



# Waverley School

## First Aid Policy

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### Introduction

The Health and Safety (First Aid) Regulations 1981 require that the school provide first aid cover for its employees appropriate to the needs of the workplace. See notices around the school detailing the current First Aiders. These should be in the Office, staff room, Year 2 classroom, Year 3 classroom, community hall and the Staff room.

### Aims

- To provide first aid as necessary from trained adults.
- To promote health and safety awareness in children and adults, in order to prevent first aid being necessary.
- The Head teacher to monitor the pattern and regularity of accidents for significant hazards.
- To ensure that a qualified first-aider is on site at all times and that for the EYFS provision there is a paediatric first aider available at all times including outings.

### Procedures

#### Staff

**First Aiders** - must complete a 12 hour Emergency Paediatric First Aid training course approved by the Health & Safety Executive. The main duties of a First Aider are :

- to give immediate assistance to casualties with common injuries or illnesses and those arising from specific hazards within the school
- ensure that an ambulance or other professional help is called expediently when required
- checks and restocks first aid containers

**Appointed Persons** - An appointed person is not a First Aider but someone who:

- takes charge when someone is injured or becomes ill until a suitably qualified person is available



- ensures that an ambulance or other professional medical help is summoned when appropriate

## General

- The First Aid boxes are kept in the First Aid Room, the Year 2 classroom, and the community kitchen and are stocked for both staff and children's aid. Portable first aid bags are also to be found in the First Aid room and are to be taken whenever children go off-site. The contents of these boxes are checked regularly by one of the trained First Aiders.
- First aid for children is generally limited to the use of cold water, sterile gauze and plaster (when the wound continues to bleed after having been cleaned up).
- Ice packs (available from the staff room, community kitchen and Nursery fridges) are available to reduce swelling, for head injuries and sprains.
- No medications are administered unless parents have completed an Administration of Medicines form (see section on Administration of Medicines).
- Most staff will received 6 hour paediatric training which is sufficient for dealing with minor cuts and bruises and is updated every three years. However, when there is any concern that injuries may be more than superficial one of the qualified First Aiders should be summoned immediately.
- All accidents and first aid given to children should be recorded on an Accident Form (to be found with each first aid box and also available from the Office) by the staff member who deals with it.
- These forms are passed immediately to the class teacher who asks the parent or carer to sign the form at the earliest opportunity. Completed forms are passed immediately to the Head teacher who monitors the pattern of accident for significant hazards.
- The school has hygiene procedures for dealing with the spillage of body fluids.
- An ambulance should be called whenever the first-aider of adult involved deems necessary.

Injuries to staff should be recorded in the green Accident Report book to be found in the front of the accident file in the office.



## Head Injuries

- All head injuries, including bumped heads, are dealt with by placing an ice pack on the affected area (normally a visible bump) until the swelling is reduced.
- If possible, this should be dealt with by a First Aider, in case of further complications.
- An accident form is completed by the staff member who dealt with the accident .
- The child should be monitored carefully during the rest of the day and if they show any adverse affects from the head injury, then parents should be called.
- If the head injury is severe, then either parents should be called immediately or an ambulance should be summoned.
- These forms are passed immediately to the class teacher who asks the parent or carer to sign the form at the earliest opportunity. Attached to the accident form is an advice note, which details side affects following a head injury that the parent should be aware of. The parent should then initial the relevant box on the accident form that they have received the advice note.
- Completed forms are passed immediately to the Head teacher who monitors the pattern of accident for significant hazards.

## RIDDOR

If any accident happens to children or adults at school, that come under RIDDOR (Reporting Of Injuries, Diseases and Dangerous Occurrences Regulations 1995), then the appropriate box on the accident form must be completed and reported to Head Teacher immediately. See attached sheet for list of RIDDOR injuries.

## Anaphylaxis

Information concerning children and staff who suffer from anaphylaxis is displayed in the staff room and included in the confidential medical conditions pupil list which is circulated to staff as and when it is updated.

If anaphylaxis shock is suspected, action should be taken by staff who have received specific training from the School Nurse and in accordance with instructions stated in the child's anaphylaxis pack (to be found in the box labelled 'Epipens' stored in the community kitchen.



Staff receive regular training by the School Nurse in procedures of the management of anaphylactic shock. A copy of the protocol to be followed is issued to trained staff and is also to be found in the children's packs in the Epipen box.

Staff must ensure that epipens are taken when they take the child off-site for any school trips, swimming, etc.

### **Asthma**

The School nurse visits to train staff in the management of asthma on a regular basis. Children suffering from asthma should be encouraged in their independence concerning their condition.

- They should know when they need their inhaler
- Older children should be able to administer their own medication
- They should take a degree of responsibility for their inhalers during the day eg. carry in a bum-bag or know where it is and carry out to games, or on school visits, swimming, etc.
- Young children may need assistance from staff trained by the nurse to use spacers with their inhalers

### **Administration of Medicines**

We are happy to administer prescribed medicines to any child at school so long as:

- Daily prior written permission on a medicine form must be given by parents for every medicine before it can be administered. Verbal permission will not be accepted.
- We will record all prescribed medicines administered to children on a medicine form and this will then be filed in the Office.
- For those children who have a medical condition which requires long term medication, prior parental permission will be recorded on a long term medicine form, along with instructions for when it should be administered. The details of the medical condition must be on a care plan.
- If the administration of prescribed medicine requires technical/medical knowledge, e.g. epipens, insulin injections, suppositories, etc then individual training must be provided for



staff from a qualified health professional which is to be arranged by the parents, prior to the child needing this medication. Training must be specific to the individual child concerned.

- Medication will only be administered by a qualified First Aider or by the designated persons who have received the relevant technical/medical training.
- Medication will be stored out of children's reach and strictly in accordance with the product instructions.
- Medicine must be in date and in the original container in which it was dispensed. The label (which must be in English and legible) must include the prescriber's instructions for administration for that particular child only.
- We will only administer the dosage and frequency indicated on the prescribed instructions. If a child has been prescribed both paracetamol and ibuprofen, we cannot give these at the same time.
- Children who have been prescribed medication may attend school, provided they are not suffering from an infectious illness and they are well enough to fully participate at school.



## **R.I.D.D.O.R. 1985 REGULATIONS**

The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1985 state that it is the responsibility of the employer to report the following injuries directly to the Health & Safety Executive:

- Any fracture, other than to fingers or toes
- Dislocation of the hip, shoulder, spine or knee
- Amputations
- Temporary or permanent loss of sight
- Penetrating injury to the eye
- Hot metal or chemical burns
- Sudden illness requiring medical treatment arising from absorption of any substance by ingestion, inhalation or through the skin
- Sudden illness requiring medical treatment where there is reason to believe that this resulted from exposure to an agent or its toxins or infected material
- Electrical shock or electrical burns leading to unconsciousness, requiring CPR or requiring admittance to hospital for more than 24 hours
- Any injury leading to hypothermia, heat exhaustion or heat stroke
- Any injury requiring CPR or requiring admittance to hospital for more than 24 hours
- Unconsciousness caused by exposure to a harmful substance, biological agent or asphyxia