



"Inspiring a love of lifelong learning"

First Aid Policy

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Learning at Charville is underpinned by our Core Values

Respect

Independence

Self-belief

Honesty

Caring

Determination

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1. Scope

This first aid policy applies to all staff, visitors and children in the academy and is an overarching document which sets out how we will administer first aid.

2. Aim

This policy aims to guide provision of first aid and management of health conditions.

3. First Aid

The head and deputy head teacher will ensure that provisions conform to all current Health and Safety Regulations, Approved Code of Practice and guidelines from the Health and Safety Executive (HSE) covering items such as:

- First aid boxes
- Pupils or employees requiring specific medication, or who have particular requirements
- All notifiable/reportable/major injuries must be reported immediately to the Welfare Officer who will report to the HSE if required
- Any accident investigation will be carried out by the Head or a nominated senior person
- All accidents/incidents are recorded – Pupil incidents will be recorded on CPOMS, staff and visitors incidents are recorded in an accident book stored in the Medical Room.

The Head and Deputy Head Teacher are responsible for ensuring the academy conforms to the current/latest HSE version of (RIDDOR) Reporting of Notifiable/Reportable/Major Illnesses, Diseases and Dangerous Occurrences Regulations.

4. First Aid Boxes and Supplies

Locations: Medical Room
 Staff Room
 Nursery
 Training and Development Room
 Science Room in Year 6 Block
 Dining Hall

First aid boxes will be selected by the Welfare Officer and size and contents will be appropriate for the designated location in accordance with current guidelines.

The boxes will be checked at the start of every term by the Welfare Officer to ensure all items will be within use by dates as recommended on the respective product. The Welfare Officer is also responsible for checking first aid kits after any major incident.

More specialised equipment for first aid is kept by the Welfare Officer in the Medical Room.

The Welfare Officer is responsible for maintaining stock and placing orders to replenish supplies.

5. Safety/HIV Protection/Infectious Diseases

All staff must wear disposable gloves when treating any accidents/incidents which involve body fluids. All clinical waste (soiled dressings, swabs, etc) should be placed in clinical waste bins in the Medical Room, which are collected each month. Any soiled children's clothes should be placed in a plastic bag and fastened securely ready to take home.

6. Workplace Stress – See stress management policy

Workplace stress is recognised by the Governors, Head and Senior Leadership team as a legitimate problem affecting staff and one which needs careful and sympathetic management.

All stress related issues, which are declared, will be referred to the schools Occupation Health Provider by the Head or Deputy.

Members of staff shall be encouraged to seek advice from management regarding any situation they feel is causing them undue stress; such consultations will be treated without prejudice and in the strictest confidence.

7. Allergies/Asthma/Long Term Illness

All allergies, asthma and long term illnesses are recorded centrally on SIMs.

Parents/carers are responsible for informing the Welfare Officer of any child who requires medication for allergies, asthma or any other long term illness.

The school work alongside the local authority health care professionals, and receive up to date advice, guidance and training to ensure current standards are adhered to.

Where necessary, medical health care plans will be developed for individuals with parents, carers or health care professionals.

For additional information on the treatment of allergies and asthma please see the separate policies.

8. Accidents

8.1 Notifiable/Reportable Injuries (RIDDOR)

These accidents should be reported to the Health & Safety Executive (HSE) using their online reporting system – (<http://www.hse.gov.uk/riddor/report.htm>). Fatal & Major accidents should be reported immediately by telephone – 0845 300 9923.

All details of the accident will be shared with the HSE who will then send the school a copy of their report confirming details given. All records are held in a secure place in the Medical Room. Reportable accidents/injuries should be investigated by the Senior Leadership Team supported by the Site Manager when appropriate. .

8.2 Non-Notifiable Accidents/ Incidents

Any other accidents/injuries that require medical attention are recorded (Pupil incidents will be recorded on CPOMS, staff and visitors incidents are recorded in an accident book stored in the Medical Room). These are stored in compliance with GDPR.

The Welfare Officer is informed in the first instance of all accidents. The Head or Deputy Head / Assistant Head teachers are notified immediately of any accidents that cannot be dealt with by school staff. The cause of an accident is always investigated by the teacher on duty, with the assistance of the Welfare Officer. In cases where the cause cannot be determined readily or where the accident required referral outside the school for medical help, the Head or Deputy Head Teacher will be involved in investigating/determining the cause of the accident.

All head/neck/back injuries will be treated with special care. Medical advice will be sought as soon as possible.

This procedure is followed for all accidents on the academy site and at academy sanctioned events.

8.3 All serious accidents (where outside medical assistance is required) are to be reported to the Senior Leadership Team.

If the accident is more than a minor one for a child or adult, call an ambulance if needed and report it to the Senior Leadership Team. Next of kin information for staff and pupils is available from the finance office. SIMS data sheet must be printed and taken to the hospital.

9. **Slips, Trips and Falls**

Incidents related to the above are probably the most frequent within a school.

- Staff and children should be aware of the potential danger in leaving equipment or resources on the floor in the classroom and around the site
- Safety ladders should always be used when reaching up to higher areas
- Carpet edges etc, that begin to curl up are dangerous and should be reported immediately as well as recorded in the site book at main reception
- Children should be trained to pick up everything from the floor and to tuck their chairs under the tables when leaving the room
- All minor injuries should be recorded. This is monitored by the welfare officer and reviewed during Health and Safety Reviews
- If a child has a bump on the head a TEXT is sent to the parents/carers.

Accidents in playgrounds arising from collisions, slips and falls are not reported unless they are due to:

- The condition of the premises (for example, potholes, ice or damaged/worn steps)
- Plant or equipment on the school premises
- The lack of proper supervision.

Fatal and major injuries to school pupils occurring on school sponsored or controlled activities off the school site (such as field trips, sporting events or holidays in the UK) must be reported to the HSE.

10. Risk Assessments and Health and Safety Audits

The purpose of all risk assessments is to:

- Identify hazards and risks
- Assess the nature and seriousness of the hazard and subsequent risks
- Decided what to do to reduce the risks as much as possible
- Evaluate the action to see if the risk has been reduced.

The Head or Deputy Head Teacher and Site Manager are responsible for all agreed site-specific risk assessments. These are completed and reviewed at least annually.

The Site Manager and Health and Safety advisor will carry out a termly inspection & report immediately any major findings / concerns to the Head or Deputy Head Teacher.

Health and Safety Audits / inspections may be carried out on a bi-annual basis, and can be arranged by the Head teacher.

11. Staff – Medical and Welfare Training

All training will be arranged, as and when required, by the welfare officer and CPD lead. All key personnel will attend agreed, recognised refresher courses as & when required. Training records will be kept by the CPD lead and stored on the relevant health care plans. Examples include:

- First Aid at Work
- Anaphylaxis
- Asthma
- Diabetes
- Epilepsy

12. Medications

On occasions, parents/carers give permission for the school to administer prescribed medication at regular intervals to their child. Requests for administering medication to children during school hours, usually fall into two categories:

- Children who require emergency medication on a long-term basis because of a chronic illness (e.g. diabetes and epilepsy)
- Children who are suffering from a short term illness which requires medication to be administered during school hours

12.1 Welfare staff will only administer medicines if they are prescribed by a doctor. Parents/carers must sign a consent form, which is held in Medical Room. In cases where long term medication is required for a child, individual plans will be developed. Details on all medicines will be checked including names, prescription dates, dosage and expiry dates.

Circumstances where non-prescribed medicines can be administered, with a signed parent permission form:

- Paracetamol suspension where the parent has given consent for this.

12.2 All Welfare Staff will be trained to First Aid at Work standard to comply with H&S requirements, Early Years staff will receive Paediatric First Aid to comply with the statutory Early Years and Foundation Stage framework. Additionally, all staff in school will undertake asthma inhaler and anaphylaxis training annually, to ensure correct use in an emergency situation. Please refer to the Asthma and Anaphylaxis policies for further information.

12.3 If a child / young person refuses to take medicine they should not be forced to do so. Staff should note this and follow agreed procedures. These will include informing parents/carers on the same day. If the refusal results in an emergency, the emergency procedures should be followed.

12.4 If the administration of a prescribed medicine requires technical/medical knowledge, individual staff will be given training by a qualified professional and the training must be specific to the medical procedure/s concerned, for e.g. Adrenaline auto injectors. A care plan would be in place to support with the correct care of the child.

12.5 A formal plan for administering long term medication for a child requires the following:

- A consent form, signed by the parent/carer, giving authorisation for medicines to be administered to their child. This needs to include instructions regarding the quantity and frequency of the administration. If medication is administered daily, a letter is requested from the doctor/hospital to support this.
- The medicines must be brought into school by parent/carer in a properly labelled Doctor prescribed container which states:
 1. The pupils name
 2. The name of the medicine
 3. The dosage and frequency of administration

4. The use by date

Where possible, medicines should be self-administered, under the supervision of Welfare.

The emergency procedures are set out for pupils with medical needs in their **Health Care Plan**. A copy is kept in Medical Room and a copy sent to parents.

- 12.6 All medicines will be kept in an appropriate location, in accordance with health and safety requirements and other relevant policies – see point 15.

13. Educational Visits/School Trips

The Head or Deputy Head Teacher and trip leaders are responsible for ensuring risk assessments are carried out before undertaking any educational visit or outing. These are required as part of the safety audit.

Risk assessment will be completed to ensure proper precautions are taken on school outings. The risk assessment will identify any health/medical needs and any required actions.

The company, or place of interest's risk assessments, are attached to the school risk assessment.

Certain educational visit risk assessments for school journeys may be taken to the Governing Board for approval.

13.1 Managing Prescribed Medicines on School Trips & Outings

All prescribed medicines should be handed to the Medical Room by the parent/carer, who is required to sign a permission slip, prior to the trip.

Circumstances where non-prescribed medicines can be administered, with a signed parent permission form:

- Travel Medication – only travel medication given to welfare staff in the original packaging, along with the dosage information and a valid expiry date.
- Paracetamol suspension where the parent has given consent for this.

14. Related Policies

- Anaphylaxis Policy
- Asthma Policy
- PSHE Policy and Scheme of Work
- Child Protection Policy
- Safeguarding Policy
- Equal Opportunities Policy
- Inclusion Policy

- Medical Needs Policy
- Health and Safety Policy

Appendix 1



CHARVILLE ACADEMY

**PARENTAL PERMISSION TO ADMINISTER
MEDICINES TO CHILDREN**

Child's name:..... **D.O.B**/...../20

Class.....

I (parent/guardian) give permission for the Welfare Officer, or a delegated member of Charville Primary School, to administer medicine to my child.

I understand that the member of staff will make every effort to comply with my wishes but there may be circumstances that prevent them from carrying out my instructions.

Signed (parent/guardian)

Date

DETAILS OF MEDICATION

| | | |
|-----------------------------|----------------------|-------------|
| <u>Name of Medicine</u> | <u>Dosage/amount</u> | break/lunch |
|-----------------------------|----------------------|-------------|

Period of Medication as stated on prescription label

Condition or illness

Date prescribed.....

Completion date

Any other instructions.....