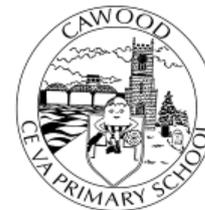


CAWOOD CHURCH OF ENGLAND PRIMARY SCHOOL



FIRST AID AND MEDICATION POLICY

Document Status			
Date of next review	March 2020	Responsibility	Teaching and Learning Committee
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Method of Communication			
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Introduction

First Aid can save lives and prevent minor injuries becoming major ones. Under Health and Safety (First Aid) Regulations 1981 employers have to ensure that there are adequate and appropriate equipment and facilities for providing First aid in the school and workplace.

Qualifications & Training

All First Aiders must complete a training course and hold a valid certificate of competence, which must be renewed through refresher training at the appropriate time. All members of staff have completed Emergency First Aid Training (Sept 2019). In addition, Debra Ferguson, Ann-Marie Taylor and Jo Moore (2017 it expires in 2020) have completed Paediatric First Aid Training and Judith Patterson has completed the First Aid at Work course (2017 expires 2020).

Main duties of a First Aider

- Give immediate help to casualties with injuries or illnesses
- When necessary ensure that an ambulance or other professional medical help is called
- To calm and reassure the patient

First Aid Materials

The First Aid boxes are located in the staffroom first aid cupboard, the library corridor, individual classes (including nursery) and the kitchen. Also kept in the staffroom are First Aid kits for school visits. The first aid boxes are checked and kept stocked on a weekly basis by the Health and Safety Coordinator and a record kept in the Health and Safety File.

Hygiene Infection Control

All staff should take precautions to avoid infection and must follow basic hygiene procedures. Staff have access to single-use disposable gloves and hand washing facilities, and should take care when dealing with blood or other body fluids and disposing of dressings or equipment. All yellow clinical waste bags are to be disposed of in the hygiene waste bins.

Reporting Accidents and Record Keeping

A record of all accidents or dangerous occurrences must be recorded. A record should be kept of any First aid treatment given by First Aiders.

Details must include:

- The date, time and place of the event
- Details of those involved

- Brief description of the injury or nature of the event
- What happened afterwards (for example went home, went back to class, parents informed)
- Name and signature of the First Aider or person dealing with the incident

We will inform parents of any injury that causes concern as judged by the First Aider.

Medicines and Special Medical Needs

The treatment of minor illnesses such as the administration of tablets or medicines falls outside the definition of First Aid. There is no legal or contractual duty on school staff to administer medicine or supervise a pupil taking it. If a child needs medicine during the school day, parents are firstly asked to consider if he or she should be at school. If a doctor considers the child is well enough to be at school but requires medication, parents are asked to arrange to come into school to administer it. In order to support families any other requests to give medication are discussed and considered by the school on an individual basis. Any decision to administer medicine should be discussed with a senior member of staff. In these circumstances if a child has a prescribed medicine (such as antibiotics) that needs to be taken during the day, or needs an inhaler the following applies:

- Parents or carers complete a consent form for Administration of Medicines which clearly outlines child's name, class and details of the prescribed dose (Appendix 1). The Headteacher or designated deputy will sign an agreement to administer medicine (Appendix 2). A record of medicines administered is kept (Appendix 3)
- Medicine / Asthma Inhaler should be in a clearly labelled in a sealed container – these are stored in the classroom of the child and a spare inhaler is kept in the staffroom first aid cupboard. Parents are to sign the consent form for the use of the emergency inhaler. (Appendix 10)
- Any medical information provided will be kept confidential

Epi-pens are stored in the school office and the classrooms where they can be accessed at any point during the day. Epi-pen training is attended by all staff and refreshed each year. Personal Health Plans are kept with the Epi-pen. The school office is the best point of storage as it is continually manned and can be accessed as children move around the school throughout the day. If there is a special need for an inhaler or epi-pen to be with a child during the day this will be organised in liaison with the parent and class teacher.

Accidents and emergency during lessons or break times

In the event of an accident or emergency during lessons or break times the following procedure should be adhered to:

- The teacher in charge or on duty should remain with the pupils and injured party at all times and attempt to establish calm and order. If in doubt, the teacher should not attempt to move an injured child but wait until help arrives. Where there is a sole member of staff in charge of the pupils this could be facilitated through sending a sensible child to the school office.
- The Headteacher or the designated member of staff in charge of the school should be informed as soon as possible as to the nature and seriousness of the incident and any action that needs to be taken e.g. calling for an ambulance.
- All near misses and major incidents are reported to the LA as required.
- In the case of minor injuries at break times the staff member on duty can deal with the first aid by using the portable first aid kit carried. This is then recorded in the accident book. Minor injuries at lunchtime are dealt with in the same way. Major incidents are referred to members of teaching staff.

Transportation

The general principle is to not move a casualty unnecessarily. Severe injuries – unconsciousness, fractures, trunk, leg or head injuries should be considered an emergency and an ambulance called.

The child's parents or carers should be contacted immediately. If the parent or carer cannot be contacted, a member of staff will accompany the child to hospital 'in loco parentis'. Permission for treatment may be required. It is essential that the member of staff is aware of any personal restrictions to treatment i.e. allergy to drugs or religious beliefs. For this reason the child's emergency card should be taken to hospital.

Rubella – German Measles

German measles can seriously damage an unborn child if it is contracted by women who are in the early stages of pregnancy. Steps are taken to protect such women as far as possible from visiting the school if there are cases of Rubella. In the event of such cases of Rubella the Headteacher will display warning notices at the entrance to the school until such time that there are no other cases being reported.

Aids

Our policy follows NYCC guidance that all first aid boxes contain disposable gloves. No experiments or investigations can be carried out in school involving blood sampling, the use of saliva or skin cells.

Should a child have AIDS/HIV, then only those staff who are likely to come into contact with that child should be told. Parents are under no obligation to inform the school should their child be infected with the AIDS virus. Any information concerning a child with AIDS is strictly confidential.

Guidance

In all major cases parents and carers are contacted immediately.

Wounds

If a wound cannot be dressed with adhesive dressing or continues to bleed after treatment, parents should be called and medical attention sought at hospital/doctors. Medical attention must be sought for all facial wounds and eye injuries. If you are in any doubt then you must mention the wound to a senior member of staff.

Minor cuts and abrasions

Minor cuts and abrasions should be covered with an individually wrapped hypoallergenic plaster. Any patient requiring an adhesive plaster should be asked if he/she is sensitive or allergic to them. With younger children the dressing should be checked after ten minutes for any sign of reaction. Dressings such as Lewis Pore Dressing may be used in cases of allergy. Disposal of all used medical material should be in the yellow plastic bags supplied.

Head Injuries

For lesser cases advice should be sent with the child advising parents and carers that the child has sustained a minor head injury and if the following symptoms appear he/she should be taken to a doctor immediately:

- Continued worsening headache
- Nausea or vomiting

- Dilated or unequal pupils of the eye

A standard medical slip, indicating a head bump and sticker are distributed to parents and carers.

All head bumps are recorded in the school accident book.

Burns and Scalds

Burns and scalds should be immediately immersed in cold running water for as long as possible for at least 10 minutes. Under no circumstances should cream of any description be applied. Any burn greater than 1.5cm in diameter should be referred to a doctor. Contact a doctor immediately for medical advice.

Eye injuries

Eye injuries should be irrigated and flushed using saline solution provided. Do not attempt to remove embedded or partially embedded particles from the eye. Eye injuries should be referred to a doctor.

Bleeding

Quickly examine for any embedded object in the wound – DO NOT REMOVE. Apply bandages over the top, ensuring there is no pressure on the foreign body but enough on the bandage rolls to stop bleeding – elevate the limb and refer to hospital.

Nose bleeds

Lean head forward, pinch nose below the bridge for ten minutes. If the nose bleed continues, catch blood in receptacle and refer to hospital. The patient should take the blood traces with them for analysis.

Choking

Staff should use pats on the back and the abdominal thrust if necessary as demonstrated in first aid training.

Fainting

Lean head between the knees if feeling faint. Elevate the legs if fainted and check airway. Use recovery position if necessary.

Epilepsy

Make sure airway is unrestricted. Remove danger from around the patient. Protect from immovable objects i.e. pad between the patient and a radiator. Allow to sleep in quiet area when fitting stops. Seek medical attention if no history.

Diabetic emergency

Lack of sugar – rapid onset – aggression usually the first sign but may notice quietness before this stage. Give sugar quickly i.e. a sugary drink, glucose tablet or biscuit and the emergency will be quickly over.

Lack of insulin – not so rapid onset – if in doubt give sugar as it will do no harm but if no effect insulin is needed and medical attention should be sought immediately. The child has an individual care plan that must be followed.

Asthma

Each individual requiring medication should be assessed as a separate case. Sit upright, lean slightly forward on elbows. Use inhaler immediately and be prepared to resuscitate if necessary. With a severe attack, get help immediately and ring 999 for medical help.

Fractures

All fractures require hospital treatment. Do not move unless in danger. Immobilise and support injury in position found. Reassure and make patient comfortable. Call ambulance. Treat for shock – reassure, keep warm and elevate legs if possible. Contact the parents as soon as possible.

Appendix 1

Parental agreement for school/setting to administer medicine

The school/setting will not give your child medicine unless you complete and sign this form, and the school or setting has a policy that the staff can administer medicine.

Name of school/setting	CAWOOD CE PRIMARY SCHOOL
Date	/ /
Child's name	
Group/class/form	
Name and strength of medicine	
Expiry date	/ /
How much to give (<i>i.e. dose to be given</i>)	
When to be given	
Any other instructions	
Number of tablets/quantity to be given to school/setting	
Note: Medicines must be in the original container as dispensed by the pharmacy	
Daytime phone no. of parent or adult contact	
Name and phone no. of GP	
Agreed review date to be initiated by	

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school/setting staff administering medicine in accordance with the school/setting policy. I will inform the school/setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Parent's signature _____

Print name _____

Date _____

If more than one medicine is to be given a separate form should be completed for each one.

Appendix 2

Head teacher/Head of setting agreement to administer medicine

Name of school/setting

CAWOOD CE PRIMARY SCHOOL

It is agreed that _____

will receive _____

every day at _____.

_____ will be given/supervised whilst he/she
takes their medication by a member of staff.

This arrangement will continue until either end date of course of medicine or until instructed
by parents.

Date _____

Signed _____

(The Head teacher/Head of setting/named member of staff)

