



PUTNEY
HIGH SCHOOL

GDST
GIRLS' DAY SCHOOL TRUST

First Aid Policy

First Aid Policy

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First Aid Policy

Policy Statement

This policy is designed to promote the health, safety and welfare of pupils, staff and visitors at Putney High School through the provision of first-aid equipment and trained personnel in accordance to the requirements of the Health and Safety (First Aid) Regulations and relevant DFE guidance.

'First-aid' means:

- (a) in cases where a person will need help from a medical practitioner or nurse, treatment for the purpose of preserving life and minimising the consequences of injury and illness until such help is obtained, and
- (b) treatment of minor injuries which would otherwise receive no treatment, or which do not need treatment by a medical practitioner or nurse.

H&S (First Aid) Regulations 1981

School Provision

The aim of first aid is to preserve life and to ensure that all injuries, accidents and illnesses are appropriately dealt with to prevent any serious harm. Putney High School recognises the importance of providing excellent first aid to all staff, pupils and visitors while onsite/offsite and have adequate access to facilities and materials when participating in school-related activities.

- Parents are made aware of the school's procedures for first aid.
- Adequate training and guidance are available for first aiders/appointed persons.
- Risk assessments are carried out to ascertain the needs of the school and the level of provision required, which will include specialist first aid, for example
 - Paediatric First Aid for Early Years Provision,
 - Lifeguard for swimming lessons,
 - Sports First Aid training for all PE staff
 - Schools First Aid/First Aid for teachers on low-risk trips,
 - Activity First Aid/Outdoor First Aid/Rescue & Emergency for remote environments.
- The necessary equipment, and facilities are available as well as the appropriate number of first aiders.
- All staff must be made aware of first aid arrangements and such information is included in the induction process for new staff.
- A written record is kept of all significant accidents both on and off the premises and that HSE is informed of major injuries without delay. Records will be kept in

accordance with the Trust's policy on the retention of documents which can be found on The Hub (and, in any event, for a minimum for 3 years).

- 'Near Miss' Forms are completed as necessary online on Sphera.
- A record is kept of any first aid treatment administered.

School Practice

All teachers and other staff are expected to use their best endeavours at all times, particularly in emergencies, to secure the welfare of pupils in the school. Staff duty of care: Anyone caring for children including teachers or other school staff have a common law duty of care to act like any reasonably prudent parent. In some circumstances the duty of care could extend to administering medicine and /or taking action in an emergency. This duty also extends to staff leading activities off site, such as visits, outings or field trips.

In addition to the information given in the Trust Health and Safety Policy further information can be obtained from "Guidance on First Aid for Schools" issued by the DCSF which itself offers a list of useful publications and contacts.

Senior School

Please contact the school nurse in case of emergency. Minor accidents/illness assistance available at all times from First Aid trained staff. If unable to locate the school nurse - Please contact the main reception office. If the school nurse is not available, First Aiders are available via Reception. The school nurse/appointed First Aider will organise transfer to hospital in the case of emergency

Extension: 27958 School Mobile: 07880 358324

Junior School

Early Years Foundation Stage

- There is always at least one qualified first aider with a current paediatric first aid certificate present when pupils in Early Years are on the premises (see Appendix: List of paediatric First Aiders)
- There is always at least one qualified first aider with a current paediatric first aid certificate who accompanies pupils in Early Years on a visit.
- There is a separate book for pupils in Early Years to record accidents and first aid treatment.
- Parents are informed of accidents, injuries or first aid treatment given.
- The local child protection agency must be notified of any serious accident or injury to, or the death of, any child in the setting and act on any advice given.

Statutory framework for the early year's foundation stage, Setting the standards for learning, development and care for children from birth to five (Section 3.35 & 3.51 March 2017)

First Aid Training

The school invites staff to volunteer to become first aiders/appointed persons and will provide the necessary training.

As a minimum, at least one adult with a current 'First Aid at Work' qualification (3-day training) must be present on each identifiably separate school site when pupils are present, and at least one person with a current paediatric first aid certificate if Early Years Foundation Stage' pupils are present. (A paediatric first aider must also accompany all school trips/outings undertaken by Early Years Foundation Stage pupils.)

It may be sufficient for an 'Emergency First Aider in the Workplace' (1-day training) to be present at other times, e.g. early mornings, evenings, weekends and holidays, when employees are on the site, however this must be determined by risk assessment.

3-day First Aid at Work (FAW) The certificate is valid for 3 years and the school will organise refresher training before its expiry. First aiders are qualified to give immediate help to casualties with common injuries and illnesses and those arising from specific hazards in school.

1-day Emergency First Aider in the Workplace (EFAW) A 1 day Emergency First Aider in the Workplace person:

- Is not a first aider but, in the absence of the first aider, can take charge of an injured person until a first aider arrives and take responsibility for first aid equipment.

Note: All 3-day First Aid at Work and Emergency First Aider in the Workplace persons are covered by the Trust's insurance against claims for negligence provided that they are suitably trained, are carrying out their duties for the Trust and act within the school's guidelines for the administration of first aid.

Educational Visits/Trips

Accidents occurring on school trips must be reported to the School Nurse/H&S Coordinator/ Trip Emergency Contact

Medical Conditions

Staff will be provided with the information care plans (and photographs) about girls with known medical conditions prior to the trips. It is recommended that the trip leader arranges a meeting with the school nurse to discuss any pupils that may require additional support. For example: severe allergies - use of an Adrenaline Auto-Injector (AAI) for anaphylaxis.

First Aid Accommodation

The Education (School Premises) Regulations 1996 requires that schools have a suitable dedicated room for the care and treatment of pupils. It must contain a washbasin, be near a toilet and appropriate for its use as a first aid room. In the senior Department this is located in the long corridor, and in the Junior School, it is located next to the Junior School Office on the ground floor.

First Aid Materials

First aid containers marked with a white cross on a green background are sited in the following areas of the school:

- Medical Rooms (Junior and Senior)
- Science (Junior and Senior)
- PE (Sports Hall)
- Art Studios
- Drama Studio
- Staff Rooms
- Music Room
- Library
- Kitchen
- IT Office
- PAC
- Canteen Senior/Junior school
- Canteen 6th form

There are 4 defibrillators around the school.

- Junior School entrance
- Sports corridor
- Outside the medical room
- Performing Arts Centre (PAC)
- The Boat House off-site

Mobility around the School

The senior and junior school both have wheelchairs to use should a pupil/visitor or staff member become unwell or unable to mobilise. Both wheelchairs are kept within the medical rooms in each school and a risk assessment for the use of must be completed on each occasion. The wheelchairs are solely used to transport the party back to receive medical care and not used for staff/pupils to remain in for any length of time.

There is a lift in the sixth form centre for anyone who has a disability or mobility issue, to access the First and second floor within the 6th form centre. In the PAC (Performing Arts centre) there is a lift on the outside to access entry into the PAC, and another lift inside to give access from the ground floor to the first floor.

If pupils or school require walking aids such as crutches a risk assessment is completed to access that it is safe for them to mobilise around the school premises. The risk assessment will identify any extra safety measures that may need to be put in place, such as moving pupil classes to lower floor which are more accessible.

The HSE recommends that, where there is no specific risk identified, a minimum provision of first aid items would be:

- Leaflet giving general advice on first aid
- 20 individually wrapped sterile adhesive dressings (assorted sizes)
- 2 sterile eye pads
- 4 individually wrapped triangular bandages
- 6 safety pins
- 6 medium sized individually wrapped sterile un-medicated wound dressings
- 2 large sterile individually wrapped un-medicated wound dressings
- Three pair of disposable gloves
- 1 Resuscitation Aid

- A risk assessment will determine the level of first aid provision. The HSE recommends, where there is no specific risk identified, a travelling first aid kit should contain:
 - Leaflet giving general advice on first aid
 - 6 individually wrapped sterile adhesive dressings (assorted sizes)
 - 2 individually wrapped triangular bandages
 - 2 safety pins
 - 1 large sterile individually wrapped un-medicated wound dressings
 - Two pair of disposable gloves
 - Individually wrapped moist cleansing wipes
 - 1 Resuscitation Aid

*Please note-First Aid trained staff are responsible for stocking and checking the boxes on a regular basis and additional supplies are available from the Medical Room. The school nurse must be informed if stocks are low or require anything specific for a trip **TWO WEEKS PRIOR to the trip.***

Guidelines for Staff, Parents and Pupils

Generally healthy girls attending school should be able to manage their day around these times, without the need to leave lessons:

- Headaches should normally wait until the recognised 'Medical Room' times or until the pupil returns home. Exceptions would be a headache coming on suddenly causing a pupil to become distressed, and then help should be sought. This is extremely unlikely.
- If it is noted that a girl 'regularly' attends the Medical Room for a variety of non-specific problems/illness, and the nurse is unable to ascertain the reason for this, the Head of Year should be notified.
- If a girl becomes unwell and requires collection the School Nurse/First Aider would immediately notify the parents.
- The nurse is available to talk/discuss problems/worries with pupils. An appointment can be arranged within the recognised 'Medical Room' times or may be arranged at another mutually convenient time.
- In addition to the normal First Aid cover available in school, the nurse will be available in the Medical Room (Senior School) for general consultation at the following times:

Start of school day before lessons	08:30-08:55
Morning break	10:50-11:05
Lunchtimes	13:10-14:20

These arrangements are designed to allow a greater degree of privacy to pupils wishing to see the nurse and should also help girls to benefit from full attendance at lessons.

Administering Medicine

A parent who wishes their daughter to have medication in School (e.g. antibiotics). This should be discussed with the school nurse - The Parent will provide the school with documented evidence of prescription and any instructions. Girls with specific allergies carry their own AAI's (when prescribed), and there is also a 'named spare' in the school nurse's office named 'spare inhalers' are also kept in the school nurse's office.

Every girl with any type of medical condition has a Healthcare Plan (for a pupil with medical needs) which contains the necessary information. The school nurse keeps all these forms. These will soon be available in a folder by request or meeting with school nurse.

On admission to school, and annually thereafter, parents are asked to complete a consent form giving permission for their daughter to receive Paracetamol /over the counter medications from the school nurse/appropriately trained first aider should the need arise. All medication and first aid treatment is documented.

In EYFS, medication should only be administered if the parents have given specific written permission for each medication and the reason why it is needed. The parents must be informed and give verbal consent for pain relief or antihistamine at the time the child may require the medication some parents may decline consent for medicine to be given, even though they have given written consent previously. More guidance is available on H&S HUB.

Self-administering of Medicine by Students

Students are not allowed to self-administer medicines, if they require medication, it will be administered by the school nurse. Any medication that students are prescribed are kept within the medical room.

Procedures for Non-Emergency Situations

Minor Illness/Injuries

It is assumed that all girls attending school are healthy and fit enough to cope with the School day without leaving lessons for medical attention.

If a girl is too unwell to remain in School, then the nurse will contact her parents to be collected from school.

Procedures in the Event of an Emergency

- Examples of emergencies which require immediate first-aid assistance include:
- Severe allergic reactions
- Asthma attacks
- Epileptic fits
- Difficulty in breathing
- Fainting
- Hypo/hyperglycaemia in diabetics
- Bleeding
- Breaks or sprains
- Concussion

Staff and pupils should proceed as follows:

- If you witness an incident and the injured person is able to walk, take them to the medical room. If the school nurse is not there either send a message to Reception to ask them to contact a First Aider, or if you are a qualified First Aider, please administer first aid as appropriate. Do not leave the person unattended.
- If you witness an incident and the injured person does not seem able to move, do not try to help them move; stay with them and send a message to Reception to ask them to contact the school nurse or a First Aider. If a First Aider is not available, or the situation requires Urgent medical assistance, **do not hesitate to call an ambulance '999'**. Any girl who has had an accident requiring urgent medical treatment will be

taken to the nearest Accident and Emergency department of the accompanied by the school nurse/First Aider.

- Parents will be informed by phone as soon as possible if a girl suffers an accident or injury or visits the medical centre and is deemed too unwell to stay in school and therefore needs to be collected to go home.

Staff Requiring First Aid at School

- If a staff member is feeling unwell or requires any medication during the day, they can speak to the school nurse.
- The school nurse will assess the member of staff, to see if they are well enough to remain within school.
- The school nurse will inform the HR department if they feel that a member of staff is not fit to remain in school.
- If a staff member has any ongoing medical issues, it would be important to speak to the school nurse so she can monitor the staff member is necessary.
- If any member of staff has an accident within school or is school related the nurse should be made aware as she will require completing an accident log on the Sphera system.
- If a staff member is prescribed medicine which is brought to school, they must inform the school nurse and any medicine must be kept in a lockable storage.

Accident Reporting

The HSE is informed of injuries that are reportable under RIDDOR without delay. Detailed guidance on how and when to do this is given in the Accident Recording and Reporting section on H&S The Hub (see appendix)

- All injuries to staff and pupils requiring treatment beyond that provided by the School Nurse/First Aider are reported to the H&S team at Trust Office. NB this happens automatically if schools are recording accidents on the Sphera Safeguard Accident Reporting System; this is accessible to a small number of teachers and support staff (some PE staff in the senior school and Admin staff in the junior school).
- 'Dangerous occurrences' and significant 'near misses' are recorded. Detailed guidance on how and where to do this is given in the Accident Recording and Reporting section on H&S Hub;

First-aid and accident reporting arrangements are regularly reviewed at Health and Safety meetings.

Practical Departments in the school must keep their own log of accidents.

Clinical Waste Procedures

For dealing with accidental splashing of potentially contaminated body fluids (Blood, faeces, vomit) on to a surface in school.

Surfaces which have been contaminated by body fluids should be disinfected as soon as possible by means of using: Our cleaning contractors Zing who are on site will clean up any contaminated body fluids and use the correct procedure for decontamination.

- Absorba Gel which is poured on to the fluid and turns it into a solid. The solid is then picked up and disposed of; or
- A disinfectant is sprayed on to the contaminated area. Trigene will kill HIV, Hepatitis A & B and all bacteria.

Protective gloves (only low level powder free latex gloves or similar) must be used when dealing with spillages of blood, vomit or any other body fluids.

Vomit may be placed in a WC, but blood and other fluids must be placed inside a biological disposal bag and collected by our cleaning contractor Zing who are on site.

Zing also provide sharps bill for the disposal of any sharp medical equipment that may be used in the medical room, they also dispose of the bins as per local protocol.

If contaminated body fluids are splashed into the mouth or eyes

- School nurse or Health & Safety Coordinator must be informed, and the exact details of the incident recorded.
- Parents should be informed and advised that the child should be seen by her **GP/AE for advice** treatment.
- Teachers should seek advice from their own GP.
- Prevention in this respect is recommended. Hepatitis B can be prevented by means of immunisation and many Schools recommend this for their teaching staff.
- All cuts and scratches must be covered with waterproof dressing. Disposable gloves and aprons must be used.

Asthma

Pupils that suffer with Asthma should carry one inhaler with them at all times and keep a 'spare' inhaler in the medical room. The School is aware that it is not always possible to have a spare Salbutamol inhaler for the School to store so there are generic ones located around the School in case of emergency. Each student who is a known asthmatic must have consent for the use of the generic school Salbutamol inhalers.

It is the responsibility of each girl to take their own inhaler to all PE sessions and on all school trips/visits. On all PE sessions off site each girls spare AAI, Inhaler or other medication will be taken by the Teacher/Coach.

As a first-aider, your aims during an asthma attack are to ease the breathing and if necessary, get medical help. (See the asthma management plan attached).

Allergic Reaction/Anaphylaxis

Pupils with specific allergies should carry an AAI with them at all times, if one has been prescribed. There should be a named spare at within the medical room. The School is aware that it is not always possible to have a spare AAI for the School to store so there are generic ones located around the School in case of emergency. Each student who is a known to be at risk of anaphylaxis must have consent for the use of the generic school AAI's.

See allergic reaction management plan attached.

Epilepsy

Do...

- Protect the person from injury - (remove harmful objects from nearby)
- Cushion their head
- Look for an epilepsy identity card or identity jewellery
- Aid breathing by gently placing them in the recovery position once the seizure has finished
- Be calmly reassuring
- Stay with the person until recovery is complete

Don't...

- Restrain the person
- Put anything in the person's mouth
- Try to move the person unless they are in danger
- Give the person anything to eat or drink until they are fully recovered
- Attempt to bring them round

Diabetes

- All diabetic girls have named 'snack' boxes kept at Reception in case of hypoglycaemia. Please inform School Nurse/First Aider on duty if these are required. Pupils may appear pale; complain of a headache, tingling lips, hunger or blurred vision.
- Diabetic girls are not to waste their energy seeking a first aider; Staff must send another pupil whilst the diabetic girl takes her glucose tablets in class.
- If girls are hyperglycaemic, they are to be allowed to go to the toilet during lessons and get a drink if this is necessary. They may state that they are thirsty, appear flushed, ask to go to the toilet frequently and may have a noticeable odour of acetone (pear drops) about them.

Signs and symptoms of diabetes:

Hypoglycaemia:

- Hunger
- Feeling 'weak' and confused
- Sweating
- Dry, pale skin
- Shallow breathing

Hyperglycaemia:

- Thirst
- Vomiting
- Fruity/sweet breath
- Rapid, weak pulse

First aid aims with diabetes:

Hypoglycaemia:

- Raise blood sugar level as quickly as possible
- Get casualty to hospital, if necessary

Hyperglycaemia:

- Get casualty to hospital as soon as possible

Actions with diabetes:

Hypoglycaemia:

- Sit casualty down
- Offer casualty food or a sweet drink
- If there's an improvement, offer more to eat or drink
- Keep casualty resting

Hyperglycaemia:

- **Call 999 immediately**

Further actions with diabetes:

If the casualty loses consciousness

- Open airway and check breathing
- Place them in recovery position
- Prepare to give resuscitation

(Please see The Hub for further guidance on first aid.)

Senior School First Aiders

First Aid at Work	Expiry Date
Kate Molan (mat leave)	10/12/2021
Simon Watkins	12/06/2022
Jane Brandon	20/09/2022
Amielia Katze	16/10/2022
Tyrone Morrow	02/12/2022
Lori Westcott	05/12/2022
Telma Oliveira	06/12/2022
Will Dixon	07/07/2024

1 Day Emergency First Aid at Work	Expiry Date
Vikki Filsell	27/11/2021
Margaret Beaumont	31/01/2022
Gloria Alexander	26/09/2022
Yasmin Hodge-England	01/10/2022
Nicholas Rolfe	03/02/2023
Peter Coulson	14/02/2023
Kira Bishop	14/02/2023
Emily Barnes	14/02/2023
Kirsty Tanner	14/02/2023
Dominique McKee	14/02/2023
Hannah Lovell	14/02/2023
Schyler Neale	14/02/2023
Emma Heenk	14/02/2023
Emil Stenberg	14/02/2023
Emma Fraser	14/02/2023
Michael Barham	18/02/2023
Vana Avgerinou	19/11/2023
Bilqees Sayed	14/12/2023

First Aid in Sport Certificate	Expiry Date
Oliver Jack	14/05/2022
Rachel Saunders	14/05/2022

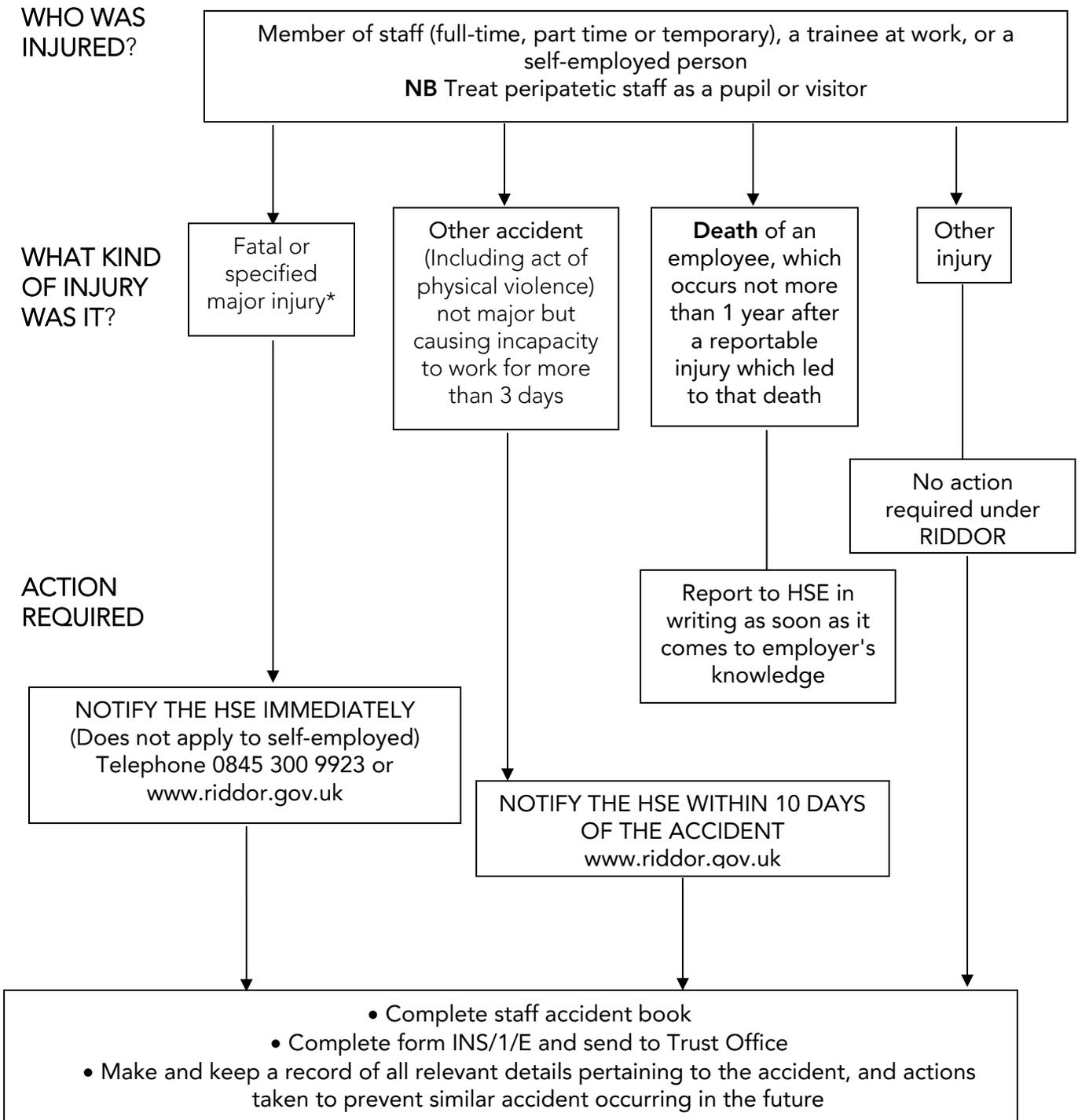
Junior School First Aiders

3 Day Qualification	Expiry Date
Isobel Franks	30/11/2021
Nicola Wood	30/01/2022

1 Day Emergency First Aid at Work	Expiry Date
Andy Miller	03/12/2021
Jessica Jackson	14/03/2022
Heather Jenkins	31/03/2022
Ena Burgess	26/09/2022
Vania Samuel	14/11/2022
Jo Jones	22/11/2022
Abbie Musgrove	20/01/2023
Emma Hooper	30/01/2023
Ros Holmes	14/02/2023
Isobel Franks	30/11/2021
Nicola Wood	29/01/2019
Linda Clark	12/10/2023
Elaine McCarthy	12/10/2023
Rachael Wyatt	03/11/2023
Anne-Louise Rea	03/12/2023
Emma Kipling	06/11/2023
Travis Thornley	17/09/2024
Brittani Wilson	13/09/2024

2 Day EYFS	Expiry Date
Jo Lawrence (nee McCaldin)	04/03/2022
Jessica Jackson	14/03/2022
Rosie Berwick	30/09/2022
Marian Cook	13/02/2023

**RISING OUT OF OR IN CONNECTION WITH YOUR WORK ACTIVITY
THE REPORTING OF INJURIES, DISEASES AND DANGEROUS OCCURRENCES
REGULATIONS 1995 (RIDDOR)**



Reportable Riddor categories:

- Any fracture, other than to the fingers, thumbs or toes
- Any amputation
- Dislocation of the shoulder, hip, knee or spine
- Loss of sight (whether temporary or permanent)
- A chemical or hot metal burn to the eye or any penetrating injury to the eye
- Any injury resulting from an electric shock or electrical burn leading to unconsciousness or requiring resuscitation or admittance to hospital for more than 24 hours

Any other injury:

- leading to hypothermia, heat-induced illness, or
- to unconsciousness, or
- requiring resuscitation, or
- Requiring admittance to hospital for more than 24 hours.
- Loss of consciousness caused by asphyxia or by exposure to a harmful substance or biological agent.

Examples of 'Specified Major Injuries' reportable under RIDDOR – for full list see The Hub.

The School Nurse or H&S Coordinator is responsible for reporting any RIDDOR.

Covid-19 (DoE Guidelines)

Please adhere to the government guidance with management of contact with Covid-19, found in Appendix A

Effective infection protection and control

1. Minimise contact with individuals who are unwell

If you have, or are showing symptoms of, coronavirus (COVID-19) (a new continuous cough, a high temperature, or a loss of, or change in, your normal sense of taste or smell - anosmia), or have someone in your household who is, you should not be in a childcare setting, school or college. You should be at home, in line with the [guidance for households with possible coronavirus infection](#).

2. Clean your hands thoroughly more often than usual

Clean your hands more often than usual, particularly after arriving at your setting, when returning from breaks, when changing rooms, and before and after eating or handling food, as well as after touching your face, blowing your nose and sneezing or coughing.

To clean your hands, you should wash your hands thoroughly for 20 seconds with running water and soap and dry them thoroughly or use alcohol hand rub/sanitiser ensuring that all parts of the hands are covered.

3. Ensure good respiratory hygiene by promoting the 'catch it, bin it, kill it' approach

Avoid touching your mouth, eyes and nose. Cover your mouth and nose with disposable tissues when you cough or sneeze. If one is not available, sneeze into the crook of your elbow, not into your hand. Dispose of tissues into a disposable rubbish bag and immediately clean your hands with soap and water or use a hand sanitiser.

4. Introduce enhanced cleaning, including cleaning frequently touched surfaces often using standard products, such as detergents and bleach

Cleaning should be generally enhanced, including:

- more frequent cleaning of rooms or shared areas that are used by different groups
- cleaning frequently touched surfaces more often than normal, such as:
 - door handles
 - handrails
 - tabletops
 - play equipment
 - toys
 - electronic devices (such as phones)

When cleaning, use the usual products, like detergents and bleach, because these are very effective at getting rid of the virus on surfaces.

All education, childcare and children’s social care settings should follow the [PHE guidance on cleaning for non-healthcare settings](#).

5. Minimise contact between individuals and maintain distancing wherever possible

You should, as much as possible, alter the environment of your setting (such as classroom layout) and your timetables (such as staggered break time) to minimise contact and mixing.

6. Where necessary, wear PPE

Most staff in education, childcare and children’s social care settings will not require PPE beyond what they would normally need for their work, even if they are not always able to maintain a distance of 2 metres from others.

PPE is only needed in a very small number of cases if:

- an individual child, young person or other learner becomes ill with coronavirus (COVID-19) symptoms and only then if a distance of 2 metres cannot be maintained
- a child, young person or learner already has routine intimate care needs that involve the use of PPE, in which case the same PPE should continue to be used

7. Engage with the NHS test and trace process and respond rapidly to confirmed cases

Education, childcare and children’s social care settings and providers must ensure they understand the [NHS test and trace process](#) so that they know how to respond if anyone within the setting is suspected or confirmed to have coronavirus (COVID-19). They must also know how to contact their local [PHE health protection team](#), and do so as soon as they have a confirmed case or an overall rise in suspected cases.

Anyone who displays symptoms of coronavirus (COVID-19) can and should get a test. Tests can be booked on the [NHS testing and tracing for coronavirus website](#) or ordered by telephone via NHS 119. Essential workers, which includes anyone involved in education, childcare or social work, and their households, have [priority access to testing](#).

How to work safely in specific situations, including where PPE may be required

Reference to PPE in the following situations means:

- fluid-resistant surgical face masks (also known as Type IIR)
- disposable gloves
- disposable plastic aprons
- eye protection (for example a face visor or goggles)

The PPE that should be used in the following situations when caring for someone with symptoms of coronavirus (COVID-19) is:

- a face mask should be worn if a distance of 2 metres cannot be maintained
- if contact is necessary, then gloves, an apron and a face mask should be worn
- eye protection if a risk assessment determines that there is a risk of fluids entering the eye, for example, from coughing, spitting or vomiting

If a child tests positive for coronavirus (COVID-19) and needs to remain in a residential setting, the same type and level of PPE as above should be used.

When PPE is used, it is essential that it is used properly. This includes scrupulous hand hygiene and following guidance on [how to put PPE on and take it off safely](#) in order to reduce self-contamination.

Face masks must:

- cover both nose and mouth
- not be allowed to dangle around the neck
- not be touched once put on, except when carefully removed before disposal
- be changed when they become moist or damaged
- be worn once and then discarded – hands must be cleaned after disposal

APPENDIX A

[detailed guidance online](#)

