Byfleet Primary School

First Aid Policy

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Signed	**Richard Bowman** Headteacher
Signed	**Joy Considine** Chair of Governors

First Aid Policy
(Incorporating Supporting Children with Medical Needs and Needlestick Policies)

At Byfleet Primary School we believe in an ethos that values the whole child.
We strive to enable all children to achieve their full potential academically, socially and emotionally.

Aims

- To ensure that there are processes in place to safeguard the health, safety and care of our pupils and to ensure that procedures are in place to cater for all identified children with medical conditions;
- To ensure all staff understand their roles and responsibilities in administering medicines and first aid;
- To ensure parents understand their responsibilities in respect of their children's medical needs;
- To ensure medicines are stored and administered safely at school.

Sections within this policy:

- 1. Section 1: Responsibilities
- 2. Section 2: Administration of Medication
- 3. Section 3: Storage of Medication
- 4. Section 4: First Aid & dealing with minor ailments
- 5. Section 5: Supporting Children with Medical Needs in Schools
- 6. Section 6: Needlestick Policy

Introduction

Most children at some time have a medical condition, which could affect their participation in school activities. This may be a short-term situation or a long-term medical condition which, if not properly managed, could limit their access to education. The Governors and staff of Byfleet Primary School wish to ensure that children with medical needs receive care and support in our school. We firmly believe children should not be denied access to a broad and balanced curriculum simply because they are on medication or need medical support, nor should they be denied access to school or other activities

Section 1: Responsibilities

Head Teacher and Governing Body Responsibilities

The ultimate responsibility for the management of this policy lies with the Headteacher and Governing Body. The governors will receive termly reports on Health & Safety matters from the Headteacher including reports of any incidents. The governing body will regularly review the school's first aid needs as part of its annual review of Health & Safety at the school to ensure the provision is adequate. They are responsible for ensuring a risk assessment of the first aid requirements of the school is undertaken annually.

The Headteacher is required to inform all parents/guardians of the school's first aid arrangements; which are made available on the school website.

Employees' Responsibilities

The Headteacher is responsible for implementing the governing body's policy via all members of staff and for ensuring the development of detailed procedures.

Anyone caring for children, including teachers and other school staff have a common law duty of care to act like any reasonably prudent parent. This duty extends to staff leading activities taking place off site, such as visits, outings or field trips and may extend to acting in an emergency. Teachers/childcare practitioners who have children with medical needs in their care should understand the nature of the condition, and when and where the child may need extra attention. All staff (teaching and non-teaching) should be aware of the likelihood of an emergency arising and be aware of the protocols and procedures for specific children in school through attending training provided, reading individual health plans devised for individual children and completing risk assessments when necessary

All employees are to familiarise themselves with, among others, the Health & Safety and First Aid policies. This instruction is outlined in the staff Induction Handbook.

Parents Responsibilities

Parents/carers have prime responsibility for their child's health and should provide school with up-to-date information about their child's medical conditions, treatment and/or any special care needed. If their child has a more complex medical condition, they should work with the school or other health professionals to develop an individual healthcare plan which will include an agreement on the role of the school in managing any medical needs and potential emergencies. It is the parent/carers responsibility to make sure that their child is well enough to attend school.

Upon entry to school, parents/carers will be asked to complete admission forms requesting medical information. We also send out data sheets annually for parents/carers to check and

amend to ensure all our records are up to date. The onus is on the parent to ensure that, if circumstances change, they make the school aware of these as soon as is practical.

Section 2: Administration of Medication

Sickness

Children who are unwell and not fit to be at school should remain at home. Children who are suffering from an infection should also remain off school as there is a risk of passing it on to another child or staff member. Even if they have improved, children may not return to school for at **least 48 hours** following vomiting.

Non-prescription medicines

Government guidelines recommend that **non-prescription medicines** should only be administered in emergency cases, so **we are unable to administer OR allow children to self-administer medicines without a prescription.** For example, cough syrup, throat lozenges, eye drops and lip balm.

If a child has been given paracetamol or antihistamine before school, parents/carers should **inform the school office so that staff can record the time and dosage.** This is in case we have to give them an **emergency** dose later that day.

Emergency cases

At Byfleet Primary, we do not hold any Nurofen at school as it contains ibuprofen which is in the same family of medicines as aspirin and **children younger than 16 must not be administered aspirin unless it is prescribed by a doctor**.

In emergency cases e.g. extreme high temperature or allergic reactions, school office staff can administer Calpol and/or Piriton. This can only occur **if written consent from a parent/carer** has been provided.

If we are unable to contact parents/carers or the child's emergency contact during an emergency then the Head Teacher or member of the Senior Leadership Team, we will seek advice from medical professionals (e.g. 111 service).

Prescription medicines

We can administer prescription medicines for occasions **where it would be detrimental to the child's health if not taken during the school day (8.35 am-3.00 pm).** For example, if a child is on a course of antibiotics which requires FOUR doses a day, then we can give them the lunch time dose with parental permission.

However, if a child is on a course of antibiotics which requires THREE doses a day, then we have been advised to ask parents/carers to administer the medicine at home e.g. at breakfast time, at 3.00pm and one evening dose.

If the child is attending Breakfast Club (7.30 am-8.35 am) and/or Afterschool Club (3.15pm-5.30pm) then parents/carers would not be asked to administer the recommended doses at home for logistical reasons. We will be able to provide the recommended doses at school with written permission.

Parents are welcome to decide to come in and administer the medication to their own child if they wish to do so. A suitable time must be agreed to reduce any disruption to the school day.

Sun protection

Wherever possible, sun cream and lotion should be applied before school. If parents/carers would like their child to re-apply the cream during hot weather, then they must send a **named bottle** into school and be kept in their bag. **Children will be asked to self-administer their own cream** unless they are in Reception, where parents/carers will be asked to provide written permission to allow staff to assist their child.

Epi-Pens and Asthma Inhalers

Parents/carers must fill out a treatment/medication form and provide any related medical documentation which will be copied and kept with their child's epi-pen/inhaler.
Parents/carers are responsible for ensuring their child's inhalers and epi-pens are up to date.

The school holds a photographic list of anaphylaxis sufferers who require an epi-pen which is shared with the relevant members of staff and used to identify pupils. Epi-pens, for anaphylaxis sufferers, are kept out of reach in the medical areas and can only be administered by members of staff who have received epi-pen training.

There should always be two Epi-pens at school for each child. One will be located at the main school office and the other will be in a clearly named box within the classroom. Epi-pens should be taken out of the classroom during outside PE lessons and whole school outdoor events e.g. Sports Day.

There is a photographic list of those with asthma in the school office. Asthma inhalers are kept in a sealed and named bag/box and kept in a safe place within each classroom.

Asthma inhalers are to be administered by the pupil under the supervision of a staff member and recorded.

Epi-pens and inhalers are to be taken out onto the field for all P.E lessons and to the pool area during swimming sessions. There will be a member of staff responsible for all epi-pens and inhalers during educational visits and off-site activities.

Children who require a brown inhaler at school need a doctor's letter confirming this before it can be used at school.

School Visits

During school visits it is the class teacher's responsibility to ensure the children in their class have the appropriate medication e.g. inhaler/epi pen when going off-site. Medical details should be outlined on the trip risk assessment and there should be a named adult being responsible for the administration of the medication.

Section 3: Storage of Prescription Medication

All prescription medicines should be taken directly to and collected from the School Office by a responsible adult. Medicines should **not** be left in a child's bag due to health and safety reasons.

All medicines will only be accepted for administration in school on completion of the treatment/medical form which can be found at the school office. The form must be signed by a parent or carer with details of dosage and time to be administered.

All medicines should be clearly marked with the child's name and class. Only medicines in their original container (including original label) as dispensed by a pharmacist will be

accepted. The prescriber's instructions for administration and correct dosage spoon should also be included.

Parents/carers are responsible for ensuring any medication provided for their child/ren is up to date for the period of intended use.

The school is responsible for ensuring that all medicines are safely stored. Medicines must be kept in a locked cupboard or the medical section of the fridge which are in the main school office. Both are supervised by the office staff.

Section 4: First Aid

Aim

It is our policy to ensure that appropriate first aid arrangements are in place for our children, staff and any visitors to our premises. This includes providing sufficiently trained employees for our needs and maintaining an adequate supply of first aid equipment.

The regulations define first aid as:

- *in cases where a person will need help from a medical practitioner or nurse, treatment for the purpose of preserving life and minimising the consequences of injury and illness until such help is obtained, and treatment of minor injuries which would otherwise receive no treatment or which do not need treatment by a medical practitioner or nurse.*

Provision of First Aid

A first aider is someone who has undertaken training appropriate to the circumstances. All staff at Byfleet Primary are first aiders as they have completed the **Emergency First Aid** certificate which is renewed every three years.

We have a team of appointed first aiders who 'take charge of the situation related to an injured or ill person who will need help from a medical practitioner or nurse'.

Accidents resulting in injury or ill health effects will be notified immediately to the nearest first aider to facilitate first aid treatment. Where injuries are serious enough to warrant hospital treatment staff must telephone 999 for an ambulance to transport the patient to hospital, inform the next of kin and the Headteacher. Where a child is sent to hospital, a member of staff will accompany the child if a parent cannot be contacted, or time will not allow us to wait.

First Aid Equipment

First Aid boxes can be found in the School Office and in each classroom around the school. All first aid boxes should be maintained in a good condition; suitable for the purpose; readily available for use and prominently marked as a first-aid container.

There is no mandatory list of items for a first-aid container. However, the HSE (**Health and Safety Executive)** recommend that, where there is no special risk identified, a **minimum** provision of first-aid items would be:

- A leaflet giving general advice on first aid
- 20 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 x 12cm) individually wrapped sterile unmedicated wound dressings;
- Two large (approximately 18cm x 18cm) sterile individually wrapped unmedicated wound dressings
- One pair of disposable gloves

All staff members are responsible for **daily checks** on first aid kits in the After School Club and the lunchtime first aid kit. All classroom first aid kits are checked by the class TA **once a week.**

All staff should take precautions to avoid infection and must follow basic hygiene procedures. Staff should have access to single-use disposable gloves and hand washing facilities and should take care when dealing with blood or other body fluids and disposing of dressings or equipment.

Recording Accidents and Incidents

Any injury involving treatment is recorded on an online platform called 'Arbor' under the child's electronic folder, which records the following information:

- Name of person
- Date and time of incident
- Detail of injury and first aid given
- Comment on how they appeared and/or returned to class

Reporting to Parents

- Every care is taken to ensure that injuries are not missed. If a child sustains a knock to the head or receives a more severe injury and is not hospitalised, every effort will be made to contact the parent/carer or other emergency contact as recorded on the

child's file. A mutual decision will be made as to whether the pupil will remain in school or is to be collected.

- A green paper form can be found here for head injuries or more severe injuries that require an adult at home to be informed.
- ***Where an injury is sustained on the head, above the shoulders or a more severe injury - a green paper form is completed and shared with the admin first-aid team, who will then make contact with the adult at home, as above. The admin team who makes the call home, then records the paper incident in the child's folder.***
- Minor head bumps where there is no visible mark or a small mark is visible; a text message will be sent to inform the parent/carer.
- For lesser injuries where a pupil is able and willing to continue at school parents will be informed at the end of the school day.
- For minor injuries that require minimal first aid, pupils will be provided with a 'I received First Aid Today' wristband.
- Where there is any uncertainty, medical assistance will be sought, and where it is required urgently, this is done by ambulance.
- If parents/carers cannot arrive at the school before the ambulance, they should arrange to meet their child at the hospital. When a child is taken to hospital, he/she will be accompanied by an adult from school who will remain with the child until parents can arrive to relieve them.

Compliance with RIDDOR regulations

The Head teacher will determine which accidents and dangerous occurrences are required to be notified to the Health and Safety executive under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995. (RIDDOR)

These incidents must be reported to OSHENS within 10 days of the incident; In the event of a major injury or fatality the notification must be immediate by telephone (0845 300 99 23), with written confirmation using the form F2508 or via website http://www.hse.gov.uk/riddor/ .

Procedure for dealing with spillage of body fluids

Staff, on becoming aware of an incident including spillage of body fluids, must make the area clear and safe and call for assistance from the Site Manager. The Site Manager will deal with the spillage using specialist materials which are held for this purpose.

Offsite activities

When students are on approved school trips, first aid arrangements are detailed in the risk assessment. Medical contact and information forms are sent to all parents/guardians to supply detailed information on students' medical conditions. The forms accompany the staff in charge of the visit and information can be made available to any medical authority in the country.

Trip of less than 24 hours

A designated member of staff must have a suitably equipped first aid kit along with individual pupil's medication such as inhalers, Epipens, insulin etc. and will be issued with a mobile telephone to summon aid if required.

Trip exceeding 24 hours

Parents are asked to complete the appropriate medical form (available at the end of this policy) so that all staff are aware of any specific medical conditions and can act appropriately.

Dealing with minor ailments

Childhood illnesses

Parents/carers should follow the Health Protection Agency guidelines for childhood illnesses and abide by these when considering whether their child should attend school. The list of illnesses is many and varied so families can visit http://www.hpa.org.uk or discuss their specific circumstance with the School Office.

We have elected to cover some of the more common ailments below as they do cause confusion amongst our parent community.

Head Lice
Any case of head lice should be reported to the school. Where a case of headlice is identified during the school day parents/carers will be advised on an appropriate course of action as advised by the local health authority. The child will **not** be sent home early from school.

Conjunctivitis
A child with conjunctivitis may remain in school provided treatment has begun. The child will be advised to follow good handwashing techniques during the ailment.

Diarrhoea/Vomiting
No child can remain in school if they have either diarrhoea or vomiting to limit the spread of these conditions. The child must not return to the setting until they are 48 hours clear i.e. have not had these symptoms for at least 48 hours.

Visitors

It is our policy to offer first aid assistance to visitors on our premises. Should a visitor feel unwell or have an accident, then the employee supervising their visit should call for a first aider/appointed person. If the visitor has had an accident, the employee supervising their visit is responsible for ensuring that a record is made on a green form.

Section 5: Supporting Children with Medical Needs in Schools

The school recognises that there are many common conditions affecting many children and young people and welcomes all children with these conditions and others. The school believes that every child has a right to participate fully in the curriculum and life of the school, including all outdoor activities and residential trips. The school ensures that all staff in the school have a good understanding of any conditions that a child may have, through relevant training and does not discriminate against any child who is affected by their condition.

The schoolworks with a child's family to gather the relevant information about a child's condition and to share that efficiently and effectively within the school as appropriate. Any child with a severe physical injury is to wear a high vis during breaks and outdoor activities to be identifiable to all staff.

Individual Health Care Plans (IHCP)

The main purpose of an IHCP is to identify the level of support that is needed at school for an individual child. The IHCP clarifies for staff, parents/carers and the child the help the school can provide and receive. These plans will be reviewed annually or more frequently at the request of parents/carers or the school, or as required.

An IHCP will include:

· Details of the child's condition
· What constitutes an emergency
· What action to take in an emergency
· What not to do in the event of an emergency
· Who to contact in an emergency
· The role the staff can play
· Special requirements e.g. dietary needs, pre-activity precautions
· Any side effects of medicines

A copy will be given to parents/carers, class teachers/childcare practitioners and a copy will be retained in the medical needs file in the office and the child's individual file. The general medical information sheet given to all staff will indicate that the child has an IHCP.

Communicating Needs

A medical file containing class/childcare lists together with an outline of any medical condition and actions to be taken is available to all teaching and non-teaching staff (including Lunchtime

Supervisors) in the School Office. Individual Health Care Plans for children are kept in the classroom/School Office where they are accessible to all staff involved in caring for the child.

Physical Activity

We recognise that most children with medical needs can participate in physical activities and extra-curricular sports. Any restrictions in a child's ability to participate in PE or specific physical activities should be recorded in their IHCP. All staff should be aware of issues of privacy and dignity for children with particular needs.

School Visits

When preparing risk assessments staff will consider any reasonable adjustments, they might make to enable a child with medical needs to participate fully and safely on visits. Sometimes additional safety measures may need to be taken for outside visits and it may be that an additional staff member, a parent/carer or other volunteer might be needed to accompany a particular child.

Arrangements for taking any medicines will need to be planned in accordance with our policy on administering medication and as part of the risk assessment and visit planning process. A copy of IHCP should be taken on trips and visits in the event of information being needed in an emergency.

Residential Visits

Parent/carers of children participating in residential visits will need to complete a consent form giving details of all medical/dietary needs. Administration of medicine forms need to be completed prior to the day of departure and all medication which needs to be administered during the course of the visit should be handed directly to the trained first aider accompanying the group before leaving the school at the start of the visit.

Section 6: Needle Stick Injury Policy

As a needle can penetrate the skin, there is a potential health risk that such an injury can result in staff being exposed to blood borne viral infections, such as Hepatitis B or HIV.

It is highly recommended that any staff expecting to encounter used sharps have a Hepatitis B inoculation. All relevant staff will be made aware of this service.

Needle stick injury procedures

Administration of injections will be risk assessed. Where there is a risk of staff encountering discarded needles, they will be supplied with an appropriate Sharps container.

- Staff must avoid personal contact with sharps and avoid 'needle stick injury' where the skin is punctured.
- The sharp should be placed in the approved small sharps container.

- Staff must not re-sheath, cut or bend the needle or carry it in their hands or pockets.
- The Headteacher will be aware of the location and disposal of any needles.

Action to be taken following a needle stick injury

- Do not suck the wound.
- Encourage bleeding from the puncture wound.
- Wash the area thoroughly under running water and cover it with a dressing.
- Immediate medical advice should be sought.
- Report the injury to the Headteacher as soon as reasonably practicable.

PUPIL MEDICATION REQUEST

Byfleet Primary School, King's Head Lane, Byfleet. KT14 7AT

Child's Name: _____ Class: _____

Home Address: _____

_____

Condition or Illness: _____

 Parent's Home Number: _____

 Work Contact Number: _____

GP Name: _____ Location: _____

Please tick the appropriate box:

 My child will be responsible for the self-administration of medicines as directed below.

 I agree to members of staff administering medicines/providing treatment to my child as directed below.

I agree to update information about the child's medical needs held by the school and that this information will be verified by GP and/or medical Consultant.

I will ensure that the medicine held by the school has not exceeded its expiry date.

Signed _____ Date _____

Name of Medicine Dose:
_____

Frequency/Times: _____

Completion date of course: _____
Expiry date of Medicine: _____

Special Instructions:
_____

Allergies:
_____

Other prescribed medicines taken at home:
_____

NOTE: Where possible the need for medicines to be administered at school should be avoided.
Parents are therefore requested to try to arrange the timing of doses accordingly.

Injuries and Accident Procedures

Minor Injuries i.e., grazes, small cuts, small knocks & bumps (no lasting mark):

• Apply First Aid

• Log detail on Arbor

• Give the child a wristband

Teachers will (where possible) inform parents on collection.

Remember that a tiny flick to the head i.e. a jumper flicked to the face/ head or a bump from another child doesn't warrant a green form as it is not significant.

More serious Injuries such as sprains and significant cuts or bumps which leave a lasting mark need:

• Any bump or injury to area above the shoulders i.e. head

• Immediate First Aid and a qualified first aider to assess injury

• Give the child a wristband

• Complete a green form and send home (*if this is for a head bump, attach a head injury leaflet*)

• Copy of green form sent to the office, who will call home – *only if necessary*

• Log detail on ScholarPack (*mentioning green form*)

Please **do not** write on the green form that a phone call will be made home as this is not always necessary.

Wristbands are only given for Injuries/ Accidents that cause broken skin or marks.

Debilitating Injuries/ Events i.e., suspected breaks, breathing difficulties, seizures, loss of consciousness:

• Apply immediate First Aid

• Send for immediate help from one of our Paediatric First Aiders

• Call 999, if necessary

• Call home to inform the parents

• Complete a green form to send home (*if this is for a head bump, attach a head injury leaflet*)

• Copy of green form sent to the office

• Log detail on Arbor (*mentioning green form*)