



Roebuck Academy

First Aid Policy 2024

Rationale

Children and adults in our care need good quality first aid provision. Clear and agreed systems should ensure that all children are given the same care and understanding in our school. This care should extend to emergency first aid provision, the administration of medicines and dealing with Asthma and head lice.

Purpose

This policy;

- Gives clear structures and guidelines to all staff regarding all areas of first aid and medicines
- Clearly defines the responsibilities and the staff
- Enables staff to see where their responsibilities end
- Ensures the safe use and storage of medicines in the school
- Ensures the safe administration of medicines in the school
- Ensures good first aid cover is available in the school and on visits

Guidelines

This policy has safety as it's priority, safety for the children and adults receiving first aid or medicines and safety for the adults who administer first aid or medicines. It is given to all new staff to the school as part of their induction pack. The policy is regularly reviewed and updated.

The administration and organisation of first aid and medicines provision is taken very seriously at Roebuck Academy. There are annual procedures that check on the safety and systems that are in place in this policy. The school also discusses its first aid and medicines procedures with the school nurse each year. Adjustments are made immediately if necessary

First aid in school

Training:

The school has assessed the need for first aid provision and identified the following staff to provide first aid (both on site and where required for trips/visits and extra-curricular activities).

TRAINED TO FIRST AID AT WORK LEVEL (3 days /18 hrs):

Deputy Headteacher- May 2024

TRAINED TO EYFS STANDARD (PAEDIATRIC FIRST AID, 2 days/ 12 hrs):

RM, MH, JB, JA, HH, AB, CC, LB, LD, MP

TRAINED TO EMERGENCY FIRST AID AT WORK (1 day / 6 hrs):

All staff receive annual first aid training- September 2022, January 2024

First aid qualifications remain valid for 3 years. Krista Toal will ensure that refresher training is organised to maintain competence and that new persons are trained should first aiders leave.

Additional adults are trained in diabetes care and to administer Buccalcom for any children who have epilepsy. These children have individual health care plans and the adults are named on these.

First aid kits

Lunchtime Assistants are issued with their own first aid kit and carry this with them at lunchtime. First aid kits are stored in the staffroom and the Nursery, Key Stage 1 and Key Stage 2 areas in a safe space that is not accessible by pupils. They must not be left unsupervised. All classes have an emergency first aid kit that the teacher keeps in a convenient and secure place. They are clearly labelled in accessible cupboards inside each classroom. These are checked and restocked at the beginning of each term by a member of SLT.

An AEDs (automated external defibrillators) is LOCATED IN THE FIRST AID ROOM.

Defibrillators are registered on The Circuit to ensure they are visible to local ambulance services.

Cuts

The nearest adult deals with small cuts. All open cuts should be covered after they have been cleaned. Children should always be asked if they can wear plasters BEFORE one is applied. Children who are allergic to plasters will be given an alternative dressing. Any first aider can treat more severe cuts, but a fully trained first aider must attend the patient to give advice. Cuts should be recorded in the accident file and parents informed.

ANYONE TREATING AN OPEN CUT SHOULD USE RUBBER GLOVES. All blood waste is disposed of in the Yellow bin (located in the Medical Room by the school office).

Bumped heads

Any bump to the head, no matter how minor is treated as serious. All bumped heads should be treated with an ice pack (DON'T PLACE ICE DIRECTLY ON THE SKIN). A 'Bumped Head' first aid slip must be given to any child who bumps their head. ALL bumped head incidents should be recorded in the accident book. If the first aider feels the child can remain at school: the child will be given a 'bumped head' wrist band to wear for the remainder of the day in order to inform all staff and parents/ Carers to keep an eye on the child. However, if the first aider feels the injury is more serious they can consult an SLT to member to decide if parents should be contacted. If the parent cannot be reached an additional contact must be made. The office staff will be responsible for making phone calls home to parents regarding a bumped head. Office staff will write a note on the top of the first aid slip of time phoned home and the parental response.

Accident file

All accident books are located in the medical room. Old files are archived in the school office. More serious injuries, requiring the attention of a first aider are recorded in the same file which is also kept in the school office. All records of first aid given must be passed to the child's class teacher, read for information and then either passed to parents or placed in the child's book bag.

In the event of a record being entered, it will be filed in date order. Every child has their own sheet. Records of different children must not be entered on the same sheet. For major accidents an online accident form needs to be completed on SOLERO within 24 hours of the accident. The Headteacher

needs to be informed of all accidents. This will include when a child or adult has to attend hospital due to an injury in school grounds.

Accidents to employees:

Employees must report all accidents, violent incidents and near misses.

All employee incidents must be reported to HCC using the online accident/incident reporting system hosted on Solero. More significant incidents as detailed below must also reported to HCC using the online accident reporting system hosted on Solero.

Major injuries.

- Accidents where significant first aid treatment has been provided.
 - Accidents which result in the injured person being taken from the scene of the accident directly to hospital.
 - Accidents arising from premises / equipment defects.
 - Parents / carers will be notified immediately of all major injuries.
 - Employee accident / incident forms are to be retained for a minimum of 3 years.
 - Pupil / student accident forms are to be retained for a minimum of 3 years after their 18th Birthday.
 - All major incidents will be reported to the Headteacher and the Governing Body. Accidents will be monitored for trends and a report made to the Governing Body as necessary.
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- The Headteacher/ Deputy Headteacher will investigate accidents and take remedial steps to avoid similar instances recurring. Faulty equipment, systems of work etc. must be reported and attended to as soon as possible. Any relevant learning points will be communicated to relevant staff and pupils / students.

Recording First Aid Treatment

When first aid is given, the person giving first aid must make an accurate record of:

- Date, time and place of incident.
- Name and job title (where relevant) of the injured person
- Details of the injury/illness and what first aid was given. This includes, where on the body the injury was sustained such as: Landed on high right elbow when running across the playground. No immediate swelling to the area. Cold compress applied and monitored. No visible marks or bruising.
- Name and signature of the person dealing with the incident.

All completed records of first aid treatment must be kept in a secure location to comply with the requirements of data protection legislation. Only blank copies of the form should be kept with first aid equipment.

Where necessary, an Incident form will need to be completed using the HCC's on-line reporting system

Calling the emergency services

In the case of a major accident, it is the decision of the fully trained first aider if the emergency services are to be called. Staff are expected to support and assist the trained first aider in their decision.

If a member of staff is asked to call the emergency services, they must:

1. State what has happened
2. Provide the child's name
3. Provide the age of the child and their date of birth
4. State whether the casualty is breathing and/or unconscious
5. Give the location of the school

In the event of the emergency services being called, a member of the Admin staff OR another member of staff, should wait by the school gate at the front of the school, St Margaret's, and guide the emergency vehicle into the school.

If the casualty is a child, their parents should be contacted immediately and given all the information required. If the casualty is an adult, their next of kin should be called immediately. All contact numbers for children and staff are clearly located in the school office.

Transport to hospital: Where a first aider considers it necessary, the injured person will be sent directly to hospital (normally by ambulance). Parents / carers will be notified immediately of all major injuries to pupils.

No casualty will be allowed to travel to hospital unaccompanied and an accompanying adult will be designated in situations where the parents/carers cannot be contacted in time.

Where there is any doubt about the appropriate course of action, the first aider will consult with the Health Service helpline (NHS Direct 111) and, in the case of pupil with the parents/carers.

Medicines in School

All medication will be administered to pupils in accordance with the DfE document Supporting pupils at school with medical conditions. Detailed arrangements are provided in a separate school policy. No member of staff will administer any medication (prescribed or non-prescribed) to children under 16 without a parent's written consent except in exceptional circumstances. This includes Calpol which the school keeps on site. No aspirin should be given to any child.

What can be administered?

The school is able to administer prescribed medication. Parents need to complete a 'Parental agreement for school to administer medicine' form setting out the details of the medication to be administered (see Supporting Pupils with Medical Conditions Policy).

Creams

In exceptional circumstances we may administer creams for skin conditions such as eczema if we have written authorisation from the child's parents/carers. HOWEVER, the cream has to be administered by the child.

Asthma and other medical problems

At the beginning of each academic year, any medical problems are shared with staff and a list of the children concerned and their conditions is kept in the class register. New photographs and signs are made of children with severe medical problems such as asthma.

These signs and notices are displayed,

- In a secure area in the classroom – there are signs in every classroom that indicate visibly where they are kept.
- In the school office
- In the school kitchen -
- In the staffroom

Epipens and anaphylaxis shock training

Some children require Epipens to treat the symptoms of anaphylaxis shock. Epipens are all kept safely in the children's classes. Staff receive regular training on the use of Epipens and anaphylaxis shock training. The school has an emergency Epipen located in the medical office.

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 has elapsed after the last symptom.

Chicken pox and other diseases, rashes

If a child is suspected of having chicken pox etc, we will look at their arms or legs. To look at a child's back or chest would only be done if we were concerned about infection to other children. In this case another adult would be present and we would ask the child's permission.

If a child has any of these infections they will need to stay off school for a prescribed period of time. The Headteacher or school office will advise the parent of the timescales.

Monitoring and review

- The effectiveness of this policy will be monitored by the Senior Leadership team.
- This policy will be reviewed every three years.

Individual Health Care Plans (IHCP)

Parents / carers are responsible for providing the school with up to date information regarding their child's health care needs and providing appropriate medication.

IHCPs are in place for those pupils with significant medical needs e.g., chronic or ongoing medical conditions such as diabetes, epilepsy, anaphylaxis etc.

The IHCP is developed with the pupil (where appropriate), parent/carer, designated named member of school staff, specialist nurse (where appropriate) and relevant healthcare services. These plans will be completed at the beginning of the school year / when child enrolls / on diagnosis being communicated to the school and will be reviewed annually by [Insert Name(s) / role]

All staff are made aware of any relevant health care needs and copies of health care plans are available in the staff room

Staff will receive appropriate training related to health conditions of pupils and the administration of medicines by a health professional as appropriate.