

## First Aid Policy

May 2021

### Aims

Children and adults in our care need good quality first aid provision. Clear and agreed systems should ensure that all children are given the same care and understanding in our school.

This policy;

- Gives clear structures and guidelines to all staff regarding all areas of first aid
- Clearly defines the responsibilities of the staff
- Enables staff to see where their responsibilities end
- Ensures good first aid cover is available in the school and on visits.
- Is regularly reviewed and updated.
- Has safety as its priority for the children and adults receiving first aid and safety for the adults who administer first aid.

The aims of our first aid policy are to:

- Ensure the health and safety of all staff, pupils and visitors
- Ensure that staff and governors are aware of their responsibilities with regards to health and safety
- Provide a framework for responding to an incident and recording and reporting the outcomes
- To report, record and where appropriate investigate all accidents.
- Records all occasions when first aid is administered to employees, pupils and visitors.
- Provide equipment and materials to carry out first aid treatment.
- Make arrangements to provide training to employees, maintain a record of that training and review annually.
- Establish a procedure for managing accidents in school which require First Aid treatment.
- Provide information to employees on the arrangements for First Aid.

### Roles and Responsibilities

Appointed first aider

The school's appointed first aider is Miss Dismorr.

They are responsible for:

- Taking charge when someone is injured or becomes ill
- Ensuring there is an adequate supply of medical materials in first aid kits, and replenishing the contents of these kits

All teaching staff and TA's are trained in paediatric first aid and are responsible for:

- Ensuring they follow first aid procedures
- Completing an accident record for all incidents they attend to where the administration of first aid was needed

- Informing the headteacher of any specific health conditions or first aid needs
- Ensuring that an ambulance or other professional medical help is summoned when appropriate

First aiders are trained and qualified to carry out the role and are responsible for:

- Acting as first responders to any incidents; they will assess the situation where there is an injured or ill person, and provide immediate and appropriate treatment
- Contacting parents and/or sending pupils home to recover, where necessary
- Filling in an accident report on the same day, or as soon as is reasonably practicable, after an incident

**Proprietor**

The proprietor has ultimate responsibility for health and safety matters in the school and delegates operational matters and day-to-day tasks to the headteacher and staff members.

**Headteacher**

The Headteacher is responsible for the implementation of this policy, including:

- Ensuring that an appropriate number of appointed persons and/or trained first aid personnel are present in the school at all times
- Ensuring that first aiders have an appropriate qualification, keep training up to date and remain competent to perform their role
- Ensuring all staff are aware of first aid procedures
- Ensuring appropriate risk assessments are completed and appropriate measures are put in place
- Undertaking, or ensuring that staff undertake, risk assessments, as appropriate, and that appropriate measures are put in place
- Ensuring that adequate space is available for catering to the medical needs of pupils
- Reporting specified incidents to the HSE when necessary.

## **First aid procedures**

**In-school procedures**

In the event of an accident resulting in injury:

- The closest member of staff present will assess the seriousness of the injury, if the member of staff is first aid trained, they will provide the required first aid treatment. Where they are not first aid trained they will seek the assistance of a qualified first aider, if appropriate, who will provide the required first aid treatment.
- Where first aid treatment is given, an accident form is completed and signed by the parents at an appropriate time, in the event of minor injury, this can be at the end of the school day. In the event of a head injury, an accident form is completed and the parents will be contacted as soon as possible to inform them of the incident.
- The first aider will assess the injury and decide if further assistance is needed from the emergency services. They will remain on scene until help arrives
- The first aider will also decide whether the injured person should be moved or placed in the recovery position
- If the first aider judges that a pupil is too unwell to remain in school, parents will be contacted and asked to collect their child.
- If emergency services are called, a member of SLT will contact parents immediately. A full record of the incident and other relevant information is made on the accident form,
- The first aider will complete an accident form on the same day or as soon as is reasonably practical after an incident resulting in an injury

## **Off-site procedures**

When taking pupils off the school premises, staff will ensure they always have the following:

- A mobile phone
- A portable first aid kit
- Information about the specific medical needs of pupils
- Parents' contact details

Risk assessments will be completed by the class teacher prior to any educational visit that necessitates taking pupils off school premises. These are checked by the Headteacher. There will always be at least one first aider on school trips and visits.

## **Pupils who are unwell in school**

Any pupil who is unwell cannot be left to rest unsupervised. If a pupil becomes unwell, a parent should be contacted as soon as possible. Anyone not well enough to be in school should be collected as soon as possible by a parent. Staff should ensure that a pupil who goes home ill during the school day, remembers the pupil out using the authority to collect during the school day form. (Appendix 4)

## **First aid equipment**

A typical first aid kit in our school will include the following:

- A leaflet with general first aid advice
- Regular and large bandages
- Eye pad bandages
- Triangular bandages
- Adhesive tape
- Safety pins
- Disposable gloves
- Antiseptic wipes
- Plasters of assorted sizes
- Scissors

These can be located in the staff kitchen, art room, garden room, the Riverside building and Copse building.

A first aid kit is also available for use when taking pupils to the forest school's area and when offsite on sports events and school trips.

Cold compresses are also stored in the freezers, located in the garden room and staff kitchen.

## **Record-keeping and reporting**

- All accidents and incidents resulting in injury are recorded on the school's accident form. (Appendix 1) These are signed by the first aider and one other member of staff, usually the class teacher.
- The accident form is then shared with parents and signed by the parent.
- The accident form is then passed to the DSL as part of our commitment to information sharing
- As much detail as possible should be supplied when recording an accident,
- Records held in the file and will be retained by the school for a minimum of 3 years, in accordance with regulation 25 of the Social Security (Claims and Payments) Regulations 1979, and then securely disposed of.

## **Reporting to the HSE**

The school will keep a record of any accident which results in a reportable injury, disease, or dangerous occurrence as defined in the RIDDOR 2013 legislation.

The Headteacher will report these to the Health and Safety Executive as soon as is reasonably practicable and in any event within 10 days of the incident.

Reportable injuries, diseases or dangerous occurrences include:

- Death
- Specified injuries, which are:
  - Fractures, other than to fingers, thumbs and toes
  - Amputations
  - Any injury likely to lead to permanent loss of sight or reduction in sight
  - Any crush injury to the head or torso causing damage to the brain or internal organs
  - Serious burns (including scalding)
  - Any scalping requiring hospital treatment
  - Any loss of consciousness caused by head injury or asphyxia
  - Any other injury arising from working in an enclosed space which leads to hypothermia or heat-induced illness, or requires resuscitation or admittance to hospital for more than 24 hours
  - Injuries where an employee is away from work or unable to perform their normal work duties for more than 7 consecutive days (not including the day of the incident)
  - Where an accident leads to someone being taken to hospital
  - Near-miss events that do not result in an injury, but could have done. Examples of near-miss events relevant to schools include, but are not limited to:
    - The collapse or failure of load-bearing parts of lifts and lifting equipment
    - The accidental release of a biological agent likely to cause severe human illness
    - The accidental release or escape of any substance that may cause a serious injury or damage to health
  - An electrical short circuit or overload causing a fire or explosion

Information on how to make a RIDDOR report is available here:

How to make a RIDDOR report, HSE <http://www.hse.gov.uk/riddor/report.htm>

### **Notifying parents**

The first aider who has administered the first aid check will inform parents of any accident or injury sustained by the pupil, and any first aid treatment given, on the same day.

If a head injury has occurred and/or the injury is significant, a phone call will be made by a member of SLT to inform them of the incident and injury sustained. Information relating to advice for parents/carers concerning children with head injuries will also be shared where appropriate. (Appendix 5)

### **Reporting to Ofsted and Local authority**

The Headteacher will notify Ofsted of any serious accident, illness or injury to, or death of, a pupil while in the school's care. This will happen as soon as is reasonably practicable, and no later than 14 days after the incident. The Headteacher will also notify the relevant Local Authority of any serious accident or injury to, or the death of, a pupil while in the school's care.

### **Training**

All teaching staff and TA's undertake paediatric first aid training and must hold a valid certificate of competence to show this. The school keeps a training matrix which indicates all staff who hold a valid

paediatric first aid certificate and will highlight when their training needs to be renewed. Training is updated at least every three years.

## **Health care plans**

Pupils with a medical condition will have a health care plan drawn up and agreed between the class teacher and the parents. (Appendix 2) This will be reviewed annually or after a change to the procedure recommended by the child's doctor. The member of staff will inform the Headteacher and ensure that all other staff are made aware of any pupils with a medical care plan. Care plans are maintained by the class teacher and any medication needed, such as an inhaler or epipen is stored securely labelled with the pupil's name. It is the responsibility of the parents to ensure that these are in date. Details of any pupils with a serious condition will be displayed in the staff room.

## **Pupils with Medical Conditions**

A list of any pupils who have an allergy/medical condition and those with any specific dietary needs are shared with all staff and updated termly. A list of dietary needs is displayed in the staffroom and the garden room.

If staff become aware of any conditions not on the list, they should inform the class teacher and headteacher immediately.

## **Infectious diseases**

If a child is suspected of having an infectious disease advice should be sought from the Designated First Aider who will follow the Health Protection Agency Guidelines to reduce the transmission of infectious diseases to other pupils and staff.

Children who have been suffering from diarrhoea and/or vomiting should not return to school for at least 48 hours after the last episode.

## **Medication in school**

The school aims to support, as far as possible, and maintain the safety of pupils who require medication during the school day. However, it should be noted that:

- Only prescribed medicines, such as antibiotics can be administered in school and only with the written consent of parents. Parents must complete an administering medicine to children form. (Appendix 3)
- Medication such as calpol, cough medicines and aspirin will not be administered in school by school staff and must not be brought into school, unless prescribed by a doctor and written consent has been obtained.
- All medication must be in date and the dosage stated for the named child.
- All medication must be in its original container.

Wherever possible the timing and dosage of medications, such as antibiotics should be arranged so that the medication can be administered at home.

## **Administration of Medication**

- The medication must be checked before administration by the member of staff confirming the medication name, pupil name, dose, time to be administered and the expiry date.
- The staff member must wash their hands prior to administering the medication
- Administration must be witnessed by another member of staff.

- Document, date and sign, including the witness signature, for what has been administered,
- Ensure the medication is correctly stored in a locked drawer or cabinet out of the reach of pupils

NB: Antibiotics and any other medication which requires refrigeration should be stored in the fridge.

It is the parents' responsibility to inform the school of any long-term medical condition that may require regular or emergency medication to be given. In these circumstances a health care plan may be required and this will be completed and agreed with parents.

### **Staff Taking Medication**

Staff are advised to seek medical advice if they are taking medication which may affect their ability to care for children. Staff are to ensure that any medication is stored securely.

### **Links with other policies**

This first aid policy is linked to the

- Health and safety policy
- Safeguarding and child protection policy
- Risk assessment policy
- Attendance policy

### **Approval and Review**

This policy was amended and approved by the Headteacher on 12th May 2021.  
The renewal date is annually or earlier if there is a change in legislation.

Appendix 1

ACCIDENT RECORD

Name of Child	Class	Date and time of incident
---------------	-------	---------------------------

Description of Circumstances leading to the accident

  
  

Where did the accident take place

  
  

Did anyone witness the accident and if so who?

Record of Injury and Action Taken

  
  
  
  

Staff Signature _____	Child collected _____(Time)
Class Teacher's Signature _____	Parent Signature _____
Time Parent informed _____	<b>IMPORTANT</b> <i>Please consult your doctor or local hospital if your child suffers any drowsiness, vomiting, impaired vision or excessive pain after returning home</i>
Date	Date

Post-accident review carried out by \_\_\_\_\_ Date \_\_\_\_\_

Details of any further risk control measures to be put in place

Appendix 2

HEALTHCARE PLAN FOR A PUPIL WITH MEDICAL NEEDS OR SPECIAL REQUIREMENTS

This form is to be completed when: -

- An application has been received for a child, with a declared Medical Need or Special Requirement (such as - dietary, allergies, food preferences) to join Meadowpark
- The parents inform Meadowpark that their child has been diagnosed with a condition which constitutes a Medical Need or if a Special Requirement Procedure is to be followed.

Name ..... Date of Birth .....

Describe condition or requirement (e.g. asthmatic, no dairy products, suffers from convulsions).

.....  
.....

Was the condition or requirement **medically diagnosed** or is it a **personal preference**?

.....

Date of medical diagnosis .....

CONTACT INFORMATION

Family contact 1

Family contact 2

Name .....

Name .....

Phone No (1).....

Phone No (1).....

(2).....

(2).....

Mobile .....

Mobile .....

Relationship .....

Relationship .....

Clinic / Hospital/GP contact if required to be contacted in an emergency

Name.....

Phone No.....

As a result of the medical condition or special requirement what daily procedure will the school be required to put in place?



*Please give specific times and exact details of action/s to be carried out (e.g. before lunch or play time 1 x 5ml (named medication) to be given by spoon, injection etc or child to be monitored for (specific signs) at all times)*

.....  
.....  
.....  
.....

Condition classification - Severe (life threatening) / moderate / mild

.....

Are there particular circumstances (such as heat, low blood sugar levels, etc.) which will trigger or worsen the condition and cause febrile convulsion, seizures or epilepsy? Please describe.

.....  
.....

Please give a description of any seizures (e.g. goes stiff, falls, convulses down both sides of body etc.) and indicate the usual length of any seizure/fit.

.....  
.....

Is the condition controlled by medication            YES                NO   

If yes, what medication has been prescribed?

.....

When should medication be administered?

.....

“Permission to Administer Medication” form completed?    YES   

If there are any difficulties in the administration of medication what action should be taken?

.....  
.....  
.....

When would you like 999 dialled for emergency help? E.g. if the prescribed medication fails to control condition / seizure

.....

This plan has been agreed by the following:

1) Parent(s) Signature.....  
Signature.....

2) Prescribing Doctor (if applicable)  
.....  
(Block capitals)  
Signature .....

Authorised persons trained to administer medication/treatment:

Name..... Signature..... Date.....  
(Block capitals)

Name..... Signature..... Date.....  
(Block capitals)

Employer of the person authorised to administer medication/treatment:

Name..... Signature.....  
Date.....  
(Block capitals)

Location in the school where the medication will be stored:

.....

Copies of this form to be held by Parents, School Office and Teacher/Room Leader  
Copy holders to be notified immediately of any changes in the above information

This form should be reviewed and updated annually.

Next review Date.....

**Appendix 3**

**Administering of Medicine to Children Permission Form**

The School will not give your child medicine unless you complete and sign this form AND the Headteacher has agreed that Meadowpark staff can administer the medication

**DETAILS OF PUPIL**

Surname: \_\_\_\_\_

Forenames: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Postcode: \_\_\_\_\_

Condition or illness: \_\_\_\_\_

M/F _____
Date of Birth ____/____/____
Class / Room

**MEDICATION**

Name/Type of Medication (as described on the container): \_\_\_\_\_

For how long will your child take this medication: \_\_\_\_\_

Date dispensed: \_\_\_\_\_

**FULL DIRECTIONS FOR USE**

Directions and method: \_\_\_\_\_

Timing: \_\_\_\_\_

Date to be administered from: \_\_\_\_\_ until: \_\_\_\_\_

Special Precautions: \_\_\_\_\_

Side Effects: \_\_\_\_\_

Self-Administration: \_\_\_\_\_

Procedures to take in an Emergency: \_\_\_\_\_

**CONTACT DETAILS**

Name: \_\_\_\_\_ Tel. No: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_

Address: \_\_\_\_\_

I understand that I must deliver the medicine personally to an agreed member of staff and accept this is a service which the Nursery and School is not obliged to undertake.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_ Relationship to child: \_\_\_\_\_

Appendix 4

**Authority to collect a child in the school day**

Section A: Complete when a child is collected before the normal end of day.			
Date		Time collected	
Name of child			
Name of person collecting		Relationship to child	
If needed has the password been verified?			
Reason for absence			
Will child be returning to school on the same day?	YES / NO		
Parent Signature		Teacher Signature	
Section B: Complete if the child will return to school on the same day.			
Time expected to return:			
Return to School			
Time arrived back in school			
Parent Signature		Teacher Signature	

## Appendix 5

### ADVICE TO PARENTS AND CARERS CONCERNING CHILDREN WITH HEAD INJURIES

Your child has sustained a head injury.

Please refer to NHS Head Injury Advice Sheet:

<https://what0-18.nhs.uk/professionals/gp-primary-care-staff/safety-nettingdocuments-parents/head-injury>

If you are concerned please **CONTACT YOUR DOCTOR, NHS 111 OR CONTACT THE ACCIDENT AND EMERGENCY DEPARTMENT**

In addition:

- Do expect the child to feel 'off colour'.
- Do not force them to eat, but make sure they have enough to drink.
- Do expect the child to be more tired than usual. Allow them to sleep if they want to. Check on them every 2 hours in the first 24 hours.
- Do not be confused between normal sleep and unconsciousness - someone who is unconscious cannot be woken up - you need to be satisfied they are reacting normally to you.
- Do expect the child to have a slight headache
- Do keep the child quiet and resting as much as possible.
- Keep them away from school, discourage active games, watching TV and reading until the symptoms subside.

These symptoms should improve steadily and the child should be back to normal within a few days.

Even after a minor injury, complications may occur, but they are rare. If the symptoms worsen, or if you notice the following signs:

- Difficulty in waking from sleep
- Appears confused or not understanding what is said to them
- Vomiting
- Complaining of severe headache, or trouble with their eyesight
- Become irritable
- Has any kind of attack which you think is a fit

then you are advised to: **CONTACT YOUR DOCTOR, NHS 111 OR CONTACT THE ACCIDENT AND EMERGENCY DEPARTMENT WITHOUT DELAY**