# Leverton Church of England Academy



## First Aid Policy

October 2018

Policy updated	By Mrs J Bailey
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#### Statement of intent

Leverton C of E Academy is committed to providing emergency first aid provision in order to deal with accidents and incidents affecting employees, children and visitors. The arrangements within this policy are based on the results of a suitable and sufficient risk assessment carried out by the school in regards to all staff, pupils and visitors.

Leverton C of E Academy will take every reasonable precaution to ensure the safety and wellbeing of all staff and pupils. Details of such precautions are noted in the following policies:

- Health and Safety Policy
- Behaviour Policy
- Safeguarding Policy
- Supporting children with medical conditions
- Food Hygiene Policy and Procedures
- Educational Visits and School Trips Policy

Miss R Chadwick has overall responsibility for ensuring that the school has adequate and appropriate first aid equipment, facilities and personnel, and for ensuring that the correct first aid procedures are followed

#### Legal framework

This policy has due regard to statutory legislation, including, but not limited to the following:

- The Health and Safety (First Aid) Regulations 1981 and approved code of practice and guidance
- Health and Safety at Work etc. Act 1974 and subsequent regulations and guidance

#### The aim of this policy is to:

- Ensure that the school has adequate, safe and effective first aid provision in order for every pupil, member of staff and visitor to be well looked after in the event of any illness, accident or injury; no matter how major or minor.
- Ensure that all staff and pupils are aware of the procedures in the event of any illness, accident or injury.
- Ensure that medicines administered at school strictly follow the guidelines indicated in this policy
- Ensure that all medicines are appropriately stored.
- Promote effective infection control.

Nothing in this policy should affect the ability of any person to contact the emergency services in the event of a medical emergency. For the avoidance of doubt, staff should dial 999 for the emergency services in the event of a medical emergency before implementing the terms of this policy, and make clear arrangements for liaison with ambulance services on the school site.

To achieve the aims of this policy, the school will have suitably stocked first aid boxes. Where there is no special risk identified, a minimum provision of first aid items would be:

- A leaflet giving general advice on first aid;
- Individually wrapped sterile adhesive dressings (assorted sizes);
- Two sterile eye pads;
- Four individually wrapped triangular bandages (preferably sterile)
- Six safety pins;
- Six medium sized (approximately  $12cm \times 12cm$ ) individually wrapped sterile
- Sterile wound dressings;
- Two large (approximately  $18 \text{cm} \times 18 \text{cm}$ ) sterile individually wrapped sterile wound dressings; and
- One pair of disposable gloves.

Equivalent or additional items are acceptable.

Mrs Gardiner is responsible for examining the contents of first aid boxes. These should be checked frequently and restocked as soon as possible after use. Items should be discarded safely after the expiry date has passed.

The First Aid boxes in school are located in the main corridor, EYFS classroom & main office

#### First aiders

The main duties of first aiders are to give immediate first aid to pupils, staff or visitors and to ensure that an ambulance or other professional medical help is called, when necessary.

First aiders are to ensure that their first aid certificates are kept up-to-date through liaison with the school office manager.

#### Within school the trained first aiders are:

Miss R Chadwick, Mrs J Bailey (Paediatric), Mrs J Baker (Paediatric), Mrs C Elsom, Miss A Fotheringham, Mrs V Gray, Mrs Z Sirrell, Mrs D Eves, Mrs N Cook, Mrs N Steels, Mrs N King,

#### Emergency procedure in the event of an accident, illness or injury

If an accident, illness or injury occurs, the member of staff in charge will assess the situation and decide on the appropriate course of action, which may involve calling for an ambulance immediately or calling for a first aider.

If called, a first aider will assess the situation and take charge of first aid administration.

In the event that the first aider does not consider that he/she can adequately deal with the presenting condition by the administration of first aid, then he/she should arrange for the injured person to access appropriate medical treatment without delay.

Where an initial assessment by the first aider indicates a moderate to serious injury has been sustained, one or more of the following actions will be taken:

- Administer emergency help and first aid to all injured persons. The purpose of this is
  to keep the accident victim(s) alive and, if possible, comfortable, before professional
  medical help can be called. Also, in some situations, action now can prevent the accident
  from getting more serious, or from involving more victims.
- Call an ambulance, if this is appropriate, take the accident victim(s) to a doctor or to a
  hospital. Inform parents of any decision taken. Moving the victim(s) to medical help is
  only advisable if the person doing the moving has sufficient knowledge and skill to make
  the move without making the injury worse.

- Make sure that no further injury can result from the accident, either by making the scene of the accident safe, or (if they are fit to be moved) by removing injured persons from the scene.
- See to any children who may have witnessed the accident or its aftermath and who may
  be worried, or traumatised, in spite of not being directly involved. They will need to be
  taken away from the accident scene and comforted. Younger or more vulnerable
  children may need parental support to be called immediately.
- When the above action has been taken, the incident must be reported to:
  - The Headteacher
  - The parents/carer of the victim(s)

#### Reporting to parents

- When first aid has been administered, the appropriate forms should be completed. A
  white copy must be kept in school and a pink form sent home with the child. Any injury to
  the head, minor or major, must be reported to parents through a telephone call and
  followed up using the school head bump form, which provides guidance on action to take if
  symptoms persist.
- In the event of serious injury or an incident requiring emergency medical treatment, the parents will be contacted immediately to report the incident.
- A list of emergency contact details is kept at reception/admin office.

#### Visits and events off-site

- Before undertaking any off-site events, the teacher organising the trip or event will
  assess the level of first aid provision required by undertaking a suitable and sufficient
  risk assessment of the event and persons involved. The educational visits coordinator will
  review this before the event is organised.
- Please see the separate Educational Visits and School Trips Policy for more information about the school's educational visit requirements.

#### Managing Medication

Medicines are only administered at school when it would be detrimental to a pupil's health or school attendance not to do so.

#### Administering of Medicines

Medication will only be administered in school where the dosage frequency requires them
to be taken four or more times a day or where they must be taken at specific times.
Exceptions may be made if the child is accessing extended provision (Breakfast & After
school clubs).

- Any medication administered must be recorded. Ongoing medication should be recorded on the form 'Record of Medicine administered to an individual child'. Short term medication must be recorded on the form 'Record of medicine administered to all children'.
- Over the counter medicines can be administered to pupils if it supports them being in school with a minor illness. Parents wishing to administer these medicines themselves in the school day must make arrangements to do so via the school office.
- An emergency supply of medication should be available for pupils with medical conditions that require regular medication.
- Parents must complete the <u>Parental Agreement of the administration of medicines'</u> which is kept in the school office.
- Medicines must only be administered according to the instructions on the label.
- It is the responsibility of the parents to ensure that the medication is 'in date' and that the school has adequate supply. For ongoing medication the parent will be informed by school staff when there is 5 days left of medication to allow parents time to get a repeat prescription.
- All medication should be administered from the school office unless otherwise specified on the medical request form. Medication should not be taken out of the office without prior consent.
- Staff can only administer medicines with the agreement of the child. Any specific instructions to assist administration of a medicine should be recorded in the child's healthcare plan.
- If a child refuses to take a medicine, staff must not force them to do so, but should note this in the records and follow agreed procedures. Parents should be contacted to inform them of this.

#### Storage and disposal of Medication

- Medicines are always securely stored in accordance with individual product instructions, except where individual pupils have been given responsibility for keeping such equipment with them
- All medication will be stored in the school office and, where indicated, in the first aid fridge.
- All medicines must be stored in the original container in which they were dispensed, together with the prescriber's instructions for administration, and properly labelled, showing the name of the patient, the date of prescription and the date of expiry of the medicine. Medicines CANNOT be administered without this information.
- All medicines will be returned to the parent to arrange for safe disposal when they are no longer required.
- Provision for safe disposal of needles will require appropriate special measures, e.g. a
  'sharps box'. This should be disposed of in a safe way using a specialist licensed contractor
- INHALERS: Inhalers prescribed for a child must be kept in the child's classroom in a
  clearly labelled box. Where appropriate inhalers may be taken outside during playtimes or
  PE activities. Children who are able to administer their own inhalers may do so with
  supervision from staff.

#### **Emergency Medication**

- All staff will be given appropriate training in the administration of emergency medication
  where necessary in conjunction with the school nurse or other health care professionals.
  Training records are kept which are signed and dated to show those who have undertaken
  the training. A first aid training log will be present in the first aid file.
- All staff are made aware of where any emergency medication is kept and when it should be administered.
- Emergency medication must always be taken on any trip that the child takes part in.
- If any emergency medication has been administered, staff must follow the health care plan to ensure the correct procedures have been followed. This may require a phone call to the emergency services.

#### Hygiene and Infection Control

- All staff must follow normal procedures for avoiding infection and follow basic hygiene procedures. Staff have access to protective disposable gloves and take care when dealing with spillages of blood or other body fluids and disposing of dressings or equipment. When administering medicines staff should take care to wash their hands and wash any equipment as necessary.
- It is essential that prompt action is taken by staff to ensure the prevention of illness/injury throughout school.
- All spillages of blood, faeces, saliva and vomit should be cleaned up immediately, wearing
  personal protective equipment. Clean spillages using a product which combines detergent
  and disinfectant, and ensure it is effective against both bacteria and viruses. Always
  follow the manufacturer's instructions. Use disposable paper towels or cloths for cleaning
  up blood and body fluid spills, and dispose of after use. A spillage kit should be available
  for blood spills.
- Toys can easily become contaminated with organisms from infected children so it is important that a written schedule is in place for regular cleaning. The cleaning schedule should identify who, what, when and how toys should be cleaned and be monitored.
- If toys are shared, it is strongly recommended that only hard toys are made available
  because they can be wiped clean after play. The condition of toys and equipment should
  be part of the monitoring process and any damaged item that cannot be cleaned or
  repaired should be discarded.
- Soft modelling and play dough should be replaced regularly or whenever they look dirty and should be included in the schedule.
- Sandpits should be securely covered when not in use to protect from animals contaminating the sand. Sand should be changed regularly; 4 weekly for indoor sandpits and as soon as it becomes discoloured or malodorous for outdoor sandpits. Sand should be sieved (indoor) or raked (outdoor) regularly to keep it clean.
- The tank should be washed with detergent and water, and dried before refilling with sand. Water play troughs or receptacles should be emptied, washed with detergent and hot water and dried and stored inverted when not in use. The water should be replenished either daily or twice daily when in use and it should always be covered when not in use.

• School will follow the advice and guidelines set out in the Exclusion Table provided by Public Health England (PHE) to deal with the exclusion periods of pupils and staff to prevent the spread of infectious deseases.

#### **Employee Medicines**

If an employee needs to bring medicine into school, they have a responsibility to ensure that their medicines are kept securely and that children do not have access to them. Adequate safeguards must be taken by employees, who are responsible for their own personal supplies, to ensure that such medicines are not issued to any other employee, individual or pupil. Where staff members have their own children at the school they must comply with the above arrangements for any medication administered to their child.

#### Confidentiality

Medical information should always be regarded as confidential by staff and personal data properly safeguarded.

Records relating to the administration of medicines and health should be stored confidentially.

Information related to a child's medical condition or first aid administered should be shared on a 'need to know' basis in order that a child's well-being is safeguarded and any individual treatment plan is implemented.

#### <u>Illness</u>

When a pupil becomes ill at school the staff will make a decision in the best interest of the child to determine if it would be best for the child to be collected. When a child has vomited or had diarrhea the parent will be contacted for them to collect their child.

School will consult with medical guidance to decide if an illness reported to school should be reported to all parents.

#### Record keeping and reporting

- All records are confidential and remain in the office at all times
- Records must be kept up to date and completed in a timely manner
- It is the responsibility of parents/carers to update school with their child's medical circumstances
- In accordance with RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurances regulations 1995) there are some accidents that require reporting to the Health and Safety Executive (HSE). Accidents involving staff or self-employed persons working at the site, that result in death or major injury, or an accident that prevents the injured person from doing the work that would reasonably be expected of them for more than seven days.
- An accident involving a pupil, visitor that involves a death at school or an accident that
  involves the emergency services taking them to hospital and;

- The accident is related to; a school activity either on or off site, the way a school activity has been organised and managed, equipment, machinery or substances, the design or construction of the premises.
- Any accident that requires reporting to RIDDOR requires thorough documentation. This
  must include the date and method of reporting, the date, time and place of the event,
  personal details of those involved, a brief description of the nature of the event or
  disease.
- Schools should keep a record of any first aid treatment provided. This should include:
  - the date, time and place of the incident
  - the name (and class) of the injured or ill person
  - details of the injury or illness
  - details of the first aid provided
  - what happened to the person immediately afterwards
  - the name and signature of the first aider or person dealing with the incident.