



St Francis Church of England Voluntary Aided Primary School

First Aid Policy

Policy drawn up by Administrator
ratified by Governors

Date May 10th 2016

Version No	Date	Change/Review
V1.0	2016	Policy Adopted
	June 2017	Policy updated to include AED and Emergency Asthma Kit
V1.1	April 2018	Ratified April 17 th 2018
V1.2	April 2019	
V1.3		

St Francis C of E Primary School

First Aid Policy

POLICY STATEMENT

St Francis C of E Primary School will undertake to ensure compliance with the relevant legislation with regard to the provision of first aid for pupils, staff, parents and visitors and will make sure that procedures are in place to meet that responsibility. This policy complies with the school's Health and Safety policy and is reviewed annually.

AIMS & OBJECTIVES

- To ensure that first aid provision complements the safeguarding provision within the school, this policy should be read in conjunction with the Health and Safety Policy and the Child Protection Policy.
- To identify the first aid needs of the school in line with the Management of Health and Safety at Work Regulations 1992 & 1999.
- To ensure that first aid provision is available at all times while people are on the school premises, and also off the premises whilst on school business, trips and residential.
- To appoint the appropriate number of suitably trained people as Appointed Persons and First Aiders to meet the needs of the school and to maintain a record of that training and review annually.
- To provide relevant training and ensure monitoring of training needs.
- To provide sufficient and appropriate resources and facilities.
- To provide awareness of Health and Safety issues within the school and on school trips, to prevent, where possible, potential dangers or accidents.
- To inform staff and parents of the school's first aid arrangements.
- To report, record and where appropriate investigate all accidents.
- To keep accident records and to report to the HSE as required under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulation 2003 (RIDDOR).

FIRST AID PROVISION

First Aid kits are available at the following locations:-

- 1) The School Hall Kitchen
- 2) The First Aid Room behind the Office
- 3) The Staff Room
- 4) KS2 upstairs Group room
- 5) Every corridor
- 6) Food tech room

7) Outside First Aid Station (shed) - used as first aid point at break and lunch time

8) 3 Portable First Aid Kits in the first aid room

There is an Emergency Asthma Kit in the First Aid Room for use by children who already have inhalers in school and have permission from their parent/carer for it to be administered.

St Francis School also has a defibrillator which is kept in the First Aid Room. This is checked regularly as per the DfE AED Guidelines for Schools 2016. (See St Francis AED Policy)

It is the responsibility of Mrs Gabby Clark (School Administrator) to check the contents of all kits every term and re-stock as necessary (each kit has a dated label to record this happening). TA's have the responsibility for checking their own kit is up to date and complete.

The First Aid room behind the school Reception desk is the designated area for looking after sick people and the administration of First Aid.

All staff must ensure that they have read the school's First Aid Policy.

FIRST AID TRAINING

Mrs Clark is responsible for ensuring that there is an adequate number of qualified First Aiders/Appointed Persons. All staff will be annually trained in the use and administration of Epipens by the School Nurse.

QUALIFIED STAFF – staff appointed to deal with first aid injuries.

Appointed Persons from the support staff hold certificates in *Combined Paediatric First Aid* which are valid for 3 years. The list of these staff is displayed in the First Aid Room.

Paediatric First Aid and Early Years First Aid: The list of trained staff is displayed in the First Aid Room.

First Aid at Work: Mrs Gabby Clark and Celia Shore (Senior First Aider).

ADMINISTRATION OF MEDICINES

When a child joins the school the parents are informed of procedures that must be followed if a child requires medication in school time. The school does not encourage medication to be administered during school time unless it is absolutely necessary and staff give medication on a voluntary basis only.

Advice from the School Nursing Service encourages parents to ask for medication from their GP which can be taken around the school day. If this cannot be done and it is essential that a child has to have medicine in school, the following applies:

- If the medication forms part of a Health Care Plan, it must be outlined in that plan and risk assessed and signed off by the School Nursing Service and Headteacher.
- Medication must be clearly labelled.

- Parents must complete the medication form authorising the school to administer medicine. This can be obtained from the Office. Any medication will be stored in the First Aid Room cupboard or in the First Aid fridge if necessary.
- The medication form is then completed by the member of staff responsible for administering the medicine each time medicine is given.
- Medicines should not remain in school outside the school day unless previously arranged with staff.
- If a child has an inhaler, this will be kept in the child's classroom and administered when necessary by the class teacher or teaching assistant.

INCIDENT REPORTING

Injuries deemed to be minor can be dealt with by any member of staff. More significant injuries will be referred to a First Aid Appointed Person and the injury details recorded on the School Injury Record for Treatment form. The School Injury Treatment Folder is located in the First Aid room.

Parents/carers will be contacted if any injury requires more action than that detailed on the injury report form.

The school office or a class teacher will contact the parents if they have any concerns about the injury, or need to send a child home through illness.

All injuries recorded on an Injury Record for Treatment form must be completed by the person administering First Aid. It is recommended that these records are kept for 3 years.

If the nature of the accident involves contacting Reporting of Injuries, Diseases & Dangerous Occurrences Regulations 2003 (RIDDOR) Mrs Clark will make the contact.

HEAD INJURIES

Accidents involving a pupil's head can be problematic because the injury may not be evident (e.g. internal) and the effects only become noticeable after a period of time. All head injuries should be monitored closely and an injury report form should be completed and given to the child.

It is the school's policy for a member of staff to use their discretion in deciding whether a 'phone call to parents/carers is required. The accident should be recorded and, if it is felt appropriate, a call will be made. All staff are encouraged to seek advice from one of the school's trained First Aiders. This policy extends to all injuries that have come about in school or on a trip.

Any serious head injury should always be referred for hospital treatment in accordance with Emergency Arrangements.

EMERGENCY ARRANGEMENTS

Where the injury is an emergency, an ambulance will be called following which the parents/carers will be contacted.

Where hospital treatment is required but it is not an emergency, then the school office staff will contact the parents for them to take over the responsibility of the child.

In the event that the parents cannot be contacted, a member of staff will accompany the child to hospital and remain with them until the parents can be contacted.

In the absence of the office staff, Deputy Headteacher or Headteacher, members of staff must always call an ambulance on the following occasions:-

- In the event of a serious injury
- In the event of any significant head injury
- In the event of a period of unconsciousness
- Whenever there is the possibility of a fracture or where this is suspected

HYGIENE/INFECTION CONTROL

The Head Teacher has overall responsibility for compliance with COSHH (Control of Substances Hazardous to Health Regulations) to prevent ill health and to ensure that assessments have been carried out for substances hazardous to health within the school. A central register of the substances will be created and passed to the emergency services as necessary.

Hands must be washed before and after giving First Aid.

Single-use disposable gloves must be worn when treatment involves blood or other body fluids.

Any soiled dressings etc. must be put in a plastic bag and disposed of carefully and safely. Any body fluids on the floor should have absorbent granules sprinkled on to them, then swept up with a designated dustpan and brush. This waste must be disposed of safely and cleanly and immediately put in an outside bin. Body fluid spillages on hard surfaces should be cleaned up with an anti-bacterial agent. Exposed cuts and abrasions should always be covered.

Infectious Diseases

The First Aid Room has a display and folder which hold details regarding infectious diseases and the appropriate exclusion period in each instance.

Acute Allergic Reactions – Anaphylaxis

All office staff and teaching assistants have had a training session with the School Nurse regarding the use of the Epi-pen which is updated each year. A care plan is set-up for the children who require Epi-pens. Each child has a photo on the First Aid Room wall and also the First Aid Station in the playground for easy recognition. Care Plans are placed in the Care Plan folder in the First Aid Room. Epi-pens are stored in the First Aid Room cupboard in orange bags with the child's name on.

Pupils with medical conditions

A list is available in the First Aid Room and the First Aid station in the playground of all pupils with a serious allergy or medical condition (such as asthma, epilepsy, diabetes). All TA's have a copy to put in their First Aid bags. And a copy is also given to the Kitchen and Food Technology room. A booklet of specific 'Children's Needs' is available to staff only in each class and the first aid room.

(See also St Francis 'Supporting Pupils with Medical Conditions/Needs' Policy).

Inhalers

Children have access to their inhalers kept in their classrooms in sealed, named bags.

Head Lice

Staff do not touch children and examine them for head lice. If we suspect a child has head lice we will inform parents and ask them to examine their child. When we are informed of a case of head lice in school, we send a standard letter to the class where the case has been identified.

Vomiting and diarrhoea

If a child vomits or has diarrhoea in school, they will be sent home immediately. Children with these conditions will not be accepted back into school until 48 hours after the last symptom has elapsed.

SHARING OF INFORMATION

At the start of the academic year, Mrs Clark will update the medical notice board in the First Aid room and give relevant members of staff a list of pupils who are known to have medical problems. This will be reviewed at each change of circumstances. This will also be done after consultation with the School Nurse regarding Health Care Plans.

The school office holds medical consent forms for out of school visits that are readily available to staff responsible for school outings.