



LOCHINVER HOUSE

First Aid Policy and Procedure

The aims of this Policy and Procedure are to:

- Ensure that every pupil, member of staff and visitor to Lochinver House School will be well looked after in the event of an accident, no matter how minor or major, by providing effective, safe First Aid cover in line with national guidelines.
- Ensure that in the event of an accident all members of the School community are aware of the support available and the procedures to activate this.
- Ensure the School aims to develop an ethos in which pupils feel secure, their viewpoints are valued and they are encouraged to talk and are listened to.
- Respond to pupils who are ill, infectious or injured. This is discussed with parents on induction to the School and is also covered in the Parent Handbook.

Lochinver has a medical room located in the School House that is staffed by a State Registered Nurse known as Matron. We are able to give First Aid and a degree of nursing care. We look after the pupils until they recover and can return to lessons or their parent or named carer arrives to take them home.

In the case of a serious accident, an ambulance will be called and parents contacted. We must emphasise that it is vital that parents are contactable during the school day. Pupils need the reassurance that their parents know what has happened to them and that they will be going home.

First Aid will be delivered by members of staff with a valid certificate of competence with one of the following qualifications recognised by the Health and Safety Executive:

- Paediatric First Aid
- First Aid at Work
- Schools First Aid- All Ages

There will be a qualified First Aider on site whenever pupils are present. Whenever EYFS pupils are on site there will be qualified Paediatric First Aider.

The certificate of competence is only valid for three years. Staff will be re-trained before the expiry date, and undertake yearly refresher courses where applicable.

All School staff attend three yearly half day First Aid training as a whole School INSET.



For list of qualified First Aiders see Appendix 1

- The daily responsibility of first aid for the whole School site will be carried out by Matron assisted by the Paediatric First Aiders for Reception and Years 1 & 2.
- The role of Matron is held by a qualified nurse registered to practice with the Nursing & Midwifery Council (NMC) and is qualified in First Aid at Work; Paediatric First Aid and Anaphylaxis Training.
- In the event of an accident Matron will be called. Matron can be reached in her office on x217 and carries a mobile phone (internal x111) at all times to provide first aid at the site of the accident OR if able, the casualty will be assisted to the treatment room.
- The School's Defibrillator and Emergency Asthma Pack are located centrally, in the emergency cabinet in the theatre hallway.
- The locations of First Aid Kits are identified by the universal green and white signs and notices in all areas. Lists of locations of First Aid Kits can also be found in School offices, the Staff Room, the Pre Prep Resources Room
- In the event of the following emergencies, an ambulance should be called immediately and Matron informed:
 - Where an emergency adrenaline device has been used
 - A severe asthma attack that is not relieved by the use of an inhaler
 - Any loss of consciousness that is not a faint eg as a result of an accident, head injury, illness or diabetic coma
 - Any possible broken bones except fingers, toes.
 - Severe burns
 - Severe blood loss
 - A seizure
 - Any casualty that is in a life threatening situation or perceived to require urgent medical treatment
- All accidents and treatment given will be recorded
- Accidents and incidents that fall under Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (2013) will be reported to the Health & Safety Executive
- Parents will be informed of non-trivial accidents
- First Aid Kits to be present at all on-site sports fixtures
- First Aid provision is provided to staff who are responsible for off-site activities
- Adequate First Aid provision to be available for out of hours activities
- Pupils with a medical need will be treated following the guidelines set out in their individual Healthcare Plan
- Procedures for dealing with spillage of bodily fluids to be followed at all times to protect individuals and the School community from contamination (See appendix 3)
- Termly review of accidents at Health & Safety Meetings to ensure the School's First Aid provision is appropriate

The Procedure

1. Contacting a First Aider

- Matron is on duty from 8.15 am – 4.45 pm and can be contacted in the Treatment Room by dialling 217. Alternatively Matron carries a mobile (internal x111) at all times and can be contacted by this route from any school phone
- In an emergency Matron should be contacted immediately.
- Lists of First Aiders are found in the School House, the Staff Room and the Pre Prep Resources Room and can be contacted by dialling 201 or 215.
- Matron will:
 - keep a log of First Aiders' names with their date of qualification
 - arrange for the re-training and re-qualification of identified staff



2. First Aid Kits

- Locations – School Office, Dining Hall, Theatre, Science Lab 1 & 2, Year 4/ Maths corridor, Sports Hall, D.T. room, Reception cupboard, Year 1 cupboard, Year 2 classroom, Year 3 coat area, Music room, Barn, Kitchen (as well as burns packs), Green Meadow pavilion, outside the Treatment Room and in all the Mini buses.
- Contents of First Aid Kits follow HSE recommendations
- Following an accident, the area should be cleared of all First Aid debris into small bags provided in First Aid Kits and disposed of in identified First Aid bins or taken to the treatment room. These bags are transferred to the yellow bin in the Treatment Room for Yellow Bag collection.
- First Aiders to inform Matron of used items from kits for re-stocking.
- Regular checks of the Kits and removal of items past their expiry dates by Matron or her representative. Log of dates checked to be recorded by Matron.

3. Calling an Ambulance

In an emergency where the situation is life threatening, there should be no delay in calling for an ambulance. In all other situations the First Aider providing the First Aid will be responsible for assessing if an ambulance is required and if needed an ambulance to be summoned giving:

- Details of casualty's condition
- Exact location of casualty
- Possible entry for ambulance
- An adult should be sent to the entrance of choice to guide the ambulance to the casualty

Pupils requiring transfer to hospital by ambulance will be accompanied by a member of School staff if their parents are not present.

4. Medical Suite

Located on the ground floor of the School House, this room has a treatment room dedicated for medical treatment and is manned by Matron. The medical suite has a wash basin, a bed, dedicated telephone, First Aid supplies and has a toilet nearby.

5. Record Keeping

- All accidents and treatment given to pupils will be recorded in School Base in the Medical Room OR on a Green Accident form, located in all First Aid Kits.
- Details of accidents and treatment given to staff and adult visitors are recorded on the forms in the Accident Book.
- Recorded Details will include:
 - Date, time and place of accident
 - Name and class of injured or ill person
 - Details of the injury illness and what First Aid was given
 - What happened to the person immediately afterwards (eg: went home, resumed normal duties, returned to class, went to hospital)
- Accidents, dangerous occurrences and reportable diseases that come under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR) will be reported to the Health & Safety Executive following their guidance. Details to be recorded on Form 2508. This form is an online document found at www.hse.gov.uk/riddor/ and is to be completed on line. The completed document should be downloaded and filed in the HSE Report File in a locked cabinet in Matron's office.
- All head and eye injuries that do not require further medical assistance should be reported to Matron for follow up observation.
- In the event of an injury requiring 'intimate' examination of a pupil, two adults must be present. In the case of a pupil in Years 5 – 8, one of the two adults should be male.



6. Informing Parents

- Parents will be informed of non-trivial accidents. Advice on symptoms to be observed and when to seek medical advice, particularly head injuries, will be given.
- In the case of a severely injured pupil, where an ambulance is required to transfer the casualty to hospital, the parents will be contacted immediately by the Headmaster or Matron giving information of the injury and name of the hospital destination.

7. Competitive Sports Fixtures

- The Sports Department will inform Matron of all on and off-site sports fixtures in advance. On-site fixtures will be supplied with a touchline Sports First Aid Kit by Matron to be collected from the Treatment Room prior to the fixture and returned at the end of the fixture.
- The member of staff responsible for the fixture will have a mobile phone to contact Matron if needed. All sports staff have a basic First Aid qualification and will carry out First Aid on-site.
- Pupils with a medical need and representing the School will be identified and emergency instructions and equipment given to the teacher responsible for the pupil.

8. Off-Site Activities

- These include all off-site day trips and residential trips.
- A travelling First Aid Kit relevant to the type and length of the activity to be supplied by Matron.
- All Early Years settings to have a Paediatric First Aider in attendance.
- The School will aim to have a qualified First Aider in attendance
- Pupils with a medical need will be identified and emergency instructions and equipment given to the teacher responsible for the pupil.

9. Out of Hours Provision

Out of hours activities that are the responsibility of Lochinver House School eg: Teatime Club, will have their own designated First Aider who will have a Paediatric First Aid qualification for all EYFS pupils present. Matron will inform these activities of the nearest First Aid Kit and arrangements will be made for calling an ambulance as the offices will be closed. Further advice on pupils with Health Care Plans will be given to the adult responsible. Access to contact numbers for use in the case of an injured pupil will be supplied.

Organisations hiring the School's facilities will be expected to provide their own First Aid provisions (see appendix 4).

10. Pupils with a Medical Condition/Need

- Pupils with a medical condition or need (eg: asthma, anaphylaxis, diabetes) will have a Health Care Plan including emergency care produced by Matron from information supplied by the pupil's parents. The Health Care Plan will contain details of care to be given in an emergency and emergency contact numbers.
- Staff completing risk assessments for an off-site activity will contact Matron to be advised of individual pupils with Health Care Plans.
- Teachers responsible for pupils with a Health Care Plan will be instructed in the emergency care to be given to named pupils by Matron.

11. Hygiene/Infection Control

- All staff will take precautions to avoid infection and must follow basic hygiene procedures.
- All First Aid Kits contain single-use disposable gloves that must be worn when dealing with blood and other bodily fluids.
- All staff dealing with accidents should have near-by access to hand washing facilities.
- All dressings, gloves and First Aid debris are disposed of through a Yellow Bag Collection Service. The collection point for all first aid debris is the yellow bin in the treatment room.



12. Review of Accidents

- All Green Accident Forms and Adult Accident Forms must be sent to Matron for daily assessment of accidents and safe storage.
- Matron will collate the information from the Green Accident forms, School Base and adult Accident Forms. This information will be presented at the termly Health & Safety Meetings informing the Committee:
 - the number of accidents involving Pre-Prep and Senior School pupils, adult employees and visitors.
 - the area where the accidents occur
 - the time that accidents occur
 - how accidents occur
- This review of accidents informs the Health & Safety Committee of any areas that are causing concern, accident trends and possible areas for improvement in the control of Health & Safety risks.

Instructions for the First Aid procedures should be given to the whole School community at the beginning of the academic year, via School Assemblies and Staff Meetings.

Policy Reviewed: 22.10.2018
Policy Review Date: 21.10.2020
Policy linked to: Catering and Hygiene Policy, Data Protection Policy, Educational Visits Policy, Health and Safety Policy, Medical Provision and Medicines Policy and Procedure, Supervision of Pupils Policy.

Any data held in relation to the content of this policy will be managed in accordance with our Data Protection Policy and Privacy Notice.



Appendix 1

Qualified First Aiders:-

Name	Qualification	Qualification expiry date
Matron Mrs R McGinness (State Registered Nurse)	First Aid at Work Paediatric First Aid Anaphylaxis First Aid	18 th November 2018 26 th November 2018 8 th December 2018

Essential First Aid All Ages – 22/04/2017

All Lochinver House Staff attended Essential First Aid (all ages) in April 2014.

All Lochinver House Staff will attend Schools First Aid in April 2017.

The full list of trained First Aiders is held and kept up to date by Matron.

Name	Qualification	Qualification expiry date
Mrs C Aldridge, TA and TTC	Paediatric First Aid	1 st June 2019
Miss C Barr; Reception TA, Teatime Club	Paediatric First Aid	13 th November 2019
Mr D Barth, PE/Games	Paediatric First Aid	26 th March 2021
Mrs T Christensen; Late Stay Club	Emergency First Aid at Work	4 th January 2019
Mrs S Curran; Reception TA	Paediatric First Aid	30 th April 2021
Mr J Evans, Maths/PE	Paediatric First Aid	26 th March 2021
Mr T Griffin; Head of RE	Sports First Aid	10 th October 2019
Miss A Harper, School Secretary	First Aid at Work	17 th May 2020
Mrs H May, Morning Club and TTC Deputy Manager	Paediatric First Aid	12 th October 2019
Mrs N Mehta, TA	Paediatric First Aid	12 th February 2021
Mrs C Morrissey; Senior Tutor	School's First Aid	23 rd June 2019
Mrs W Owen, TA	Emergency Paediatric First Aid	5 th July 2020
Mrs C Sheehan, Child/Family Support /RN	First Aid at Work Paediatric First Aid	11 th May 2020 10 th August 2020
Mrs B White; Y1 TA, Morning Club	Paediatric First Aid	30 th April 2021



Appendix 2 Emergency Procedures for Known Medical Conditions

Asthma, Anaphylaxis, Epilepsy & Type 1 Diabetes

Asthma Attack

Recognition: *not all these signs may be present*

- Difficulty breathing
- Wheezing when at rest
- Persistent cough
- Nasal flaring
- Difficulty speaking

If the following signs are present call for an ambulance via the School office; emergency contact Matron via x217 (or mobile x111) and commence asthma attack procedure without delay if the child:

- **Appears exhausted**
- **Has blue/white tinge around lips**
- **Is going blue**
- **Has collapsed**

Asthma Attack Procedure:

- Emergency call for Matron x111 giving child's name for spare inhaler & for her attendance
- Encourage to sit up & slightly forward
- Child should use own inhaler. Inhaler will be:
 1. With the child
 2. Reception, Yr 1, Yr 2, Yr 3 & Yr 4 inhaler located in classroom medical box.
 3. Spare inhaler with Matron
- Remain with the child until his named inhaler & spacer arrives with Matron. At this point Matron will take over, however until she or help arrives continue the following procedure.

If the child's named inhaler is not available the emergency Salbutamol inhaler should be used. The Emergency Asthma Inhaler Pack is located in the Defibrillator cupboard in the Theatre foyer.

Prior to using the emergency Salbutamol inhaler, ensure that the child has consent from their parents by checking the list of names with the Emergency Asthma Inhaler Pack.

- Immediately help child to take 2 separate puffs of Salbutamol via the spacer.
- If there is no immediate improvement continue to give 2 puffs at a time every 2 minutes, up to a maximum of 10 puffs.
- Stay calm & reassure the child.
- Stay with the child until they feel better & are able to continue with their School day. The child's breathing should be closely monitored.
- If the child's condition does not improve or you are worried call for an ambulance via the School office.
- Continue to give 10 puffs in the same way after 10 minutes until help arrives. Inform parents of hospital that their son has been transferred to.
- Parents should be informed if emergency Salbutamol inhaler administered.



Anaphylactic Shock

Recognition: *not all these signs may be present*

- Red blotchy skin, itchy rash, red itchy watery eyes
- Swelling of face, hands or feet
- Puffiness around eyes
- Difficulty breathing, wheezing or gasping for air
- Swelling of tongue & throat.
- Abdominal pain, vomiting & diarrhoea
- Feeling of terror/agitated
- Signs of clinical shock – grey, cold & clammy

Anaphylactic Shock Procedure:

- Emergency call for Matron x111 giving child's name & for her attendance.
- Send bystander for child's named Emergency Adrenaline auto-injector from emergency cupboard in the dining room.
- Stay with child & sit on floor
- Ask bystander to instruct office to call 999 stating "Anaphylactic Shock"
- Do not delay in administering the adrenaline auto-injector: check the name on the auto-injector & expiry date.
- If first aider is trained they should:
- Remove the safety cap
- Hold the auto-injector in their fist & hold the tip against the child's mid outer thigh
- Push the auto-injector until it clicks
- Hold for 10 seconds
- Remove auto-injector & replace into case
- Massage site for 10 minutes
- Record administration time on child's hand
- If the first aider is not trained the auto-injector should be given to the child & assisted to self-administer.
- Once the child has received their emergency adrenaline they should be reassured & closely monitored.
- Continue to sit the child upright to ease any breathing difficulties – **if the child has a prescribed reliever inhaler & they are experiencing breathing difficulties the reliever inhaler should be administered.**
- IF THE CHILD BECOMES VERY PALE WITH A WEAK PULSE LAY THEM DOWN WITH THEIR LEGS ELEVATED.
- If there is no improvement after 5 minutes & the child has a second auto-injector repeat adrenaline administration.
- **IF THE CHILD LOSES CONSCIOUSNESS OPEN THEIR AIRWAY, CHECK BREATHING, LAY IN RECOVERY POSITION & CONTINUE TO MONITOR BREATHING.**
- **PREPARE TO GIVE CPR.**
- On arrival of paramedic team:
- Inform time of adrenaline administration
- Hand over used auto-injector.
- Child should be accompanied to hospital
- Inform parent of administration & receiving hospital.



Epilepsy

Recognition: *not all these signs may be present*

- Vigorous shaking with clenched fist & arched back
- Twitching face, squinting, fixed or up turned eyes.
- Breath-holding with red, puffy face & neck.
- Drooling at the mouth.
- Loss of bladder or bowel control.
- Possible vomiting
- Loss of or impaired consciousness

Epilepsy Procedure:

- Contact Matron via x111 for her immediate attendance.
- Loosen tight clothing.
- Prevent injury to casualty by removing nearby objects & reduce risk of injury from violent movements by surrounding child with soft padding.
- **Call for ambulance if the child is:**
- **Having repeated seizures**
- **Has a seizure that lasts for more than 5 minutes**
- **Having first seizure**
- **Remains unconscious after seizure has stopped**

Once seizure has stopped:-

- Open airway & check breathing, place in recovery position & monitor.
- Allow child to recover
- Inform parent as child may need to go home.



Type 1 Diabetes

Hypoglycaemia – Low blood sugar

Recognition: *not all these signs may be present* **NB** - Child may be aware

- Weakness, fainting or hunger
- Confusion, irrational/unusual behaviour
- Deteriorating level of response
- Rapid pulse, palpitations.
- Muscle tremors

Treatment of Hypoglycaemia:

- Ensure child stops any physical activity & sits down.
- Call Matron as child may need spare testing kit & sugary snacks
- Child will check his blood sugar level with his testing kit (testing kit will be with him or accompanying adult)
- If blood sugar level registers 4mmol or below the child should consume a fast acting sugary drink or food of choice as stated in the child's Health Care Plan. **NB if child cannot follow procedure due to confusion, irrational/unusual behaviour and can swallow assist child to open Glucogel pack & squeeze fluid into mouth in area between teeth & cheek, massage area on outside to aid absorption.**
- Child should remain quiet & seated
- After 15 minutes child will recheck blood glucose level.
- If above 4mmol child will eat a slow acting carbohydrate (eg – cereal bar or biscuits) contained in child's snack pack (either with child or in classroom snack box)
- Once level is rising above 4mmol the child can continue with physical activity.
- **If second test remains below 4mmol repeat fast acting glucose & test after 15 minutes.**
- **CALL FOR AMBULANCE IF:**
- **Hypoglycaemia is not responding to fast acting glucose**
- **Conscious level is impaired**
- **Child cannot swallow due to impaired consciousness – place in recovery position**
- **Child losses consciousness – open airway, check breathing & place in recovery position.**

Hyperglycaemia - high blood sugar

Recognition *not all these signs may be present* **NB** child may be aware

- Warm dry skin
- Rapid pulse & breathing
- Fruity, sweet breath
- Excessive thirst
- Uncharacteristic behaviour

Treatment for Hyperglycaemia:

- Call matron to supply spare testing kit if not available.
- Child should check blood glucose; child may not be aware & will need encouragement
- If blood glucose level registers above 14mmol child must check ketone level.
- If ketone level is above **0.3mmol the child should be withdrawn from any physical activity & the parent informed for further instructions.**
- If ketone level registers as "low" or below 0.3 **and the child is well with no consciousness impairment**, the child can remain at School & continue with any sporting activity.
- However – if the child is unwell due to illness unrelated to diabetes such as an infection or sore throat – parent should be contacted to take their child home.
- If child's conscious level is impaired contact the School office for an ambulance to be called & inform parent.

NB- All used sharp's from diabetic testing procedures should be disposed of in the yellow sharps box in the medical treatment room.



Appendix 3

Protection from Blood Borne Viruses and Other Bodily Fluids

In any situation requiring first aid or the clearance of bodily fluids it is to be assumed that all blood products and bodily fluids are potentially infectious thus the following procedures should always be applied.

- Always cover any open wounds on your own hands with a waterproof adhesive dressing.
- Disposable gloves (un-powdered latex or vinyl) to be worn when dealing with bleeding / cleaning up bodily fluids.

Actions to be taken after direct contact with blood / bodily fluids

- If direct contact with another person's blood or other bodily fluids occurs the area should be washed as soon as possible with soap and water.
- If contact is made with the lips, mouth, tongue, eyes or broken skin, these should be washed out thoroughly with clean, cold tap water. Where running water is unavailable saline should be provided to wash out the eyes
- Hands should be washed using soap, water and dried using paper towels.
- If a cut or puncture wound is sustained (e.g. by hypodermic needle from an adrenalin device, bite etc.) the wound should be squeezed to encourage bleeding, washed with soap and water and covered with a waterproof dressing.
- Any incident in which another's blood may have entered a person's bloodstream through a cut or abrasion or by splashing in the mouth or eyes should be reported firstly to Matron and to their doctor.

Cleaning and washing

- All spillages of blood, faeces and vomit should be cleared up as quickly as possible, wearing suitable personal protective equipment. When spillages do occur, clean using a product suitable for the affected surface which combines both detergent and disinfectant (and use in accordance with the manufacturer's instructions).
- Mops should **never** be used for cleaning up blood and bodily fluid spillages, use disposable paper towels or cloths. Bodily Fluid Spillage Kits can be found in Pre Prep, the Medical Room, Dining room and in the Site Managers office and /or compounds should also be available.
- Separate cloths and mops should be used for general cleaning of kitchens, toilets and other general areas. Disposable cloths should, where possible, be used; where non-disposable brushes are used they should be thoroughly disinfected.
- Protective gloves, and where appropriate protective clothing, should be worn when handling soiled laundry. Soiled pupil's clothing should be bagged to go home, never rinsed by hand at School.

Waste Disposal

- Protective gloves, and where appropriate protective clothing e.g. disposable plastic aprons, should be worn when disposing of contaminated waste.
- Debris contaminated with blood should be bagged and taken to Matron for "Yellow bag" disposal.
- Small quantities of contaminated waste (other than blood debris), up to one bag in any collection interval; can be safely disposed of via the usual "black bag" refuse collection arrangements. Waste to be double bagged in plastic and sealed by knotting.
- Non contaminated waste should be discarded into a bin liner and disposed of in the usual manner.

Personal Protective Equipment (PPE)

- Disposable vinyl or powder free gloves and disposable aprons should be worn for any activity where there is risk of contamination with blood or bodily fluids. Hands should be washed immediately after removal of gloves.
- PPE is found in Bodily fluids Kits, the dining room and from Matron. They are single use, to be discarded after the task is completed- they are not to be re-used.



Appendix 4
Copy of Out of School Club Agreement

OUT OF SCHOOL CLUBS AGREEMENT

- Any adult who is on their own with a group of children must hold a Basic First Aid qualification
- If more than one adult is present then one of them must hold a Basic First Aid qualification
- If a serious accident occurs where basic first aid is not enough then the School office should be contacted for help
- Reporting of any accident that requires first aid should be written up in the School book provided and parents notified
- If a major accident requiring more than basic first aid is required either Head of EYFS and Pre Prep or Matron must be informed
- As a courtesy a follow up phone call to the parents would be appreciated
- Internal numbers; Matron x217 (or x111 to her mobile) Head of Pre Prep- 210 or 226 if an outside line is needed to call an ambulance then dial 9 first then the number required. Main School office number is 01707 653 064
- All adults should acquaint themselves with the location of the First Aid box in each room and in the case of an outdoor activity should have a kit outside. The use of the School First Aid box is fine; however for outdoor use it would be more appropriate to have your own.
- Copies of all letters that are sent to parents should also be given to the School so that a copy can be posted on the website and also so that staff are able to give informed answers to queries that arise e.g. Dates, times, etc
- Lists of pupils attending the clubs should be given to the Head of Pre Prep asap even if only provisional so that the School staff know who should be attending
- Registers should be kept at all times and brought out in case of evacuation when Fire alarm sounds. The muster point is the Astroturf
- All adults should acquaint themselves with the Fire Procedures and exit points and will from term to term be expected to conduct their own practice fire drills following the School procedures. Liaison with the Bursary or Head of EYFS and Pre Prep would be necessary prior to the drill being carried out
- If you wish to change the nature of your booking i.e., change of rooms, venue and times etc, please inform the Bursary immediately as this may affect the charges made to you
- If a child leaves the room or outside area to go to the toilet then a signal on his return should be established (Pre Prep currently use a band system that has to be returned to the adult to ensure child's safe return)
- Pupils should be in the care of an adult at all times
- If a parent is late it is the club organiser's responsibility to phone the parents to find out what the reason is and remain with the child until he is collected.
- If a child is booked into Teatime Club by a club organiser then they must inform the Teatime club staff of the reason for the parent's lateness
- If any issues arise which come under the Child protection umbrella, please contact the Designated Safeguarding Lead immediately. If they are not available the Deputy Safeguarding Leads should be contacted.

Agreed & Signed _____

Dated _____

