



Skidby CE Primary School

First Aid Policy

(Reviewed September 2020)

The overarching principle of this policy is to ensure that children with specific medical needs are not excluded from mainstream education or activities because of their condition and that any medication is administered safely by appropriately trained staff. There is a clear link here with the Disability Discrimination Act. Therefore, anyone with a named condition that affects aspects of personal development must not be discriminated against.

The majority of the staff at Skidby Primary School are First Aid qualified.

Note that the first aid boxes are kept in the school office, the hall, the staff room and the kitchen. The boxes are clearly marked with a white cross on a green background.

Playground - before and after school; break times.

a) If a child is injured on the playground and the injury is of such a nature that the child can walk -
i) ask older child to take injured child into school (main entrances) and ii) inform a First Aider.

b) If the child cannot be moved, due to possible concussion or back injury, send older child into school for assistance by a First Aider, who will then make the decision if possible on moving the child.

Injuries, however small, should be reported to the child's teacher or the school office. A record of all treatment given should also be kept. Head injuries should be notified to parents and a First Aider advised in order that the situation can be monitored if needs be. When it is deemed that medical attention by a doctor is required, parents should be immediately informed and requested to collect their child to take them to surgery/hospital. If a parent is unavailable or unable to attend quickly, the school acts in 'loco parentis' and takes the above action.

Playground – lunchtime Injuries should be treated in the above manner.

Classroom

Should an incident occur during class time either:

- i) send child for First Aider OR
- ii) ensure the class is monitored by another member of staff and take child to First Aider
- iii) log the injury

If a child is ill during school time and is considered to require more attention than the teacher can provide, then the parent should be contacted and asked to take the child home.

Medicines

All medicines are kept in the school office. The school adopts the "Managing Medicines in Schools and early years settings" document (March 2005).

The school is inclusive and accepts that children with medical needs have the same rights of admission as other children. These children may require extra care and be in receipt of a health care plan. Access to children with disabilities will be continually improved. Children should be allowed to participate in sporting and extra curricular activities where ever possible, unless there is a clear health and safety risk.

1. Prescribed medicines should only be brought into school when essential. They need to be prescribed by a doctor and can only be brought in the original container as dispensed by the pharmacist. They will not be accepted if parents have requested changes to dosages. Wherever possible medicines should be taken out of school hours. Any medicine must be handed in to the school office and must be clearly labelled with the child's name and in a single measured container.
2. Parents must give the school permission to administer any medication in writing.
3. No medicine can be kept in school overnight.
4. The giving or supervision of a child taking medicine is not part of the teachers' conditions of employment, nor is it in the contract of administration staff, so any staff prepared to do so must have given written consent and be suitably trained e.g. asthma nurse. This is a purely voluntary role.
5. The administration of all medicines should be logged in the book kept in the office.
6. Medicines can be administered by the child in question if it is safe to do so. This should be encouraged but should be observed.
7. Medicines should be locked in the school office. Only the administration staff and the head teacher should have access. In some cases medicines can be stored in the fridge in the staff room.
8. Medicines should be returned to the parent when no longer required.
9. Staff should NOT give a non-prescribed medicine to a child without parental consent in writing ie, Calpol.
10. If a child refuses to take a medicine, staff should not force them to do so and parents informed.
11. All staff should follow basic hygiene procedures and use disposable gloves.

Roles and Responsibilities

Parents

Only one parent needs to request that medicines are administered, but this needs to be in writing. Staff need to be aware of who has parental responsibility. Children in the care of the authority will have individual arrangements which will need to be considered. Sufficient information will need to be provided by parents to the school regarding medical needs or special care. The school has individual health care plans for pupils with medical needs. These are completed by the parent with the help of school staff. Copies are passed on to all relevant staff. Confidentiality is expected.

Local Authority

The LA have a policy for health and safety and they take out an Employers Liability Insurance. It is the duty of the LA to offer training to staff.

Governors

Governors should agree policies for the school and consult with all parties regarding the policy.

Headteacher

The head is responsible for putting the policy into practice and for making all parties aware of the policy and procedures for dealing with medical needs. Individual health plans need to be agreed between the head and parents as necessary. The head should ensure that staff are fully aware of children with medical needs.

All

All individuals in school should know what to do in the case of an emergency. Children or other adults inform staff (including TAs and LTAs) and the emergency services are called. A member of staff should always accompany a child to hospital and stay with the child until a parent arrives. No child should be taken to hospital in a private car.

Inhalers

Inhalers are kept in the child's classroom and are at all times, readily accessible. Some children will need their inhaler with them at all times. They should be taken outside for PE to ensure their swift availability. Inhalers should always be taken on visits in the care of staff, or staff should have a procedure whereby they check that each child is in possession of own inhaler.

Impacts on Disabled people

1. Ensure that disabled children and their parents have been consulted on how they want the procedure or administration of medicine carried out
2. Ensure that dignity is maintained
3. Are enough staff effectively trained in the necessary procedures? If not, this needs to be addressed very quickly
4. Do staff know what to do in the case of a medical emergency
5. Ensure that all staff who need to know do know
6. Ensure that a specific risk assessment is in place if necessary
7. Try to encourage disabled pupils to self administer medicines (e.g. insulin) if possible
8. We must support the development and self-esteem of disabled pupils

Further information

Staff Injuries should be logged in the booklet in the office. These are retained on separate sheets in line with data protection recommendations.

First Aid Boxes

First aid boxes should contain a sufficient quantity of suitable first aid material, and should not be used to store any other items. The contents of the boxes will be replenished as soon as possible after use. The contents must NOT be used for any purpose other than to support the administration of first aid.

After use, the First aid boxes should be returned to their designated site.

Dressings should never be re-used.