediate use if required. The inhaler must have name and class written clearly on the side, and there needs to be a spare one in the school clinic area as a precaution.

Epi Pen – These are kept in designated areas in a clearly identified box (photo and name of child on outside), which includes the Health Care Plan for that child where they are clearly accessible in an emergency

Diabetic dextrose – Diabetic children may carry a tube of dextrose or glucotabs with them to class in a clearly labelled container to use in the event of a hypo.

Diabetic rescue bag – This clearly named bag must be taken out to games by the child. It will include a health care plan, dextrose and a carbohydrate bar.

4.13 Guidelines for managing medication off-site

Trip information must be given to the School Nurse at least a week in advance.

Medication for that trip will be given to the staff in charge immediately prior to departure.

The staff in charge will have sufficient training prior to the trip to be able to administer simple medication needs. A dedicated bag with medication that can be locked up will be supplied with 'over the counter' medicines and any prescription medication that will be required. Guidelines about giving this medication will be supplied.

The supplied trip folder will highlight medical conditions of pupils with need, and training will be offered where required. Children of significant need require a named member of staff to oversee their care on a trip where a nurse is not present.

The member of staff in charge of visit must carry EPIPEN and mobile telephone.

If at all possible, a parent of the allergic child should be used as a helper on the visit.

All staff and helpers should be advised of the potential problem before leaving school and an appropriate procedure in line with the general school policy agreed upon.

4.14 Guidelines for disposal of medicines

- ↓ The School Nurse will dispose of expired medication in an appropriate manner.
- ↓ Parents must collect medicines held at school at the end of each half term.
- ↓ Medication prescribed for a student must not be kept for use by anyone else, and should be disposed of correctly.
- ↓ Sharps boxes must be available for the disposal of needles. Collection and disposal of these boxes will be arranged by the School Nurse.



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4.15 Conjunctivitis policy

If the child is in the school premises and they have the above symptoms, their parents should be contacted and requested to take their child home. Young children are not necessarily able to adhere to strict hygiene measures and therefore could spread the infection to other children within the school.

The parent should be advised how to care for the infected eye (hand hygiene, not sharing towels, bathing eye in cooled, boiled water frequently, not rubbing eyes, using disposable tissue if need to touch the eye).

5. Assessment and Record Keeping

5.1 Request for Medical Information

At the beginning of each academic year or when a child joins the school, parents are asked to identify any medical conditions including asthma on the child's enrolment form.

5.2 First Aid Treatment

The school must keep a record of any first aid treatment given in school. This should include:

- ✚ Name of the injured or ill person
- ✚ Date, time and place of incident
- ✚ Details of the injury / illness and what first aid was given
- ✚ What happened to the person afterwards (e.g. went to hospital, resumed normal duties, went home etc.)
- ✚ Name and signature of the person dealing with the incident
- ✚ These details may be filled in to the individual records kept for each child in the surgery area.
- ✚ If necessary, the accident book must also be filled in and the Principal is to be informed.

These details should be recorded on the Incident Reporting Form

5.3 Record Retention

Records should be retained in line with OSH Policy and Incident Reporting Policy.

6. Staffing and Resources

At Asian International School there is a registered School Nurse on duty during the school week in school hours. A school clinic is provided for first aid, and there are first aid boxes and defibrillators around the school for use by staff for minor incidents. The locations of these first aid boxes and defibrillators are advertised around them school. When the students are off site, an emergency first aid bag is available to be taken, and will be checked by the school nurse prior to collection.



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Teachers and other staff in charge of students are expected to use their best endeavors at all times, particularly in emergencies to secure the welfare of their students at school in the same way that parents might be expected to act towards their children.

Provision for absentees and for the practical departments such as sciences, technology and PE must also be assessed.

6.1 The School Nurse

In School the duties of the school nurse are to:

- ✦ Give immediate help to casualties with common injuries or illnesses and those arising from specific hazards at school.
- ✦ When necessary, ensure an ambulance or other professional medical help is called.
- ✦ Enter details of injuries and treatment outcome in the appropriate record.
- ✦ Take charge when someone is injured or ill.
- ✦ Looks after the first aid equipment e.g. restocking the boxes.
- ✦ Ensures that the defibrillators are in date and if not, ensures that they are replaced by instructing the OSH Officer.
- ✦ Ensures that the placement of the First Aid Boxes is advertised correctly on school signs.

7. Associated documents

- ✦ AIS First Aid Policy
- ✦ AIS Asthma Policy
- ✦ AIS Anaphylaxis Policy
- ✦ AIS Head Lice Policy
- ✦ AIS Diabetes Policy
- ✦ AIS Infection Control Policy
- ✦ AIS HSE Policy
- ✦ AIS Incident Reporting Policy
- ✦ AIS School Clinic Manual

8. Monitoring and Review

The School Nurses review all clinic policies annually. The School Nurses are line managed by the School Administration Department.

The nominated OSH officer oversees all HSE policies for the Principal who holds ultimate responsibility for HSE matters.

9. Approved by

Principal: _____



