

# **3-12 First Aid and Medication Policy**

*This Policy applies to the entire setting including the EYFS.*

The Mead School Policy for First Aid (including any treatment commonly referred to as First Aid) and the administration of medication is as follows.

## **Training**

All staff at the School are to attend basic First Aid Training via an approved training facilitator.

This will normally be every three years via an “in house” training course provided by an approved organisation such as St John’s Ambulance, Red Cross etc. The last whole school training session was in July 2018.

All staff working with EYFS children in whatever capacity undergo a two day Paediatric First Aid training course. Wherever possible, at least one of these members of staff should be available when EYFS pupils are outside at break time. These are:

- Jane Ovenden
- Jenny Staines
- Issy Hunt
- Jane Cobbold – ex date July 2020
- Roz Hughes- ex date May 2020
- Cassie Hibberd – ex date July 2020
- Mel Douse – ex date July 2020
- Jo Webster – ex date July 2020
- Pierre Leroy
- Danielle Mackenzie – ex date August 2021
- Kate Mitchell – ex date July 2020
- Katherine Marsh – ex date July 2020
- Elizabeth Winter
- Rebecca Hall
- Thomas Liddle
- Victoria Hall
- Jackie Grayson – ex date July 2020
- Sarah Burkett
- Anita Morgan
- All expire July 2021 – unless otherwise stated

All staff have been shown how to successfully administer an “Epi Pen”. These are stored with outside the Business Manager’s Office (in the Medical shelving unit). Details of pupils requiring epi-pens are stated in the list of names in each of the First Aid boxes and outside the Business Manager’s office.

## Facilities

- First aid stations are provided at different locations within the school.
  - Gym
  - Outside Classroom
  - Playground
  - Bootroom
  - Kitchen
  - Infant Toilets
  - Staff room
  - Reception
  - Kindergarten
  - SBM Office
  - SEN room top floor
  
- All school vehicles will carry suitable First Aid kits.
- A suitable First Aid kit must be taken to all sporting events and on all school trips. A choice of First Aid Kits including ruck sacks, bum bags and pocket-sized versions are available from the Business Manager. In addition the Sports Department have their own specific first aid kits.

In addition to the statutory First Aid kit other items will/may be included:

- Sick Bags
- Sting cream
- Calpol
- Glucogel

(This list is not exhaustive)

First Aid kits will be replaced/restocked during each school break (i.e. during half and end of term breaks)

Any shortages (through use or loss) in a First Aid kit must be reported immediately to the Business Manager who will replenish the missing or used items.

Note: It is the responsibility of the person using the First Aid kit to report any shortages or use and not to leave it to the next user. First Aid kits must always be suitably stocked.

The SEN top floor can double as a recuperation area. A portable bed, pillow and coverings are kept in the SEN top floor room. These items can only be used for this purpose and must not be removed or used for any other non-medical reason. They are regularly laundered and kept fresh. A sink is in the room and toilets next door.

All class teachers are given a list of children with any medical conditions of which school should be aware. A list of children with special medical needs is also pinned up both in the staff room and the office, as well as with all the First Aid Stations. Emergency contact telephone numbers are held in the office, to which there is easy access.

A medical questionnaire for each child (completed by parents prior to entry) is kept on file along with any pertaining medical notes. This will include parental permission for the school to administer specified treatments beyond that of First Aid. Access to these

records is through the School Office and PASS. The person giving the First Aid treatment will be responsible for:

- Correctly filling out the accident book including the events leading up to the incident (if appropriate).
- Detaching and giving the relevant part to the Business Manager.
- Notifying the parents, class teacher or the Head (as required).
- If the person treating an ill or injured pupil is unable to complete these tasks due to teaching commitments, they may hand completion of this task over to the Business Manager, School Secretary, Head or Gemma Wilson.
- The Business Manager, School Secretary, Head or Gemma Wilson is then responsible for any further reporting required under RIDDOR.

## **Guidance for accident / injury and giving of medicines administration.**

Accident books are located at all first aid points and Bang to the head wrist bands and Bang to the Head notes to go back to parents can be found outside the SBM office or in the staff room.

Bang to the head letters and bands are also located outside the Business Manager's office as are the giving of medication forms and medication wristbands.

For any incident where first aid is given the accident book must be completed. This is a mandatory requirement. If a head injury is also involved the parent / carer must be informed and a 'bump to the head' letter sent home in the child's book-bag and a 'bump to the Head' wristband put on the child.

It is the duty of the school to inform the parents of an EYFS child of any accident or injury sustained by the child on the same day, or as soon as reasonably practicable, and any first aid treatment given. This is usually done at the end of their school day.

Where first aid (in the true definition) is not given (see suggested examples below) but where TLC or comfort is given then it is not necessary to complete the accident book; however you may choose to complete the accident book for your own assurance for any incident however small. If in doubt always record the details.

The First Aid books are self-explanatory with instructions inside the front cover. Please complete as fully as possible and then remove (tear along the perforations) and pass to the Business Manager for filing.

Please note that there is a tick box that should be marked if you inform parent(s) of the incident. All head injuries must be reported to a parent or carer. If you have any doubts – inform.

## **Signs**

What to watch out for:

## **Asthma**

The main symptoms of asthma are:

- wheezing (a whistling sound when you breathe)
- shortness of breath
- a tight chest – which may feel like a band is tightening around it
- coughing

## **Allergic Reactions**

If you are allergic to substances in the air – such as pollen, animal dander and dust mites – the symptoms usually include:

- rhinitis – sneezing and a blocked, itchy or runny nose
- conjunctivitis – itchy, red, streaming eyes
- asthma – wheezing, breathlessness and a cough

If you are allergic to a certain food or medication, symptoms can include:

- urticaria (hives) – a raised, itchy, red rash
- swelling – usually affecting the lips, tongue, eyes and face
- abdominal pain, vomiting and diarrhoea
- atopic eczema – the skin becomes dry, red and cracked

## **Eczema**

Eczema is a condition that causes the skin to become itchy, red, dry and cracked. It is a long-term (chronic) condition in most people, although it can improve over time, especially in children.

Atopic eczema can affect any part of the body, but the most common areas to be affected are:

- backs or fronts of the knees
- outside or inside of the elbows
- around the neck
- hands
- cheeks
- scalp

People with atopic eczema usually have periods when symptoms are less noticeable, as well as periods when symptoms become more severe (flare-ups).

Further useful information can be found on the NHS website:

<http://www.nhs.uk/Conditions/Pages/hub.aspx>

## **Giving of medicine to a pupil**

Any medicine given to a pupil at school must be recorded on the medication form – files with the Business Manager and the pupil must be issued with a medication band stating the date

and time of giving of medicine and the type and quantity. For non – prescription medicine (Calpol, Neurophen and Piriton) verbal permission must be sought from a parent or carer. For prescription medicine written permission must be sought for a parent or carer. Use of personal asthma inhalers does not need individual permission, but does require a band and a medical form.

Medicine held within the school should be kept in either the locked cabinet in the Business Manager’s office or the fridge in the staff room.

Parents must ensure that any medicines provided for use at school are in date and replacements are sent in prior to their expiration. Expired medicines cannot be administered.

Any child who needs to use an inhaler for asthma should carry it with them at all times, and will be allowed to use it as necessary. A spare named inhaler must be brought in to be kept outside the Business Managers office so that it can be accessed if needed. Any child prescribed an Epi-pen is encouraged to keep it with them at all times. Their second Epi-pen will be stored outside the Business Managers office so as to be easily accessible if required in an emergency.

## **Reporting procedures**

The procedures in use are in line with the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) as follows:

a) Notification to the Health and Safety Executive by the HSE Approved Method if the following occurs:

- Fatal Injury to Staff, Pupils or Any Other People in an accident on the premises.
- Major Injury to Staff, Pupils or Any Other People in an accident on the premises
- Dangerous Occurrences listed in the Regulations.

b) Reporting

- A report will be sent to the Health and Safety Executive of any notifiable incident.
- A report will be sent to the Health and Safety Executive for any other injury which results in Staff being absent from, or unable to do their normal work for more than seven days.
- A report will be sent to the Health and Safety Executive in the case of ill health listed in the Regulations.

Note: When reporting of accidents to pupils, the HSE guidance Education Sheet 1 will be used to establish whether the accident is reportable or not as the reporting criteria are different for pupils and employees.

c) Reporting Arrangements

Reporting to the HSE will be carried out electronically on the HSE’s approved electronic reporting arrangements.

d) Record Keeping

Type	Incident report	Contact parent / carer	Bang to head letter	Bang to head wristband	Medication form	Medication band
Day to day accident (no potential head injury)	Yes – return to Business Manager to look for patterns and trends	No	N/A	N/A	N/A	N/A
Day to day accident (with potential head injury)	Yes – return to Business Manager to look for patterns and trends	Yes	Yes – into book bag	Yes – on to child	N/A	N/A
Giving of non-prescription medicine	No	Yes – ask for permission	N/A	N/A	Yes	Yes – Type of med, time, date, amount
Giving of prescription medicine	No	Yes – permission in writing	N/A	N/A	Yes	Yes – Type of med, time, date, amount
Asthma inhaler	No	No	N/A	N/A	Yes	Yes – Number of puffs, date, time

**Example of reportable First Aid incidents:**

Two children run into each other in the playground, bang heads with significant force that one or both seem dazed and are in distress. You attend and check over the children – neither have any serious injuries and you are satisfied that no treatment other than observation is required. – You should complete the accident book (one page for each child) and state “Child checked and no action required”. If you decide that an ice pack is beneficial then do issue one and record this in the accident book as action taken. Note: All head injuries are to be recorded and the parents informed immediately. In addition, Bump to Head wristbands are put on the injured pupil (and placed so they cannot be pulled off by the child), and a ‘bump to head’ letter is sent to parents.

A child slips and falls down the stairs badly hurting their ankle. You attend but feel that the child should be checked over at the local hospital. After informing the School Office and the Head you contact the parents who take the child to A & E but take no further action. You should complete the accident book and state "Parents called to take child to A&E."

### **Incidents where either you use your discretion or a report is not normally required:**

A child falls in the playground and lightly grazes their knee on the tarmac, you send the child in to clean their knee and on inspection a plaster is not required. Use your discretion. Probably don't complete a report.

A child falls in the playground and is distressed. You administer a bit of TLC but no further treatment is required. You might use an ice pack as a "comfort blanket" – ensure the Ice pack gets returned to the staff room but the accident book does not require completion unless you want to do so.

A child in your class gets sick. The Parents are called to collect the child. This does not get recorded in the accident book.

### **Treatment**

- Anybody can give First Aid, however where possible this should be given by someone with appropriate training and in a timely fashion.
- Where possible when minor treatment is being administered (plasters etc.) a permanent member of staff should be present.
- If the treatment is to, or involves, a potentially sensitive part of the body (including, but not limited to genitalia) this will only be carried out with the Head's express permission and with at least one other teacher present, (female staff for female pupil, and male staff for male pupil).
- Before any treatment is given, advice should be sought in the first instance from the School Office and by contacting the appropriate parent.
- Only medication prescribed can be administered with written permission from a parent or carer (with the exceptions of Calpol, Nurofen and Piriton where verbal permission is sought).
- Medication that has not been prescribed is not allowed to be brought to school by pupils or parents. The school will provide certain limited items as identified in the parental questionnaire.
- Any prescribed medication for pupils that is brought into school must be kept by the class teacher who will also supervise, or administer to, the pupil. Where that teacher feels unable or unwilling to do this the Head or Business Manager can be delegated. In certain circumstances parents can be asked to attend school to administer medication, fill in the medication form and medical wrist band.
- If required, parents will be contacted to collect the child, this must be done with the express permission of the Head or member of the SLT in their absence. If a child is

unwell the best place for them is at home with an adult. A sick child will not be able to cope with school activities, and if the illness is infectious there will be a risk of passing it on to other children and staff. If a child becomes unwell during the school day parents should be contacted and be requested to take the child home. If a child is on prescribed medicine and the family doctor regards the child fit to return to school, or a child is on long term medication, the child's teacher will administer the medicine provided that there is a written request from the parents, with details of administration and dosage. The parents must provide the medicine in a suitable container clearly labelled with the child's name and directions. The medicine must be kept under 'lock and key' with a designated member of staff responsible for administering the doses, usually The Business Manager.

- Staff should take all precautions when dealing with sickness and diarrhoea. Parents are encouraged to leave a full 24 hours after any case of this to ensure all contagious viruses are diminished unless advised by health notices that 48 hours is appropriate.
- An ambulance will be called for urgent cases by a member of SLT or authorised by a member of SLT and parents informed.
- No member of staff (unless fully qualified to do so) will make any diagnosis. They will limit their comments and treatment accordingly. If they have any concerns they should only voice them to the Head and not to the pupil or parent.
- If it is deemed best to take a pupil to Hospital then the following will apply:
  - The Head or Business Manager must give express permission.
  - Two members of staff should accompany the pupil (unless circumstances prevent this and the Head agrees)
  - Full pupil details will be taken to the Hospital.
  - The Parents must be informed.
  - The person taking the pupil to Hospital must report in as soon as practicable.
  - The person taking the pupil to Hospital will remain with the pupil until relieved by either another member of staff or by the parents.

## **School Health**

Upon a child joining the school, their carer will be asked to complete a confidential medical form for the school's records.

The following is written in the joining instructions to all parents / carers:

*Children should remain at home until they are clear of infection or have nearly completed a course of antibiotics. Prescribed antibiotics must be in their original container and clearly identified with the official label showing name and dose. Staff are permitted to administer prescribed antibiotics only if absolutely necessary during the school day and only on receipt of written authority. However, children should remain at home during the first 48 hours of any antibiotic treatment. No other medicines are permitted except for asthma and eczema sufferers using prescribed drugs. If your child has diarrhoea and/or vomiting, please keep them at home for 24 hours following the last episode of either or 48 hours for the Norovirus.*

## **Hygiene Procedures for Dealing with the Spillage of Body Fluids**

Special care should be taken when dealing with the spillage of bodily fluids (vomit, urine, faeces, blood etc.). Disposable gloves should be worn. These can be found in all first aid kits.



The area should be isolated if possible and then treated with the Emergency Spillage Compound, a yellow sachet located in all first aid kits. This will reduce the spillage to a gel allowing for prompt and easy clearance. The gel waste should be cleared (a dustpan and brush can be used) and placed in a plastic bag, knotted tightly and removed to an outside bin. The affected area should then be further cleaned with a sanitising fluid found in the designated First Aid area in the Business Managers Office. Additionally, a mop and bucket and additional cleaning products are located in the locked cleaning products shed should this be required. (padlock code 1987).

### **Staff medication and staff responsibility**

If staff are taking medication which may affect their ability to care for children, those practitioners should seek medical advice.

The Mead School will ensure where possible that those staff only work directly with children if medical advice confirms that the medication is unlikely to impair that staff member's ability to look after the children properly.

Staff medication on the premises must be securely stored in either the locked medicine cabinet in the Business Manager's office or the Registrar's office or if it needs to be kept cool in the staff fridge in the staff room out of reach of children at ALL TIMES.

There are regular staff training sessions (run by external agencies if appropriate) on dealing with medical emergencies in the school. The sessions include dealing with asthma, diabetes, epilepsy, anaphylactic shock and how to use an Epi-pen. The various procedures for getting assistance and an ambulance are covered.

A list of children with serious medical conditions is made available to all relevant staff and discussed regularly at staff meetings when needed.

STAFF: A Webster (Head)), R Hall (Business Manager) - (All staff reviewed policy)

AMENDED: September 2019

NEXT REVIEW: September 2022