Together we grow, achieve and become R.I.C.H.E.R everyday
Respect, Inclusion, Care, Honesty, Empathy, Resilience

Hawthorn Tree Primary School
First Aid at School Policy

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Control Sheet

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Contents

1.0 Statement of organisation

The School's arrangements for carrying out the policy include nine key principles.

- Places a duty on the school to approve, implement and review the policy.
- Place individual duties on all employees.
- 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.
- Undertake a risk assessment of the first aid requirements of the school

2.0 Arrangements for First Aid

Materials, equipment and facilities guidance:

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

Each site will have An Appointed Person who will regularly check that materials and equipment are available and to order new items when supplies are running low.

The position of First Aid Boxes will differ depending on the site and this information can be found on the individual school websites.

Any major accident needs to be reported to the Headteacher, in case of her absence these should be reported to the school office. If an ambulance is called the Headteacher needs to be notified immediately.

3.0 General guidance on First Aid Occurrences

Cuts

The nearest adult deals with small cuts. All open cuts should be covered after they have been treated with a cleansing wipe.

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 accident file. Severe cuts should be recorded on the Medical Tracker and parents informed by phone call. A major incident form need to be filled out by the person dealing with the injury and given to the parents. Major injuries need to be reported to the appointed person.

ANYONE TREATING AN OPEN CUT SHOULD USE SUITABLE GLOVES.

Head injuries

Any bump to the head, no matter how minor is treated as serious. All bumped heads should be treated with an Ice pack. The adults in the child's class-room should keep a close eye on the child. All bumped head accidents should be recorded on the medical tracker and a copy sent home with the child.

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. Children who have a concussion after a head injury will need to be taken to hospital.

Allergic reaction

Staff will be trained in recognising the signs of serious allergic reactions and in the administration of Epi-Pens if the school is notified by a parent/carer that their child has allergies. 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'.

Record Keeping

First Aid and Medicine files – 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.

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. In the case of 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

Complete the detail in the accident book and share a hard copy of the incident and treatment provided with the parents.

Arrangement for Medicine in schools – please read the supporting pupils with medical conditions policy.

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 displayed in the school office and staff room.

Children with Medical conditions have to have a care plan provided by the school nurse, signed by parents/ carers. These need to be checked and reviewed regularly. Medications kept in the school for children with medical needs are either stored in the staff room fridge or a locked cabinet/safe in the school office.

Each child's medication is in a clearly labelled container with their care plan. For children with specific medical needs, training from designated professionals is undertaken and a health care plan is put in place in consultation with other professionals and parents/carers. A copy of the health care plan is displayed in the staff room alongside the Intimate Care 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 Asthma forms must be filled out. It is the parents/carers 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 clearly labelled with the child's name. Asthma sufferers should not share inhalers.

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

Short term prescriptions

Parent(s) should be encouraged to ask the GP to prescribe an antibiotic which can be given outside of school hours wherever possible. Most antibiotic medication will not need to be administered during school hours. Twice daily doses should be given in the morning before school and in the evening. Three times a day doses can normally be given in the morning before school, immediately after school (provided this is possible) and at bedtime.

It should normally only be necessary to give antibiotics in the school if the dose needs to be given four times a day, in which case a dose is needed at lunchtime.

Parent(s) must complete the Consent Form and confirm that the pupil is not known to be allergic to the antibiotic. The antibiotic should be brought into the school in the morning and taken home again after school each day by the parent. Whenever possible the first dose of the course, and ideally the second dose, should be administered by the parent(s).

All antibiotics must be clearly labelled with the pupil's name, the name of the medication, the dose and the date of dispensing. In the school the antibiotics should be stored in a secure cupboard or where necessary in a refrigerator. Many of the liquid antibiotics need to be stored in a refrigerator – if so, this will be stated on the label.

Some antibiotics must be taken at a specific time in relation to food. Again, this will be written on the label, and the instructions on the label must be carefully followed. Tablets or capsules must be given with a glass of water. The dose of a liquid antibiotic must be

carefully measured in an appropriate medicine spoon, medicine pot or oral medicines syringe provided by the parent.

The appropriate records must be made. If the pupil does not receive a dose, for whatever reason, the parent must be informed that day.

Analgesics (Painkillers)

For pupils who regularly need analgesia (e.g. for migraine). The school does not keep stock supplies of analgesics e.g. paracetamol (in soluble form) for administration to any pupil. Parents may come into school to administer analgesics but the school will not be in a position to administer to any pupil under any circumstances.

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

Calling the Emergency services

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

The Headteacher or school office 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.

Head Lice

Staff do not touch children and examine them for head lice. If we suspect a child or children have head lice we will have to inform parents/carers. *A* standard text message is sent to all parent/carers to make them aware.

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. 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 was 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 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 early and began treatment early, thus avoid 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).