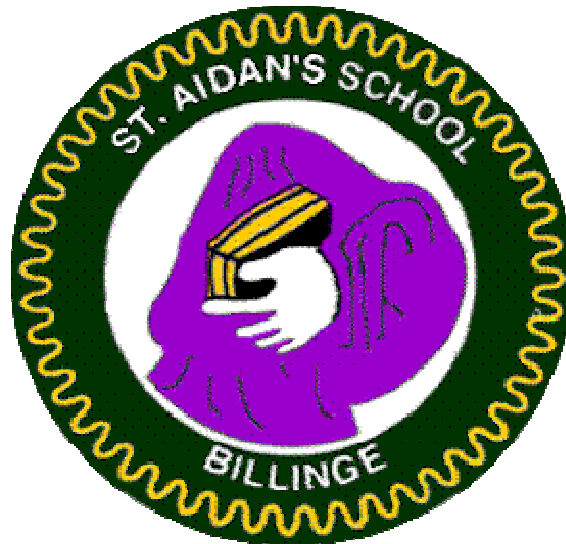


St Aidan's Primary School



First Aid Policy

*Including Medicines, Asthma, Other
medical conditions and Head lice*

Updated February 2014

First Aid Policy Statement

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 to dealing with Asthma and head lice.

Purpose

This policy;

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

Guidelines

New staff to the school are given a copy of this policy when they are appointed. This policy is regularly reviewed and updated. This policy has safety as its priority. Safety for the children and adults receiving first aid or medicines and safety for the adults who administer first aid or medicines.

Conclusion

The administration and organisation of first aid and medicines provision is taken very seriously at St Aidan's Primary School. There are annual procedures that check on the safety and systems that are in place in this policy. The school takes part in the Health and Safety checks by St Helens County Council - these happen throughout the year.

First Aid Policy Guidelines

First aid in school

Training

All staff are offered emergency first aid training. The support staff and Midday Supervisors attend internal and external first aid courses in accordance with health and safety regulations and Ofsted requirements. At present we have two First Aid at Work, trained personnel and five paediatric trained first aiders as well as many other support staff trained in Emergency and Basic first aid skills. With this many fully trained first aiders; there will always be one on the school premises at any one time. All first aiders attend retraining courses as required.

Annually, the children in year 6 attend a full days Heart Start course and they attain skills in CPR, bleeding, Chest pains, Choking and many other emergency procedures. Some children are then chosen to receive further training from St John Ambulance and they become First Aid Buddies acting as first responders on our playgrounds during breaks and lunchtimes.

First aid kits

First aid kits are available in our Nursery, Infants and Junior department as well as a mobile kit situated in the Bluebell Suite. All classes have an emergency procedures displayed in their classrooms and most classroom assistants hold valid first aid certificates. All dinner ladies carry a bum bag.

Cuts

The nearest adult deals with small cuts. All open cuts should be covered after they have cleaned with water and swabs. Children are always 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. All incidents must be recorded in the accident file at the time and parents informed at the end of the day in minor cases or immediately if deemed necessary.

ANYONE TREATING AN OPEN CUT SHOULD USE RUBBER GLOVES. All blood waste is disposed of in the correct manner.

Bumped heads

Any bump to the head, no matter how minor is treated as serious. Bumped heads should not be treated with ice. Parents and guardians must be informed BY TELEPHONE. The child's teacher should be informed and keep a close eye on the progress of the child and guidance for parents is available on the school website. ALL bumped head incidents should be recorded in the accident file.

Accident file

There is an accident report book at each first aid station; all reports must be made as soon as possible after the incident to ensure factual information is recorded.

Each year there is a new file. Old files are stored in the school archive. Each Term the first aid book is monitored so risk assessments can be altered if necessary.

Calling the emergency services

In the case of major accidents, 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. 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

In the event of the emergency services being called, a member of the administration staff OR another member of staff, should wait by the school gate on London Fields and guide the emergency vehicle into the school.

If the casualty is a child, their parents should be contacted immediately and give 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.

Medicines in School

What can be administered?

In school we will administer medicines such as antibiotics, anti-histamine and paracetamol ONLY if prescribed by a GP or Pharmacist. All medicines must be clearly labelled with the child's name and a recent date.

Under no circumstances will non prescription medicines be administered by staff i.e.: cough medicine, throat pastilles, Ibuprofen or Calpol.

ANTIBIOTICS

We can administer antibiotics although this is usually undertaken by one of the fully trained first aiders. We can only administer ONE dose of an antibiotic during the school day. We will administer these medications as stated by the GP or a Pharmacist.

ANTI-HISTAMINE

We can administer anti-histamines in school usually undertaken by one of the fully trained first aiders. We will administer these medicines as stated by a GP or Pharmacist.

PARACETAMOL

We can administer paracetamol in an EMERGENCY in school this will usually be undertaken by one of the fully trained first aiders. Paracetamol will only be given if permission has been obtained either verbally or written, the first aider must feel that it is necessary for a child to receive paracetamol immediately, probably in the case of a high temperature or extreme pain. A phone call must be made to the parent or carer to obtain permission and suggest that they come to assess the child themselves.

CREAMS

We can administer creams for skin conditions such as eczema. HOWEVER, staff must not rub cream onto a child's body, unless agreed with the parents. With agreement, application of these creams must be made under the observation of another adult.

Parental permission

Medicines will not be administered unless we have the written permission of parents. Medicines forms are available from the school office and school website.

In the event of a child coming into school with medicines without a permission slip, we will attempt to gain consent for administration over the phone this call will be logged and a form must be signed by the end of the day. If we are unable to contact parents this way then the medicine will not be administered.

Where medicine is stored

No medicines should be kept in the class or in the child's possession (except inhalers). All medicines are kept in the staff room fridge or the locked cupboard. Administration of medicines takes place in the Bluebell Suite.

Administration of medicines file

All medicine permission slips are held in the school office, emergency administration forms are held in the medicine cabinet, they are named forms and are completed on a daily basis, these are then held by the school office. These forms are then archived on a yearly basis.

When medicine is administered, staff must complete the dated entry of this. A consent form for a course of antibiotics will cover administration of the recommended course. Before administering medicines, staff should read the label and confirm the Child's name and dose with 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 these children 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,

1. In the class rooms
2. In a file in the school office
3. In a file in the school kitchen
4. In a file in the staffroom

Epipens and anaphylaxis shock training

Some children require epipens to treat the symptoms of anaphylaxis shock. Epipens are all kept safe in the child's classroom. Staff receive regular training on the use of epipens. Children who require these epipens are identified to all staff.

Inhalers

Children have their inhalers within easy access in their classrooms. Key Stage 2 children are expected to take their inhalers with them whenever they do rigorous activity. Key stage 1 children will keep their inhalers with their class teacher for safety.

OTHER ASTHMA SUFFERERS CANNOT SHARE INHALERS.

In the event of a child having an asthma attack, who has no inhaler, the parents must be sought quickly by phone to give permission for the administration of someone else's inhaler. If parents cannot be located, then the emergency services will be contacted and they would give permission for the sharing of the inhaler.

Head lice

Staff do not touch children and examine them for head lice. If we suspect a child has head lice we will inform you and ask you to examine them. 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 24 hours after the last symptom has elapsed or if vomiting and diarrhoea has occurred simultaneously, 48 hours.

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 if it was alright.

If your child has any of these infections they will need to stay off school for a prescribed period of time. The Head teacher or school office will advise Timescales.

Emergency protocols are reviewed regularly by all relevant members of staff and updates are relayed to all staff in meetings. Special situations must be discussed with Mrs Ravenscroft or Mrs Fisher who will seek advice on what measures the school may need to take.

Reviewed Feb 14