

Keir Hardie Primary School & Children's Centre



First Aid Policy Including Medicine Policy & Head Injury Procedures

Reviewed:	Autumn 2017
Date of Next Review:	Autumn 2018

This policy was reviewed by the co-ordinator

Print Name

Signature

Date

This policy was reviewed by the Head Teacher

Print Name

Signature

Date

This policy was reviewed and agreed by the Chair of Governors

Print Name

Signature

Date

First Aid

Introduction

The purpose of this First Aid Policy is to enable the school¹ to effectively meet the requirements of the Health and Safety (First Aid) Regulations 1981 and in doing so to:

- Provide for the immediate needs and requirements of staff and students who have sustained either a serious or a minor injury
- Ensure that adequate resources and arrangements are in place to deal with injuries/accidents as they arise
- Ensure lines of communication with parents/guardians are in place if required
- Activate a known plan of action with which all staff are familiar

The School shall inform employees of the first aid provisions made for staff, including the position of equipment, facilities and names of designated first aiders.

The treatment of minor illness by the administration of medicines and tablets falls outside of the definition of first aid in the Regulations and the School will not permit the presence of any such medication in designated first aid boxes. Please refer to the Medicines In School Policy for more information.

Definitions

'First aid' means medical treatment for an injured person for the purpose of preserving and stabilising life and minimising the consequences of injury or illness until further medical treatment can be administered.

'First aider' means: a person who holds a valid First Aid at Work Certificate or equivalent qualification.

Roles and Responsibilities

- The overall responsibility for the day-to-day management of school rests with the Head teacher.
- The class teacher is responsible for classroom supervision and all staff on break duty are directly responsible for the supervision of pupils at break time.
- The school's Health and Safety Administrator.
- The Inclusion Manager/ CPD leader is responsible for ensuring training is up to date.

¹ 'School' refers to KH Primary School and KH Children's Centre

Assessment of First Aid Needs

The Head Teacher shall make an assessment of first aid needs appropriate to the circumstances of the school. The Head Teacher will need to assess what facilities and personnel are appropriate, and to justify the level of first aid provision. Where necessary and relevant, all staff will be trained on how to administer aspects of first aid e.g. epi-pens.

Where the first aid assessment identifies a need for employees to be trained as first aiders, the Head Teacher shall ensure they are provided in sufficient numbers at appropriate locations to enable first aid to be administered without delay should the occasion arise. All designated first aiders must re-qualify every 3 years. This means re-qualifying before the end of the third year when the certificate is no longer valid. It is the responsibility of the CPD leader to ensure they are booked onto the course before cancellation of the certificate.

Management of First Aid Equipment

It shall be the responsibility of the Health and Safety Officer to ensure the provision of materials, equipment and facilities needed for the level of cover required. This will include ensuring that first aid equipment, suitably marked and easily accessible, is available in the agreed designated areas. Where additional or replacement material or equipment is required, staff should speak to the Finance Officer about ordering more items immediately. The Welfare Assistant will ensure that all out of date items are discarded and replaced. These need to be checked on a regular basis i.e termly.

Although the Welfare Assistant is responsible for maintaining and checking the first aid equipment, it is also expected that before going on duty/ on a school visit etc, first aiders shall take responsibility for ensuring their first-aid box contents are sufficient.

Fixed and Portable First-Aid Boxes

All school first-aid boxes are coloured green and are identified by a white cross on a green background. This conforms to the Safety Signs and Safety Signals Regulations.

Fixed first aid kits are sited in the following places:

- Medical Room (Ground Floor)
- School Office
- Kitchen?
- Y1 classroom
- Staff room
- Deputy Head office (1st Floor)
- Hygiene Room 1st

- Art & Design Zone
- Y2 classroom
- Y3 classroom
- Y4 classroom
- Y5 classroom
- Y6 classroom
- Crèche
- Early years Kitchen

Portable first aid kits are obtainable from:

Name: Zahida Iqbal

Eye wash facilities are located in the following places:

- Wash basins Medical room
- Classrooms
- Toilets

The minimum first-aid provision for each site is:-

- A correctly stocked and labelled first-aid container
- Three qualified first aiders (to ensure that there is one duty when the establishment is open for normal activity)

The contents of first-aid boxes should be examined frequently and restocked as soon as possible after use. See below recommended minimum stocklist:

- 20 individually wrapped sterile adhesive dressings (Assorted sizes)
- 2 sterile eye pads
- 4 individually wrapped triangular bandages (preferably sterile)
- 6 safety pins
- 6 medium sized individually wrapped sterile unmedicated wound dressings
- 2 large sized individually wrapped sterile unmedicated wound dressings
- 1 pair of disposable gloves

The person responsible for checking and restocking: Zahida Iqbal in case of absence Nurun Begum.

The boxes should contain a sufficient quantity of suitable first aid materials. According to DFE guidance, as a minimum, First Aid Boxes should contain: micropore or plasters, scissors, triangular bandage, wound dressing, instant ice pack and gloves. No medicinal substance or materials are permitted within a first-aid box. This includes items such as antiseptic sprays, lotions, suntan oil, etc.

Individually wrapped sterile moist wipes, not impregnated with alcohol or antiseptic, may be used.

Blunt ended stainless steel scissors should be kept in the boxes in case there is the possibility that clothing may have to be cut away prior to first aid treatment.

Where tap water is not available for use as an eye wash only sterile water, sterile normal saline or sterile normal saline eye irrigation should be provided near the first-aid box. Eye baths/cups/refillable containers should not be used for eye irrigation.

Where medicines/inhalers have to be held for safety/security reasons, the separate lockable container must be used. This is in the Welfare Room. A register of contents must be kept up to date. Please see Medicines In Schools policy for more information.

No staff members are authorised to dispense medicines. Parents must administer medicines to children, or provide written authorisation for a pupil to administer their own medication under supervision of a staff member. In exceptional circumstances parents/carers can sign a consent form allowing a member of staff to administer medication, this will be done under the supervision of another member of staff. The form that parents must complete is kept at the front desk - Appendix A.

First Aid Rooms and Treatment Areas

According to DFE guidance, where first-aid needs to be administered in a room, it should be administered in the school office or another room which will:

- be large enough to hold necessary equipment;
- have washable surfaces and adequate heating, ventilation and lighting;
- be kept clean, tidy at all times;
- be positioned as near as possible to a point of access for transport to hospital;
- display a notice on the door the names, names of the first aiders
- have a sink (with hot and cold water if possible);
- have drinking water and disposable cups;
- have soap and paper towels;
- have a suitable container (preferably foot operated) lined with disposable waste bags

This means that, if needed, First Aid can also be administered in a classroom, the hall or the art space.

The medical room has:

- a first-aid box;
- a telephone or other communication equipment;
- Disposable gloves and aprons, provided near the first-aid box. These will be used to protect the first aider from contact with body fluids.
- a First-Aid Record Book for recording incidents where first aid has been given.

At all times the dignity and feelings of the patient must be respected.

First Aid Training

The CPD leader will arrange training for the qualification and re-qualification of first aiders.

Before being nominated the designated first aider by their manager, a first aider must hold a valid First Aid at Work Certificate of competence or an equivalent qualification. In the event of an unqualified person being nominated to be responsible for first-aid duties, they will be required to undergo a suitable course of training.

Provision of First Aiders

There shall normally be a minimum of 5 first aiders or appointed persons within the school between 8:55am and 3:25pm. At least one first aider will be on duty at playtimes and there will always be a first aider in the office in lesson time.

Consideration must also be made to ensure first-aid cover during absences, such as annual leave and sickness. This is the responsibility of the Health and Safety Officer and CPD lead.

Categories of Incidents and Procedures

Any pupil complaining of illness or who has been injured is sent to the Medical Room for the qualified first aider(s) to inspect and, where appropriate, treat. Constant supervision will be provided. Should the child be too ill to stay at school, parents should be contacted as soon as possible so that the child can be collected and taken home.

Minor Accidents and Injuries

The adult in charge initially looks after the injured party. If deemed necessary, a person other than the teacher will take the child to the 'First Aid Station', which is the Medical Room. No medicines are administered but cuts are cleaned with sterile un-medicated wipes and bandages are applied if deemed appropriate. The use of disposable plastic gloves is mandatory at all times. All accidents are recorded in the Accident Report Book by the first aider, and parents are contacted by telephone if the injury looks severe and a note (recording details of the incident/actions taken) is given to the pupil.

Minor Cuts and Bruises Method: In all cases of injury it is understood that there is at least one adult present:

- A first aider should administer first aid if appropriate. If the first aider is not available, any member of staff may clean the wound.
- Class teacher is informed by the first aider.
- Teacher observation is maintained

- Children are advised to show/tell parents

Sprains/Bruises:

- A first aider should administer first aid if appropriate. If the first aider is not available, any member of staff may implement the process of rest, ice, compress and elevate
- If in doubt, parent/s are contacted
- Teacher observation is maintained

More Serious Accidents and Injuries

If considered safe to do so, the injured party is taken to the Medical room. Parents are immediately informed, particularly if there is a suspicion of broken bones/head or eye injuries. The child is kept under close observation until parents arrive, with the emphasis on making the child as comfortable and as settled as possible.

Stings/Bites:

- If case is serious/ parent/s are contacted – no stings should be removed.

Faints and Shocks:

A first aider should administer first aid if appropriate. If the first aider is not available, any member of staff may implement the process of:

- Lie the casualty down
- Raise the legs above the level of the heart
- Loosen any tight clothing
- Ensure there is fresh air
- Keep crowds away
- Reassure casualty when they recover
- Contact parents – the pupil should go home

Very Serious Injuries

In the event of a very serious injury, parents/guardians are immediately contacted. If the considered opinion of the staff is that immediate professional help is required, an ambulance is called.

On rare occasions the staff may agree that taking the child to Accident & Emergency in a private car is a more prudent option particularly in the case of rapid blood loss. This should be on a voluntary basis. In such cases staff should ensure they have specific cover from their insurance company.

Parents are kept informed of developing situations. Very serious injuries are considered to be:

- Severe Bleeding
- Burns/Scalds
- Unconsciousness

The event is subsequently recorded in the Accident Report Book and CYPS are informed by email by forwarding a completed Version3 document of the description of the accident/incident.

The First Aid Policy is based on collective teacher input. All staff automatically assist the teacher on break duty and the first aider in the case of a serious injury.

First Aid Record Keeping

It shall be the responsibility of the Head teacher, or other nominated officer, to ensure that procedures are in place for the immediate recording of any injury as required by the Social Security Act 1975 and the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995.

Details on the forms to be completed, time scales for completion and distribution and who is to be notified, are shown on the Health & Safety policy.

After administering treatment, first aiders will ensure they adhere to the school arrangements for record keeping and accident reporting, as detailed below. Each first aider must receive appropriate instruction to enable them to carry out this responsibility during first-aid training.

All incidents, injuries, head injuries, ailments and treatment are reported in the accident book, kept in the office.

The information recorded will include:

- date, time and place of incident;
- name and, where relevant, job title of the injured or ill person;
- details of the injury/illness and what first aid was given;
- what happened to the person immediately afterwards e.g. went home, went
- back to lessons, went to hospital, etc; and
- name and signature of the first aider or person dealing with the incident.

Parents are immediately informed of a head injury by telephone. Outlining the injury and symptoms to look out for.

Staff should complete the accident book if they sustain an injury at work.

An injured member of staff or other supervising adult should not continue to work if there is any possibility that further medical treatment is needed. The member of staff or other supervising adult concerned should seek medical advice without delay.

Duty to Inform Staff of First Aid Arrangements

All staff must be informed of the location of first aiders, appointed persons, equipment and facilities.

The Health and Safety Coordinator must ensure that a notice giving the names of first aiders, their location and the location of first aid boxes, is posted in each of the following locations:

- Staffroom

- Dance Studio
- School Office
- EYFS
- KS1
- KS2
- Medical Room

Notices will be inspected and kept up-to-date by the Office Manager as part of the regular health and safety inspection.

Our First Aiders Are:

Registered First Aiders:

Name	Renew by:
Zahida Iqbal	
Elizabeth Paul	
Solantina Feruku	26 th November 2017
Naser Mohamed	26 th November 2017
Sharon Freeman	26 th November 2017
Andrea Baker	13 th February 2018
Carol Birkett	25 th March 2018
Dounia Hardwick	29 th April 2018
Bose Adeniji	29 th April 2018
Fitzalbert Nelson	20 th January 2019
Bernadette Belle	20 th January 2019
Bronia Robson	3 rd February 2019
Nurun Begum	3 rd February 2019

Paediatric First Aiders:

Name	Renew by:
Aliya Rafiq	5 th November 2017
Solantina Feruku	26 th November 2017
Naser Mohamed	26 th November 2017
Sharon Freeman	26 th November 2017
Andrea Baker	13 th February 2018
Sonia Smith	24 th February 2018
Carol Birkett	24 th March 2018

Dounia Hardwick	29 th April 2018
Bose Adeniji	29 th April 2018
Amy Cheal	2 nd May 2018
Fitzalbert Nelson	20 th January 2019
Bernadette Belle	20 th January 2019
Bronia Robson	3 rd February 2019
Nurun Begum	3 rd February 2019

Emergency First Aiders

Name	Renew by:
Pauline Crisp	
Denise White	
Jan Overton	
Shahina Begum	
Simon Bond	
Asma Chowdhury	
Julie Ritter	
Ahmar Ferguson	
Hamida Sultana	21 st July 2019
Cheryl Burroughs	21 st July 2019
Rima Ranu	21 st July 2019
Shote Morina	21 st July 2019
Jossette Motamby	21 st July 2019
Elena Iftimie	21 st July 2019
Sonya Crichlow	21 st July 2019
Sumaiyah Faruki	21 st July 2019
Olena Verchenko	21 st July 2019
Osaghae Aideyan - Woghiren	21 st July 2019
Paula Southee	21 st July 2019
Victoria Ogbe	21 st July 2019

Medicine Policy

Aim

A clear policy that is understood and accepted by all staff, parents and children providing a sound basis for ensuring that children with medical needs receive proper care and support in school², and that for such children attendance is as regular as possible.

The policy is to include:

- Procedures for managing prescription medicines which need to be taken in the school day
- Procedures for managing prescription medicines on outings and trips
- Roles and responsibilities of staff administering medicines
- A clear statement of parental responsibilities in respect of medicines
- Written permissions from parents for medicines
- Circumstances in which children may take non-prescription medicines
- Assisting children with long term medical needs
- Staff training
- Record keeping
- Safe storage of medicines
- The school's emergency procedures
- Risk assessment and management procedures

In all instances the school will do all it can to persuade the parent to come into school to administer medicines.

Prescribed Medicines

We will never accept medicines that have been taken out of the container as originally dispensed nor make changes to dosages on parental instructions.

It is helpful when clinically appropriate that medicines are prescribed in dosages that enable it to be taken outside of school hours. We will encourage parents to discuss this with their doctor (prescriber).

Prescribers should be encouraged to issue two prescriptions, one for home and one for school, thus avoiding the need for repackaging of medicines.

Controlled drugs should never be administered unless cleared by the Head. Reference should be made to the DfES document Managing Medicines in Schools and Early Years Setting 2005.

² 'School' refers to KH Primary School and KH Children's Centre

Non-Prescription Drugs

Staff should never give non-prescription drugs to a child.

Long Term Medical Needs

Keir Hardie Primary School will be fully informed of the child's needs before admittance. It is essential to have sufficient information in order for the child's medical needs to be adequately supported. The SENCo then devises a care plan with the school nurse following DfE guidance.

At admission interviews, if the parents inform the school that their child has an allergy, they are recorded on an allergy assessment form (Appendix B).

Administering Medicines

No child under 16 should be given medicines without written parent consent. The parent should sign the consent form giving permission for medicine to be administered by staff. (RETAIN A COPY OF CONSENT LETTER IN WELFARE ROOM). Supervision to be provided, whenever possible two adults present during administration.

Members of staff giving medicines should check:

- The child's name
- Prescribed dose
- Expiry date
- Written instructions on the packaging

If in doubt then do not administer medicines without checking with the school office staff who will then contact parents or the medical practitioner.

A record must be kept in a written form each time medicines are given.

Self Management

Children who are able will be encouraged to manage their own medicines. This will generally apply to relief treatments for asthma. Other medicines should be kept in secure storage so access will only be through the school office.

Record Keeping

Parents should inform the school of the medicines their child needs. School will check that the medicine is in its original container and that the dispenser's instructions are clear.

A written record of medicines administered will be kept in the school welfare room.

Educational Visits

All medicines required by children on such undertakings will be part of the overall risk assessment for the visit. Medicines not self managed by the pupils should be in the safe care of a nominated member of the support staff. This colleague should be one who is willing to carry this responsibility. Complex medical needs for a specific pupil may necessitate a Care Plan for the visit. If any member of staff is concerned they should seek advice from the school office.

Sporting Activities

Children who require medication and take part in after school sports should have a risk assessment of their medical needs. Asthma relievers not self managed should be taken to the sports area and be supervised by a member of staff.

Head Injury

Children frequently sustain minor head injuries. This advice sheet gives details of what symptoms and signs should be looked for in children who have hit their head whilst at school³ and when medical advice should be sought.

If after a head injury a child remains unconscious or fits an ambulance should be called immediately and the parents contacted. If a child suffers from any of the following symptoms medical advice must be sought and if advised the child should be taken to see either their GP or to A&E by the parents or by school staff.

- Loss of consciousness
- Vomiting
- Sleepiness
- Fits or abnormal limb movements
- Persisting dizziness or difficulty walking
- Strange behaviour or confused speech

Children may appear well immediately after sustaining a head injury but show signs of complications later in the day. School staff must remain vigilant and take the appropriate action if the child develops a problem.

If a child sustains a head injury whilst at school, the following information should be recorded from any witness.

³ Please note: 'School' refers to KH Primary School and KH Children's Centre

- Was the child behaving in an unusual way before the injury?
- What happened to cause the injury?
- If they fell, how far did they fall?
- What did they hit their head against?
- Did the child lose consciousness? If so, for how long?
- How did they appear afterwards?
- Did they vomit afterwards?
- Was the child observed to have any other problem after the injury?

Regardless of whether the school seek medical advice about the child, this information should be given to parents afterwards, where possible. It may be that the child becomes unwell after school and the information will be helpful to parents if they need to see a doctor.

In addition parents will be notified by phone following any minor head injury to their child and invited in to inspect the injury. Each head injury will also be recorded in the accident book and a slip advising of the injury sent home with the child (example below). Both will be completed by the person dealing initially with the accident.

If an accident occurs during break or lunchtime the duty staff must ensure that the class teacher is aware of the injury

APPENDIX A

Parental agreement for school to administer medicine - for long term medical needs only

The school will not give your child medicine unless you complete and sign this form, and the school or setting has a policy that staff can administer medicine.

Name of child: _____
Class: _____
Medical condition/ illness: _____

Medicine

Name/ Type of Medicine (as described on the container):

If tablets, number of tablets in container _____

Dosage and method: _____ Timing:

Dates to administer from & to: from _____ to _____

Are there any side effects that the school needs to know about?

Self administration: _____

Contact details

Name: _____ Relationship to child: _____

Daytime Telephone No: _____

Mobile: _____

Address: _____

I understand that I must deliver the medicine personally to the office and accept that this is a service that the school is not obliged to undertake.

I understand that I must notify the school/ setting of any changes in writing.

Date: _____ Signature: _____

Print name: _____ Relationship to child: _____

Staff signature: _____

APPENDIX B

Date:

Dear Parent/Carer,

Request for further information to assess level of support required for allergy dated:

You have stated that your child has an allergy to:

In order to ensure that your child is appropriately supported in a safe environment at school and able to access all areas of the curriculum, we need you to provide further details. We will pass on these details to the School Nursing Service for assessment and care planning purposes.

You must return this form to the school office within 5 school days of the date of this letter. The school nurse will report back to you and the school regarding further action if required.

Please answer the questions overleaf as fully as possible.

Yours faithfully,

Ms V Otieno
Head Teacher

**REQUEST FOR FURTHER INFORMATION TO ASSESS LEVEL OF SUPPORT
REQUIRED FOR ALLERGY**

Child Name:	
Date of birth:	
School:	
Symptoms experienced (as much detail as possible):	
Frequency of allergic reactions (dates)	
What caused the allergic reaction?	
What treatment do you give your child?	
Have you visited your GP as a result of the allergy? If yes, what advice/ treatment was given?	
Have you visited the Accident & Emergency Department? If yes, what advice / treatment was given?	
Has an allergy specialist seen your child? If yes, please provide specialist and hospital's name.	
GP name and contact details including telephone number.	
Name/signature of parent/carer completing this form.	
Date form completed.	