

St. Chad's Catholic Primary School



Grow in Love. Live in Peace

Title: First Aid & Medicine Policy - 2023

(Annual)

This policy is to be read in conjunction with the following policies:

Author: Senior Leadership Team (SLT)

Committee: Teaching & Learning

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Chair of Board of Directors Yvonne Ndifor

St Chad's Catholic Primary School

Safeguarding Statement

This school takes notice of and adheres to all the national and local policies and guidance in regard to Safeguarding Children and Young People.

Lead Safeguarding Persons: DSL Mrs P Mitchener and DDSL Mrs J Mooney

Director Designated Safeguarding Officer: Abiola Boateng

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This policy;

- Gives clear structures and guidelines to all staff regarding all areas of first aid
- Clearly defines the responsibilities of the staff
- Enables staff to see where their responsibilities end
- Ensures good first aid cover is available in the school and on visits.
- Is regularly reviewed and updated.
- Has safety as its priority for the children and adults receiving first aid and safety for the adults who administer first aid.

1. The aims of our first aid policy are to:

- Ensure the health and safety of all staff, pupils and visitors
- Ensure that staff and governors are aware of their responsibilities with regards to health and safety
- Provide a framework for responding to an incident and recording and reporting the outcomes
- To report, record and where appropriate investigate all accidents.
- Records all occasions when first aid is administered to employees, pupils and visitors.
- Provide equipment and materials to carry out first aid treatment.
- Make arrangements to provide training to employees, maintain a record of that training and review annually.
- Establish a procedure for managing accidents in school which require First Aid treatment.

2. Legislation and guidance

This policy is based on advice from the Department for Education on first aid in schools and health and safety in schools, and the following legislation:

- The Health and Safety (First Aid) Regulations 1981, which state that employers must provide adequate and appropriate equipment and facilities to enable first aid to be administered to employees, and qualified first aid personnel
- The Management of Health and Safety at Work Regulations 1992, which require employers to make an assessment of the risks to the health and safety of their employees
- The Management of Health and Safety at Work Regulations 1999, which require employers to carry out risk assessments, make arrangements to implement necessary measures, and arrange for appropriate information and training
- The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013, which state that some accidents must be reported to the Health and Safety Executive (HSE), and set out the timeframe for this and how long records of such accidents must be kept
- Social Security (Claims and Payments) Regulations 1979, which set out rules on the retention of accident records
- The Education (Independent School Standards) Regulations 2014, which require that suitable space is provided to cater for the medical and therapy needs of pupils First Aid

3.1 Roles and Responsibilities

Appointed person(s)

The school's appointed persons are Fiona Robinson, Kara Christie and Jenny Mooney

They are responsible for:

- Ensuring there is an adequate supply of medical materials in first aid kits, and replenishing the contents of these kits
- Ensuring that an ambulance or other professional medical help is summoned when appropriate
- Training is current and booked in advance of expiration
- A list of all First Aid trained staff are kept up to date and displayed prominently around the school

First aiders are trained and qualified to carry out the role and are responsible for:

- Acting as first responders to any incidents; they will assess the situation where there is an injured or ill person, and provide immediate and appropriate treatment
- Sending pupils home to recover, where necessary
- Filling in an accident report on the same day, or as soon as is reasonably practicable, after an incident
- Inform the school office, if a phone call home is required for a bumped head

When a child is poorly or has suffered a major accident in school or on the playground there is a protocol the staff should follow:

- A trained first aider must be notified and consulted
- The incident is logged in the accident book
- If there is any doubt of the child's medical condition a parent is contacted and medical guidance sought.

3.2 The Directors

The Directors have ultimate responsibility for health and safety matters in the school, delegates operational matters and day-to-day tasks to the Head of School and staff members. The Health and Safety governor is **XXX**.

3.3 The Head Teacher

The Head teacher is responsible for the implementation of this policy, including:

- Ensuring that an appropriate number of appointed persons and/or trained first aid personnel are present in the school at all times
- Ensuring that first aiders have an appropriate qualification, keep training up to date and remain competent to perform their role
- Ensuring all staff are aware of first aid procedures
- Ensuring appropriate risk assessments are completed and appropriate measures are put in place
- Undertaking, or ensuring that managers undertake, risk assessments, as appropriate, and that appropriate measures are put in place
- Ensuring that adequate space is available for catering to the medical needs of pupils
- Reporting specified incidents to the HSE when necessary

3.4 Staff

School staff are responsible for:

- Ensuring they follow first aid procedures
- Ensuring they know who the first aiders in school are
- Informing the relevant staff of any specific health conditions or first aid needs

First aid procedures

4.1 First Aid In-school procedures

In the event of an accident resulting in injury:

- The closest member of staff present will assess the seriousness of the injury and seek the assistance of a qualified first aider, if appropriate, who will provide the required first aid treatment
- The first aider, if called, will assess the injury and decide if further assistance is needed from a colleague or the emergency services. They will remain on scene until help arrives
- The first aider will also decide whether the injured person should be moved or placed in a recovery position
- For a head injury where treatment may be required, parents are to be informed immediately (and asked to collect the child where appropriate).
- If the first aider judges that a pupil is too unwell to remain in school, parents will be contacted and asked to collect their child.
- If emergency services are called, a member of senior management will contact parents immediately
- The first aider/relevant member of staff will complete an accident report form the same day or as soon as is reasonably practical after an incident resulting in an injury

4.2 Off-site procedures

When taking pupils off the school premises, staff will ensure they always have access to the following:

- A mobile phone
- A portable first aid kit
- Information about the specific medical needs of pupils
- Parents' contact details (via school)

Risk assessments will be completed by class teacher prior to any educational visit that necessitates taking pupils off school premises.

There will always be at least one first aider on school trips and visits.

5. First Aid Equipment

A typical first aid kit in our school will include the following:

- Regular and large bandages
- Eye pad bandages
- Triangular bandages
- Adhesive tape

- Safety pins
- Disposable gloves
- Antiseptic wipes
- Plasters of assorted sizes
- Scissors
- Cold compresses
- Burns dressings

No medication is kept in first aid kits

Automated external defibrillators (AEDs)

The school has purchased an AED which is available in the 1s aid room.

<https://www.gov.uk/government/publications/automated-external-defibrillators-aedsin-schools>

6. Record-keeping and reporting

The school uses a 1st aid and accident record book

6.1 First aid and accident record book

- An accident report will be completed by the relevant member of staff on the same day or as soon as possible after an incident resulting in an injury. A copy will be retained and one sent home to parents.
- Records held in the first aid and accident book will be retained by the school for a minimum of 3 years, in accordance with regulation 25 of the Social Security (Claims and Payments) Regulations 1979, and then securely disposed of.

6.2 Reporting to the HSE

The school will keep a record of any accident which results in a reportable injury, disease, or dangerous occurrence as defined in the RIDDOR 2013 legislation (regulations 4, 5, 6 and 7). These will be reported these to the Health and Safety Executive as soon as is reasonably practicable and in any event within 10 days of the incident.

Reportable injuries, diseases or dangerous occurrences include:

- Death
- Specified injuries, which are:

- Fractures, other than to fingers, thumbs and toes
- Amputations
- Any injury likely to lead to permanent loss of sight or reduction in sight
- Any crush injury to the head or torso causing damage to the brain or internal organs
- Serious burns (including scalding)
- Any scalping requiring hospital treatment
- Any loss of consciousness caused by head injury or asphyxia
- Any other injury arising from working in an enclosed space which leads to hypothermia or heat-induced illness, or requires resuscitation or admittance to hospital for more than 24 hours
- Injuries where an employee is away from work or unable to perform their normal work duties for more than 7 consecutive days (not including the day of the incident)
- Where an accident leads to someone being taken to hospital
- Near-miss events that do not result in an injury, but could have done. Examples of near-miss events relevant to schools include, but are not limited to:
 - The collapse or failure of load-bearing parts of lifts and lifting equipment
 - The accidental release of a biological agent likely to cause severe human illness
 - The accidental release or escape of any substance that may cause a serious injury or damage to health
 - An electrical short circuit or overload causing a fire or explosion

7. Training

All Teaching Assistants and some admin staff are 1st aid trained.

All first aiders must have completed a training course, and must hold a valid certificate of competence to show this. The school will keep a register of all trained first aiders, what training they have received and when this is valid until.

At all times, there will be at least 1 staff member on site with a current paediatric first aid (PFA) certificate which meets the requirements and is updated at least every 3 years.

8. Administering Medication

8.1 Non-Prescribed Medicines

Over the counter medicines / painkillers / non-prescription drugs will be administered by nominated First Aid trained staff, with written permission from the parents and agreement of the member of staff.

8.2 Prescribed medicines

With prescribed medication, parents/carers should endeavour to time doses to be administered at home, or arrange to come into school to administer the medicines themselves. In exceptional cases, where more than three doses are required in 24 hours, medicines may be administered by a member of the first aid staff only. This dose will always be administered between 12pm - 1pm only (during lunch time).

- Children should never be allowed to be responsible for their own medicines in school, except in special circumstances.
- If prescribed medication is required during school hours and no alternative arrangements can be made, it must be handed to the school office, where it will be organised for the child to receive their prescribed dose.
- Our school medical form needs to accompany the medication. This should state the child's name, class and name of medication as well as the time and dose of the medication and dose.
- Medication will be accepted each day which should be in its original bottle with spoon or syringe for administration, clearly marked with the child's name, class and name of medication.
- School will not accept the responsibility of administering the first prescribed dosage.
- It is not wise to have two different medications for one child to be administered at the same time.
- The class teacher and first aid staff must be kept informed at all times.

Administration of medicines will only be undertaken by a nominated first aider, who is in agreement to do so.

If these staff members are not available, the parent/carer will be informed to enable them to make their own arrangements. Teachers and staff conditions of employment do not include giving or supervising a pupil taking medicines. Agreement to do so must be voluntary. If in doubt about a procedure, staff should not administer the medicine, but check with the parents or the health professional before taking further action.

Epipen

Epipens are stored in the medicine draw (in the First Aid room) in clear plastic boxes with the name of the child on the outside and the care plan enclosed. Children are required to have 1 epipen in school.

Parents/carers have the responsibility of checking whether the medication is in date, however this will also be checked annually by school staff when the children change class and expiry dates recorded.

A register of pupils who have been prescribed an epipen is kept in the school office as well as given to all teachers to place somewhere visible in their classrooms.

All staff have training in the recognition and management of an allergic reaction/anaphylaxis.

Asthma pumps

Children with asthma should have easy access to their inhaler, which must be clearly marked with their name, inhalers must be in school with their specific spacer. Inhalers for children are kept in a clearly marked box in their classroom's first aid box. If the child requires Ventolin intervention a member of the first aid team will administer the dose. **This will be recorded in our central book and parents will be informed through text message of the dose and time given.**

The only inhaler a child should have at school is their blue inhaler, which is the relief inhaler. Other inhalers are preventative and should be taken in the morning and the afternoon at home.

The school holds two spare blue inhaler in case of emergency.

9. Managing medicines on trips and outings

When arranging a school trip, staff carry out a risk assessment that includes children with medical needs. Where it is necessary to take medication, this is noted. Staff supervising should always be aware of any medical needs and relevant emergency procedures.

Children with medical needs will be encouraged to take part in residential visits. The visit leader will carry out a specific and additional risk assessment. Where children without care plans have been prescribed medication parents should include these details in the form provided for school journeys and complete a school medical form. Medication must be in the original packaging.

A named member of staff will take responsibility for medication, ensuring that it is stored securely during the time away, that it is administered according to the information provided by the parent and that a record is kept every time the medication is administered. (As per medicine administration during a school day).

9.1 Long term medical needs

Where there are long term medical needs for a child, including administration of medicine for a period of 8 days or more, a Health Care Plan should be completed, involving both parents/carers and relevant health professionals.

A Health Care Plan clarifies for staff, parents/carers and the child the help that can be provided. It is important for staff to be guided by the school nurse or the child's GP or paediatrician. The school will agree with parents how often they should jointly review the health care plan. It is sensible to do this at least once a year, but much depends on the nature of the child's particular needs; some would need reviewing more frequently.

Procedures for managing prescription medicines on trips and outings and during sporting activities

The school will consider what reasonable adjustments might be made to enable children with medical needs to participate fully and safely on visits. This may extend to reviewing and revising the visits policy and procedures so that planning arrangements incorporate the necessary steps to include children with medical needs. It might also incorporate risk assessments for such children. If staff are concerned about how they can best provide for a child's safety, or the safety of other children on a visit, they should seek parental views and medical advice from the school health service or the child's GP. Please refer to the DCSF guidance on planning educational visits.

The school will support children wherever possible in participating in physical activities and extracurricular sport. Any restriction on a child's ability to participate in PE should be recorded on their Health Care Plan. Some children may need to take precautionary measures before or during exercise, and may need access, for example, to asthma inhalers. Staff supervising sporting activities will be made aware of relevant medical conditions, and will consider the need for a risk assessment to be made.

10. Safe storage of medicines

The school will only store, supervise and administer medicine that has been prescribed for an individual child. Medicines will be stored strictly in accordance with product instructions - paying particular note to temperature and in the single dosage container provided by the parent/carer. Children will be informed where their own medicines are stored.

All emergency asthma inhalers, will be readily available to children, in the medicine draws in the First Aid Room.

A few medicines need to be refrigerated. They can be kept in a refrigerator containing food but must be in an airtight container and clearly labelled. There will be restricted access to a refrigerator holding medicines.

11. School Procedures

The school office (Fiona Richardson) should always be the first point of contact for any changes to medicines or new administration of medicines or medical needs. Other staff will not accept medicines from parents or children and parents/carers will be directed to the school office.

It is the responsibility of the Headteacher to ensure that staff are provided with training appropriate to administering medication.

The school will consult the DCSF publication 'Managing medicines in Schools and Early Years Settings' when dealing with the medical needs of children. The school nurse should also be consulted if advice is not clear and prior to agreeing to administer medicines.

12. Links with other policies

This first aid policy is linked to the

- Health and safety policy
- Supporting Pupils with Medical Conditions Policy (Medical needs Policy)

This policy is subject to review annually.