



CLARE COMMUNITY
— PRIMARY SCHOOL —

First Aid Policy

First Aid Policy
Date approved: 1st October 2018
Next review date: 1st October 2019

Rationale

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.

Purpose

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.

Guidelines

New staff to the school are made aware of this policy when they are appointed. This policy is regularly reviewed and updated. This policy has safety as its priority for the children and adults receiving first aid, and safety for the adults who administer first aid.

The administration and organisation of first aid provision is taken very seriously at Clare Community Primary School. There are annual procedures whereby checks are made on the safety of systems that are in place in this policy. The school takes part in the Health and Safety checks run by the Trust Site Manager and audited by governors.

Materials, equipment and facilities

The school will provide materials, equipment and facilities as set out in DfE 'Guidance on 'First Aid for schools'.

The Appointed Person for checking First Aid Supplies is Kim Twite. She will regularly check that materials and equipment are available and order new materials when supplies are running low.

The Senior Leadership Team are responsible for the arrangement of adequate First Aid training for staff.

Acorn class (Reception) have their own First Aid Box. Boxes need to be stored where they are visible and easy to access.

There are trip first aid bum-bags available for all off-site activities. It is the responsibility of the adults of that class to notify the appointed person if stocks in the trip bags are running low.

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Responsibility to regularly check First Aid Boxes lies with all first aiders. If First Aid boxes need replenishing the Appointed Person should be immediately notified and extra supplies should be requested.

First Aid kits

Midday Assistants are issued with a small first aid bag and carry this with them at lunchtime.

First aid kits are stored in the Reception Class and near the disabled toilets near the school hall. A larger kit is stored in the first aid cupboard located near the disabled toilets by the school office. An emergency first aid kit is available for use during out of school visits.

Cuts

Any adult can treat severe cuts, however a fully trained first-aider must attend the patient to give advice. Minor cuts should be recorded in the first aid file and parents informed at the end of the day. Severe cuts should be recorded in the accident file and parents informed by phone call.

All open cuts should be covered after they have been treated with a medi wipe. Children should always be asked if they can wear plasters BEFORE one is applied. Children who are allergic to plasters will be given an alternative dressing.

Minor cuts should be recorded in the accident file

ANYONE TREATING AN OPEN CUT WHICH IS BLEEDING PROFUSELY SHOULD WEAR GLOVES. All blood waste should be placed in a bag and disposed of in the yellow bin.

Bumped heads

Any bump to the head, no matter how minor, should be treated as potentially serious. All bumped heads should be treated with an ice pack and the child should be given an advisory "Bumped Head" letter to take home. The child's teacher should be informed and keep a close eye on the progress of the child. ALL bumped head incidents should be recorded in the accident book.

Parents should be called if the child has a serious cut on the head, a large bump (egg) or there are obvious signs of concussion.

Allergic reaction

All staff are trained in recognising the signs of serious allergic reactions and in the administration of Epi-Pens. In case of a less serious allergic reaction, a first aider should examine the child and follow care plan instructions. Please also see the section on 'Arrangements for Medicine at school'.

Accident file

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The first aid files are located in the school office and should be completed for every incident where first aid is administered. Old accident files (previously books) are stored in the school office.

The contents of these files are collected at the end of the academic year by the appointed person, and kept together for a period of 3 years as required by law. The school follows the HSE guidance on reportable accidents/ incidents for children and visitors.

For major accidents, an HS1 and RIDDOR form must be completed as soon as possible after the accident. These are available from the school office.

Employees/ staff

The school has a responsibility to provide first aid to all staff. In case of an accident/incident, staff should seek First Aid from any of the qualified First Aiders. All First Aid treatment to staff should be recorded on an accident form that can be obtained from the office and reported to the appointed person. If an accident/incident results in the individual being taken to hospital, where they receive treatment and are absent from work for 3 days or more, the appointed person needs to be notified. The appointed person and the Headteacher will review the accident/ incident and will decide if it needs to be reported to the HSE.

Notifying Parents

The school uses 2 different forms for parent notification. These are:

- Head injury form
- First aid received form

The forms can be found in the First Aid files. Copies can also be obtained from the school office or from the appointed person.

Calling the emergency services

In case of a major accident, it is the decision of the fully trained first aider if the emergency services are to be called. Staff are expected to support and assist the trained first aider in their decision.

The Headteacher or Deputy Headteacher should be informed if such a decision has been made even if the accident happened on a school trip or on school journey.

If the casualty is a child, their parents/ guardians should be contacted immediately and given all the information required. If the casualty is an adult, their next of kin should be called immediately. All contact numbers for children and staff are available from the school office.

Dial 999, ask for ambulance and be ready with the following information:

1. Your telephone number: (NUMBER)
2. Give your location as follows: (ADDRESS)

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3. State that the postcode is: (POSTCODE)
4. Give exact location in the setting:
5. Give your name:
6. Give name of child and a brief description of child's symptoms:
7. Inform Ambulance Control of the best entrance and state that the crew will be met and taken to the injured party.

It is important to:

Speak clearly and slowly and be ready to repeat information if asked.

Arrangement for Medicine in schools

Administering medicine in school

At the beginning of each academic year, any medical conditions are shared with staff and a list of these children and their conditions is kept in the Teachers' files/ First Aid-Medicine Record files and on file in the office.

Children with Medical conditions have to have a care plan provided by the school, signed by parents/ guardians. These need to be checked and reviewed regularly. Medications kept in the school for children with medical needs, are stored in a cabinet in the front office, clearly marked with the green cross. Each child's medication is in a clearly labelled container with their care plan and a photo of the child on the container. For further information on pupils with medical conditions in school please see the 'Supporting Children with Medical conditions policy'.

All medicines in school are administered following the agreement of a care plan.

Asthma

Children with Asthma do not require a care plan. In order for children's Asthma pumps to be kept in school an 'Asthma UK Action Plan' form must be filled out. It is the parent's/carer's responsibility to provide the school with up-to date Asthma Pumps for their children. Adults in the classroom are to check the expiry date on the pumps regularly (at the end of each half-term) and inform parents should the pumps expire or run out. Asthma pumps should be kept in a container in the child's classroom, easily accessible and clearly labelled with the child's name and photo. Asthma sufferers should not share inhalers. Children are provided with clear plastic container to carry their Asthma pumps in when not in the class-room.

Only Blue (reliever) Asthma Pumps should be kept in schools.

Short term prescriptions

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Medications such as the short term use of antibiotics or painkillers can be administered only if the parent /guardian fills out the 'Parental consent form for administering medicine' form on the day the request is made. The form can be obtained from the school office. Parents need to give the completed form to the school office together with the medication. A completed copy of the 'Parental consent form for administering medicine' form must be kept in the First Aid and Medicine file. However, staff should encourage parents to administer medicine at home. Medication may be administered in school if it is required to be taken four (4) times a day. Only medication prescribed by a GP, Hospital or Pharmacy and clearly labelled with the child's name, address and required dosage can be administered in school. Non-prescription medication or creams and lotions should not be administered in school.

If a child refuses to take a medicine, staff should not force them to do so. Instead they should note this in records and inform parents/ carers or follow agreed procedures or the Care Plan.

Record keeping - Medicine

Staff should record any instances when medicine is administered. This includes if children use their asthma pumps. The records need to include, date and time of medicine administered, its name and the dose given, signed by the person responsible for administering the medicine. Older children may take their own medicine under the supervision of an adult; this needs to be recorded and the adult still needs to sign the record sheet. Record sheets are in the First Aid and Medicine folder.

Headlice

Staff do not touch children and examine them for headlice. If we suspect a child or children have headlice we will inform parents/carers. A standard letter should be sent home to all the children in that class where the suspected headlice incidence is.

Chicken pox and other diseases, rashes

If a child is suspected of having chicken pox, measles etc, we will look at the child's arms or legs. The chest and back will only be looked at if we are further concerned. We should call a First Aider and two adults should be present. The child should always be asked if it is ok to look.

For the inspection of other rashes, the same procedure should be followed. If we suspect the rash to be contagious (such as scabies, impetigo, conjunctivitis, etc.) we need to inform parents and request that children are treated before being returned to school. In most cases, once treatment has begun, it is safe for children to return to school. If more than one child is suspected to have the same disease/rash in one class, a letter should be sent home to all parents in that class, to inform them to allow them to spot problems and began treatment as early as possible, thus avoiding the further spread of disease/rash.

It is the Headteacher's duty to decide if there is an outbreak of infectious disease and whether there is a need to report it to the local HPU (Health Protection Unit).

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Ratified by Local Governing Body	
Date	