



# St James Infant & Pre-School

## First Aid and Medicines Policy

**Statutory** / Non-statutory

**Annual review** / 2 yearly review

Date policy adopted				
Review date	Autumn 1 2019			
Reviewer's name	GG			
Date minuted by committee meeting				
Next review due by	Autumn 1 2020			



## First Aid and Medicines Policy

**Introduction:** St. James Infant School undertakes to ensure compliance with the relevant legislation with regard to the provision of first aid for all employees and ensures best practise by extending the arrangements as far as is reasonably practicable to children and others who may also be affected by our activities. Responsibility for first aid at St. James Infants is held by the Headteacher. All first aid provision is arranged and managed in accordance with the DfE Guidance on First Aid for Schools (Appendix 5). All staff have a statutory obligation to follow and co-operate with the requirements of this policy. All our information and guidance concerning First Aid, including accident records and forms, are kept in the cupboard in the office until such time they are archived.

### Aims and objectives:

- Carrying out a First Aid Assessment to determine the first aid provision requirements for our school.
- It is our policy to ensure that the First Aid Procedures will be reviewed periodically or following any significant changes that may affect first aid provision.
- The DfE Guidance on First Aid for schools is used to produce the First Aid Procedures for our school.
- Ensuring that there are a sufficient number of trained first aid staff on duty and available for the numbers and risks on the premises in accordance with the First Aid Procedures.
- Ensuring that there are suitable and sufficient facilities and equipment available to administer first aid in accordance with the First Aid Procedures.
- Ensuring the above provisions are clear and shared with all staff.

### Other associated policies and documents:

DfE - Guidance for First Aid in Schools    Medical Conditions Policy    Positive Handling Policy  
Intimate Care Policy    Educational Visits Policy    Safeguarding and Child Protection Policy  
Health and Safety Policy

### Responsibilities:

**Local Academy Committee:** The Academy Committee are required to carry out a risk assessment which is then used to inform this policy. The Academy Committee then should ensure that the First Aid policy and procedures produced by the school, are in line with the risk assessment.

**Headteacher:** The Headteacher, Mrs Gynn, will ensure that appropriate numbers of first aid trained staff and paediatric first aid trained staff are nominated, as identified by completion of the First Aid Risk Assessment, and that they are adequately trained to meet their statutory duties. The Headteacher is responsible for putting the Academy Committee's policy into practice and for developing detailed procedures. The Headteacher should also make sure that parents are aware of the school's First Aid policy, including arrangements for first aid.

**The Academy Committee and Headteacher** should regularly review the school's first-aid needs (at least annually), and particularly after any changes, to ensure the provision is adequate.

**Parents/carers:** Parents/carers have prime responsibility for their child's health and should provide schools with information about their child's medical conditions prior to starting school, and if the child's medical needs change.

**School nurse:** If required, the school nurse can provide additional background information and practical training for school staff.

**Staff:** Teachers and other staff in charge of pupils are expected to use their best endeavours at all times, particularly in emergencies, to secure the welfare of the pupils at the school in the same way that parents might be expected to act towards their children. The Headteacher must arrange adequate and appropriate training and guidance for staff who volunteer to be first aiders. The Headteacher must ensure that there are enough trained staff to meet the statutory requirements and assessed needs, allowing for staff on annual/sick leave or off-site.

### **Training:**

A first aider must hold a valid certificate of competence, issued by an organisation whose training and qualifications are approved by the HSE. First aid at work certificates are only valid for three years. Headteachers should arrange refresher training and retesting of competence before certificates expire. If a certificate expires, the individual will have to undertake another full course of training to become a first aider. However, employers can arrange for first aiders to attend a refresher course up to three months before the expiry date of their certificate. Schools should keep a record of first aiders and certification dates. Training records are written after any courses or training has been completed.

**Appointed persons:** Mrs Gynn

**Paediatric trained:** Mrs Karus, Miss Cooney, Mrs Davies, Mrs Gynn, Mrs Cox

**First Aid trained:** Mr Morris, Mrs Dixon

### **Equipment:**

The assessment of a school's first-aid needs should include the number of first-aid containers. All first-aid containers are marked with a white cross on a green background.

The school's first-aid procedures should identify a named person who is responsible for examining the contents of first-aid containers. These should be checked frequently and restocked as soon as possible after use. Items should be discarded safely after the expiry date has passed.

Our First Aid Risk Assessment has identified the following first aid kit requirements:  
8 first aid kits on the premises

These first aid kits are situated in:

- Each Classroom
- School Office
- First Aid Area

All First Aid kits will be checked monthly and a record will be kept.

The contents of first aid kits in First Aid Area and Office are:

- Guidance book
- Burn dressings, washproof plasters, eye dressings, foil blanket, large dressing, medium dressing, gloves, face shield, finger dressings, conforming bandages, microporous tape, cleansing wipes, safety pins, triangular bandage, small shears and cling film.



## First Aid Procedures

In the event of an accident, a paediatric first aider, first aider or appointed person takes charge of the first aid emergency treatment in line with their training, and use the following advice:

- *If a child has a small cut:*

Always put on a plaster, even with a graze. This will prevent cross-contamination. The only time when plaster should not be put on is when the cut is under clothing.

Use cool, clean, running water to clean a graze or cut.

Always wear gloves for everything even if the injury is not bleeding.

When using a cold compress, wrap the injury in a bandage or fabric to hold it in place. Don't ask the child to hold it.

- *If a child has something in their eye:*

Always ask them to tip their head to the side of the injured eye and run cold water into it.

- *If a child has a nose bleed:*

3 cycles of 10 minutes, put the head forward with pressure applied to the top of the nose. If the bleeding continues, seek help.

- *If a child has something up their nose:*

do not ask the child to blow their nose. Ask parents to take the child to the doctors.

- *If a child has had a bump to the head:*

a cold compress is not essential, unless it is swollen. Instead, monitoring is the most important thing. Parents must be notified by letter, and if necessary, verbally, using *Appendix 1*.

## **Notifying parents/carers of an accident**

If a child has had a bump to the head, a letter will be sent home asking the adult to continue monitoring the child for the next 24 hours. *Appendix 1*

If a child has had another injury, a slip will be sent home informing the adult of the injury. *Appendix 2*

**Following an assessment of the injured person, the first aider is to administer appropriate first aid and make a balanced judgement as to whether there is a requirement to call an ambulance.**

**If unsure at any time, the first aider will call NHS direct 111 for further advice or dial 999.**

The first aider will 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 a possibility of a fracture or where this is suspected, whenever the first aider is unsure of the severity of the injury.*

If an ambulance is called, the caller must speak to the emergency services and the following information will be required

1. State what happened
2. The child's name
3. The age of the child
4. Whether the casualty is breathing and/or unconscious
5. The location of the school

## **Notification of parents/carers when a hospital visit is needed:**

Our procedure for notifying parents will be to use all telephone numbers available to contact them and leave a message should the parents not be contactable.

In the event that parents cannot be contacted and a message has been left our policy will be to continue to attempt to make contact with the parents every half hour. In the interim, we will ensure that the qualified first aider, appointed person or another member of staff remains with the child until the parents can be contacted and arrive (as required).

In the event that the child requires hospital treatment and the parents cannot be contacted prior to attendance, the qualified first aider/appointed person /another member of staff will accompany the child to hospital and remain with them until the parents can be contacted and arrive at the hospital.

## **First Aid out of school on trips or residential visits:**

On a school trip, the class teacher, of any child who requires an inhaler, epi-pen, or prescribed medicine, is responsible for taking the medication and attached forms, for that child.

In the event of children needing first aid on school trips:

- All staff have first aid packs and mobile phones with them.
- The first aider deals with minor injury.
- For major injuries the school is informed and Major Incident Procedures followed. Parents/carers are also informed by the school office or teacher in charge of trip.
- Gloves are ALWAYS worn when treating injuries.
- Any accident or incident is reported back at school and an 'incident in school' form filled in as soon as possible. A note on the incident is made at the scene.
- For serious head injuries the school and the parents are informed immediately by telephone.
- If children are sent home, they must be collected by a responsible adult.
- In the event of a serious incident an ambulance is ALWAYS called.
- A member of staff accompanies the child in the ambulance, whilst the school contacts the parent/carer and arranges for them to meet the child and staff at the hospital.
- In the event of parents being unreachable, all phone numbers on emergency contact form will be called.

- First Aid should only be carried out by qualified First Aiders.
- All First Aid must be logged for Medical Records.

### **Pupils with Special Medical Needs / Long Term Medical Needs:**

Some pupils have medical conditions that, if not properly managed, could limit their access to education. These children may be:

- Epileptic • Asthmatic • Have severe allergies, which may result in anaphylactic shock • Diabetic

Most children with medical needs are able to attend school regularly and, with support from the school, can take part in most school activities. A copy of *Children on Long Term Medication and Pupil Medical Conditions* are kept in each classroom, Spencers, the log cabin, Falcons room, the gym, the first aid area, the office and staffroom and are updated as needed or annually. This document helps our school to identify the necessary safety measures to support pupils with medical needs and ensure that they are not put at risk.

### **Asthma and Inhalers**

All children who have asthma have a specific 'Medical Information Card' which is kept with their medication, and a copy is kept in the office medicine cabinet.

Children who may have need for use of an inhaler will be identified in the *Children on Long Term Medication* booklet. Parents must complete *Asthma Information (Appendix 7)* which is to be signed and dated, with details of the name of the medication, dosage and frequency. This must be completed before an inhaler can be used in school. Children who have need for an inhaler should always have their inhaler at school. They are stored in the classrooms in a marked box/container.

It is the teacher's or teaching assistants responsibility to ensure they have each child's inhaler with them before they leave the premises for a local visit, trip or worship. When a child has used their inhaler in school, a *Confirmation to Parent/Carer of Inhaler Use in School* form must be filled out and given to the parents (*Appendix 3*).

School now have their own emergency inhaler and spacer which is kept in the locked office medication cabinet.

### **Auto injectors (epi-pen)**

All children who require an epi-pen have a specific 'Medical Information Card' which is kept with their medication, and a copy is kept in the office medicine cabinet.

Children who may have need for use of an auto injector will be identified in the *Children on Long Term Medication* booklet. This will also include the action required in the event of an emergency. Please see risk assessment for individual pupils who may require use of an auto injector.

### **Administering Medicines in school:**

If the child's GP prescribes medicine, the parents should enquire if the medicine can be administered to the child outside school hours. If not, a medication form must be completed and signed by the parent giving consent, stating dose and frequency, together with a photo of the child. These forms will be filed in the medicine cabinet in the office.

Non - prescription (over-the-counter) medication does not need a GP signature/authorisation in order for a school, nursery or child minder to give it. This is reflected in the [DfE Statutory Framework for the Early Years Foundation Stage guidance](#) and the [DfE Supporting Pupils at School with Medical Conditions guidance](#). The only circumstances that warrant non-prescription medicine being given to a child are:

- a) If a child has an injury that causes considerable pain, whilst at school. A telephone call will be made to parents advising them to collect the child, at the same time, they will be informed that a dose of a pain killer (Calpol) will be given. This will be stored in school in the medicine cabinet in the office.
- b) Parents complete a medication form, stating clearly the dose and the duration that the medicine is required for. Medicines should only be administered at school when it would be detrimental to a child's health or school attendance not to do so. Staff should check that the medicine has been administered without adverse effect in the past and that parents have certified this is the case - a note to this effect should be recorded in the written parenteral agreement for the school/setting to administer medicine.
- c) School should only accept medicines that are in-date, provided in the original container and include instructions for administration, dosage and storage.

*Adults who administer medicine: Mrs Gynn, Mrs Karus, Mrs Griffiths and Miss Cooney  
Adult who administer medicine in Bramble's Club: Laura Fuller*

The following protocol will be followed:

1. A *Pupil Medication Request Form (Appendix 8)* must be completed and signed by the parent giving consent, stating dose and frequency, together with a photo of the child.
2. It must be clear that the medicine is prescribed by a doctor. It must have a label on it with the name of the medicine, the child's name and the date of expiry.
3. Medicine should be in the original packaging, with instructions for dose and time of administration on the label.
4. Medicine must be kept in the medicine cabinet in the office or staff fridge.
5. When administering medicine, details are recorded in the medicine record book and signed by the person administering the medicine.
6. A second person must be present and sign the medicine record book form when the medicine is given to the child for validation of the action.
7. If the medicine is shown to be out of date the parent will be notified to replace it.

#### **Administering medicines on residential trips:**

- No medication may be given to a child unless prescribed by a doctor, signed and dated.
- A *Pupil Medication Request Form (Appendix 8)* must be completed and signed by the parent giving consent, stating dose and frequency, together with a photo of the child.
- An administration of medicine form must be signed and dated by the first aider in charge.
- NO other medication MUST be given by anyone.

#### **Storage/Disposal of Medicines**

Any medication that needs to be in school is stored as per storage instructions. The exception to this rule is inhalers, which must be clearly labelled with their name and kept in the child's classroom; where they can be easily reached where necessary. It is the responsibility of the parents to regularly check dates of prescribed medicines and collect unused medicines from school and dispose of them accordingly.

#### **Records and reporting**

All accidents requiring first aid treatment such as simple grazes or very minor injuries are to be recorded in the accident book located in the first aid points with (at least) the following information:

- Name of injured person

- Age of person
- Name of the qualified first aider/appointed person who attended the child
- Date and time of the accident
- Type of accident
- Treatment provided and action taken
- Location of accident

*Appendix 4*

#### **On-line reporting**

Occasionally, when a serious accident has occurred, this will need to be reported online to Northamptonshire County Council. Any incidents reported online are reported to the Governing Body.

#### **Reporting to Governors**

The *Template for Reporting Accidents to the Governing Body* must be completed and shared at Governors Body meetings. *Appendix 6*

#### **Adult/Employee Accidents**

All accidents requiring first aid treatment (other than simple grazes or very minor injuries) are to be recorded by completing the LA Health and Safety Teams on line reporting system. All accidents must be reported to the Headteacher and if appropriate it will be referred to Northamptonshire County Council Health and Safety Department.

**Updated September 2019**