



The Maria Montessori Training Organisation
trading as
The Maria Montessori Institute

First Aid Policy

Guidance

Whilst first aiders carry out their duties voluntarily, they do so in the course of their employment with the Maria Montessori Institute (MMI). MMI maintains detailed training records to ensure that appropriate staff hold a current approved first aid qualification; and all staff required to follow the MMI guidelines set out below in relation to the administration of first aid.

MMI management should make assessments of First Aid needs within the workplace and review together with staff the need for First Aid provision within the School or Training Centre.

Communication is important for effective first aid, displaying information showing:

- names of first aiders and the location of the first aid box
- contact details of the emergency services, local hospital and other available medical assistance (telephone numbers and addresses).

This information needs to be sited near to every telephone in every classroom and other key places.

All staff should be aware of the location of the First Aid kit(s) and be familiar with its content and guidelines.

First Aid Training

At least one staff member per site should have a valid Emergency First Aid at Work training. Staff members working in Children's House should have a valid Paediatric First Aid training. Staff members working in Elementary should have a valid Schools First Aid training.

First Aid procedures

Should a member of staff, child, student or visitor suffer a major injury or look seriously ill, the local hospital or ambulance service must be called immediately by calling 999 or 112.

The parent/emergency contact of a child should be contacted to collect the child as soon as possible in different scenarios:

- After an incident/accident that does not allow the child to continue with school activities or requires medical advice.
- The child is not feeling sufficiently well to remain in school.
- The child has a high temperature.
- The child is displaying symptoms of any virus.

First Aid will be administered as appropriate and emergency services will be sent for if the injury warrants this action. Wherever possible, ensure another adult is present or aware when first aid is being administered.



All head injuries (however slight) are reported to parents, in case of possible complications later. Also, in the event of an injury requiring further investigation, parents are advised to seek medical advice. Please refer to the procedures for 'Head Injury'.

Splinter removal in school is possible if they are partly exposed and easily removed with tweezers:

- Wash your hands and wash the area surrounding the splinter with soap and warm water,
- Sterilize the tweezers with disinfectant solution or TCP,
- Gently pull out the splinter (be sure the tweezers have a firm grip on the end of the splinter and pull slowly and gently at the same angle as the splinter went into the skin),
- Clean the wound.

If splinters are deeply embedded staff should inform parents for them to seek medical help.

Staff should watch the area for signs of infection (increased warmth, swelling, redness, fluid leaking, or pain) and advise parents to contact their child's healthcare provider.

In case of any incident/accident an A1 form should be completed on My Montessori Child and signed by the parent / carer

First Aid / Emergency Area

The MMI should provide at every site a suitable area that can be used for medical treatment when required. The first aid area does not need to be used solely for first aid purposes but must be readily available when needed. Ideally, it should be situated near a toilet.

If the child is ill and awaiting collection, they should be moved to the emergency area where they can be isolated with appropriate supervision. Ideally, a window should be opened for ventilation and they should be at a safe distance from other people. Whilst accompanying the child, the member of staff should wear PPE if a safe distance cannot be maintained or contact is necessary (for a very young child). Materials that the ill person has touched and the areas where they have been (including the bathroom) should be cleaned and disinfected before being used by anyone else. Waste should be disposed of safely with clinical waste disposed of in a yellow bag.

Equipment and facilities the school first aid area should have:

- ◆ A sink with hot and cold running water
- ◆ Drinking water
- ◆ Soap, paper towels, disinfecting hand sanitizer and surface wipes or antibacterial spray
- ◆ First aid kit and materials and PPE (disposable gloves, face shield/mask and aprons)
- ◆ Foot operated refuse container
- ◆ A wipe clean foldable bed, blankets and a chair
- ◆ Accident/Incident forms for recording incidents attended by a first aider or appointed person.

First Aid Box and Medicines



There should be at least one fully-stocked first-aid kit for each site and per class and one additional first aid kit ready for outings.

It is important to have a fully-stocked first aid kit to deal with minor accidents and injuries. This requires regular checks and back up supplies of first aid equipment. Every time something is used there has to be a stock order to replace the used items. As a general guide each box should be checked termly.

First-aid kit(s) and medicines should be kept out of children's reach but where adults can easily get them, and all staff members should know their location.

All members of staff should read the first aid manual regularly.

All premises must have a fully stocked First Aid Kit with the following contents, all of which must be in date:

- ◆ Guidance on First Aid,
- ◆ The names of all staff that are first aiders,
- ◆ The telephone number and address of the nearest hospital,
- ◆ Sterile dressings (**expired dressings must be disposed of immediately**):
 - Wound dressings (USE: they are easy to apply and so are ideal for an emergency):
 - 6 x medium sized individually wrapped, sterile wound dressings, 12cm x 12cm
 - 3 x large sized, individually wrapped, sterile wound dressings, 18 x 18cm
 - 3 x sterile finger dressings 3.5cm x 3.5 cm
 - At least 2 x sterile eye pads (USE: suitable for minor eye injuries and provides initial protection from possible infection. If there is a serious eye injury or there is something embedded in the eye, medical advice should be sought urgently and an eye dressing should not be applied)
 - Adhesive dressings or hypoallergenic plasters (USE: made from fabric or waterproof plastic and can be applied to small cuts and grazes):
 - 20 x individually wrapped **hypoallergenic** sterile adhesive dressings, assorted sizes
 - 2 x burnshield dressings 10cm x 10cm (USE: provides relief from pain of burns and scalds caused by fire, steam, boiling water, etc, physical protection against contamination as it is non-toxic, non-irritant, anti-bacterial and non-adherent)
- ◆ Bandages:
 - 2 x Conforming rolling bandages 7.5cm x 4.5cm (USE: to support injured joints, limit swelling, maintain pressure on wounds and secure dressings in place)
 - 4 x individually wrapped triangular bandages (USE: made of cloth and can be used as dressings for large wounds and burns)
- ◆ Additional items:
 - 6 x safety pins (USE: to fasten loose ends of bandages)
 - Blunt ended scissors (USE: to cut bandages or sticky tape or someone's clothing if you need to get to a wound)
 - 2 x Microporous tape 2.5cm x 10m (USE: to hold dressing in place or to hold the loose end of bandages)
 - 2 x Foil blankets (USE: to help retain body heat in survival, emergency and first aid situations)
 - 20 x Sterile **alcoholic-free** cleansing wipes (USE: to clean the skin around the wound)
 - At least 3 pairs of nitrile (**latex-free**) disposable gloves – pair individually wrapped (USE: gloves should be worn whenever one dress wounds, handle bodily fluids or waste materials)
 - 2 x Revive-Aid airway for mouth-to-mouth resuscitation (USE: for the level of protection one needs in order to administer resuscitation safely)



- 2 x Sterile emergency eye wash bottle (USE: ideal for washing and rinsing eyes that have been contaminated with particles, smoke, dust or liquid, check use-by dates regularly)
- Classical non mercury thermometer
- 2 x plastic tweezers (USE: to remove splinters if they are partly exposed and easily removed with tweezers. If splinters are deeply embedded then parents should be consulted and professional medical help sought)
- Yellow plastic bags for disposal of dressings, etc,

The following items can be kept in stock but should not be put into first aid kit:

- Sterile cotton wool balls (USE: suitable for padding and protection. Due to the free fibres that can break away, it isn't fully suitable for using direct onto open wounds)
- Cold packs (USE: after an injury to minimize swelling around the injury, reduce bleeding into the tissues, and reduce muscle spasm and pain. Always use a towel or compression bandage between skin and cold pack to prevent frostbites and avoid infection):
 - At least 2 x reusable cold packs (USE: provides instant pain relief of injuries)
 - 2 x disposable instant cold packs (USE: only when reusable cold pack is not available. After shaking it stays cold for 15/20 min, making it ideal for the early treatment of sports injuries)
- Hand sanitizer
- Disposable gloves, face mask, and aprons
- Face shields,
- Disinfectant solution, such as TCP,
- Antibacterial spray or wipes for cleaning surfaces,
- Forehead digital thermometer,
- Blankets.

Medicines must be stored on separate shelves in locked cupboards. All medicines must be clearly labelled and kept together with their respective Consent Medicine Administration form signed by parents/carer.

Guidance on Infection Control

In order to avoid the spread of infection we follow these procedures:

- All surfaces will be cleaned with an anti-bacterial cleaner.
- Everyone washes their hands after using the toilet and doing activities in the garden. Hands should be washed before handling food, and at regular intervals throughout the day.
- Individual paper towels will be available and disposed of hygienically.
- Children are encouraged by example and word to cover their mouth when coughing or sneezing.
- Tissues are used and available to blow noses and disposed of hygienically.
- Staff members and children are encouraged not to touch eyes, nose and mouth with unwashed hands.
- Children are asked not to share items that come into contact with the mouth.

In the unusual event that someone is taken ill and there is blood or bodily fluid spills (e.g. urine, vomit) the following precautions should be followed:

- Wear protective gloves and other PPE if necessary.
- Wash the wound with water.
- Apply a suitable hypo-allergenic dressing (in case of minor injury).



- It is important that the surrounding area is evacuated and cleaned immediately wearing disposable PPE.
- Pour sterilising fluid / antibacterial cleaner on to paper towels or absorbent material and place these over the spill and wipe as much as possible.
- Pour more sterilising solution on top for 20 minutes and then wipe up remaining solution.
- Ensure that everything is wiped and cleaned up effectively.
- All non-disposable cleaning materials need to be disinfected with solution and allowed to air dry.
- All disposable PPE and cleaning material should be disposed of and be placed into the waste bin immediately.
- Double bag and securely tie up waste bags and discard.
- Thoroughly wash hands with soap and water.