

HAZELDENE SCHOOL



FIRST AID POLICY SEPTEMBER 2016

SIGNED DATE.....
HEADTEACHER

SIGNED DATE

CHAIR OF GOVERNORS

TO BE REVIEWED SEPTEMBER 2018

HAZELDENE SCHOOL

First Aid Policy

The health and safety of all children at Hazeldene School is of the highest importance to all staff.

This policy explains the practices in place to address the health needs of the children which may be as a result of accidents or specific medical conditions.

(NB This Policy needs to be read alongside the Policy for Supporting Pupils at School with Medical Conditions.)

Staff Qualifications:

Hazeldene has ELEVEN fully qualified paediatric first aiders who are responsible for dealing with any serious first aid matters and can be called upon to offer advice whenever required.

They are:-

- Aysha Magre
- Joanne Bedwell
- Alison Button
- Vicky White
- Nicola Ford
- Sam Malton
- Geraldine Skeel
- Nola Donaldson
- Nikki Sangster
- Alex Redford
- Jackie Taylor

The emergency aiders who hold the full first aid at work training are:

- Jeanette Pocock
- Sharon Logue
- Joanne Riley
- Aysha Magre

The emergency aiders who hold Essential First Aid are:

Belinda Edgeworth

Aysha Magre has overall responsibility for the coordination of first aid. This includes the ordering of medical supplies and equipment. She is responsible for ensuring that at the end of every term all children who have prescribed medication in school take it home. She also ensures that all medication is brought back on the first day of the next school term and consent for

medication is given by parents. She is responsible for checking all medication is in date.

In addition to the above training all the mid day assistants have also undertaken basic first aid training. Joanne Bedwell is responsible for First Aid at break times and lunchtimes and is based in our dedicated First Aid Room.

First aid training is carried out in line with current Health and Safety recommendations. This is every 3 years to re-qualify as a first aider and annually in emergency first aid.

Medical Equipment

First Aid equipment is kept in the first aid room and in the staffroom

Cuts are cleaned using, where appropriate running water and/ or alcohol wipes and if needed, plasters are available.

Gloves are worn by staff when dealing with blood and these are located next to the plasters and wipes.

Ice packs are kept in a seperate fridge in the staffroom and can be used to reduce the swelling for bumps and suspected strains and sprains- a cold compress will be used for head injuries. If ice packs are used then these are first wrapped in a paper towel to prevent contact with the skin.

All medical waste is disposed of in the yellow bags.

Dealing with bodily fluids - blood etc

Aims:

- To administer first aid, cleaning, etc, for the individual.
- To protect the individual and others from further risk of infection.
- To protect the individual administering first aid, cleaning, etc

Procedure to adopt when dealing with blood, body fluids, excreta, sputum and vomit:

- Isolate the area.
- Always use disposable gloves (located in the First Aid Box) NEVER touch body fluids with your bare hands
- Use bucket and mop from Caretaker's room (inform Caretaker if used by leaving a note)
- Double bag all materials used and dispose of in yellow dustbin.
- Blood loss - if possible give individual cotton pad to hold against themselves whilst you put on disposable gloves.
- Always wash hands after taking disposable gloves off.

Off-Site Visits

It is the responsibility of the teacher in charge to take a first aid box with them on the visit.

Small first aid packs are available in the staffroom and in bags used by the midday assistants. All teachers taking children out of school for a trip or residential visit are equipped with a first aid pack and will carry any medication needed for individual children.

The first aid equipment is regularly checked and managed by Mrs Magre. All accidents are recorded on a minor accident form and these are stored in the First Aid file. There are two files: one which is kept in the office, the other is located in the first aid room.

Any head bumps are recorded and parents are informed by telephone if it is a serious bump always with a 'head bump' letter. In the event of serious injury or concerns, first aiders must complete an accident/ incident report form and then Mrs Harris will complete the **RIDDOR** form, sending a copy to the Local Authority and directing the child/ adult to see a doctor or visit an accident and emergency department to seek further advice. (see appendix 3)

Medical information about a child is gathered through the data collection sheets, which are issued annually, as well as through information provided by parent or carer. All important medical information is provided for class teachers and kept in classrooms. Records about those children with particular medical conditions or allergies are kept on the notice board in the School Office, as are children with Individual Healthcare Plans. (IHP)

All emergency phone numbers are kept in the contact file in the office. Medical information is located in a locked room by the office. All relevant information regarding medical conditions are passed on to the relevant teacher within the register, also the first aiders are aware of these. There is a brief detailed form on the first aid cupboard in the Staffroom with regard to allergies. There is also a file with copies of Individual Health Plans in the first aid room. Each new child that starts within the school supplies information regarding health issues, these are passed on to all relevant members of staff.

Food allergies are listed in each relevant child's register so that the teacher is aware. The school cook is notified of all children with food allergies.

Photographs are provided to help staff identify and therefore provide the appropriate care for specific children.

Hazeldene School will not discriminate against pupils with medical needs. In certain circumstances it may be necessary to have in place an Individual Health Care Plan. This will help staff identify the necessary safety measures to help support young people with medical needs and ensure that they,

and others, are not put at risk. These plans will be drawn up in consultation with parents and relevant health professionals. They will include the following:-

- Details of the young person's condition
- Special requirements i.e. dietary needs, pre-activity precautions
- Any side affects of the medicines
- What constitutes an emergency
- What action to take in an emergency
- Who to contact in an emergency
- The role staff can play

Administration of medicines

If a child needs medicine that has been prescribed by a doctor a request must be made for medicine to be administered to the young person at school using the appropriate form. (Appendix 2). This must contain clear instructions regarding dosage. These are kept in the blue folder in the office.

Each request for medicine to be administered to a young person in school will be considered on its merits.

Medicines

Medicines that have been prescribed by a doctor, dentist or nurse prescriber should always be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions for administration. We will not accept medicines that have been taken out of the container as originally dispensed nor make changes to dosage on parent's instructions. We will only administer medicine which is prescribed four times a day. In some instances we will administer medicines that have been bought over the counter such as Piriton and Calpol however staff will never give a non-prescribed medicine to a young person unless there is a specific prior written agreement from parents. A young person under 16 should never be given aspirin or medicines containing ibuprofen unless prescribed by a doctor.

Medicines brought into school are kept in a fridge in the staffroom or in a lockable cupboard. They are stored strictly in accordance with the product instructions and in the original container in which dispensed. Staff ensure that the supplied container is clearly labelled with the name of the young person, name and dosage of the medicine and the frequency of administration.

All Medicines, including controlled drugs, will be returned to the parent, when no longer required, for them to arrange for safe disposal. They should also collect medicines held at the end of each term.

Educational Visits

Prior to any residential visit taking place medical forms will be completed by the parents/carers of all pupils. This will allow the school to consider what reasonable adjustments may need to be made to enable young people with medical needs to participate fully and safely on visits. Arrangements for taking any necessary medicines will need to be taken into consideration. Staff supervising excursions will always be aware of the medical needs and relevant emergency procedures of pupils in their care. .

Copies of medical forms will be taken on the visit and relevant information also stored in school.

If staff are concerned about whether they can provide for a young person's safety, or the safety of others, on a visit, the school will seek parental views and medical advice from the school health service and/or the young person's GP, Specialist Nurse or Hospital Consultant.

Prior to the residential, medication should be handed to the first aider by parents/ carers. Following the visit, the first aider will hand back any medication to the child's parent. (Medication should not be handed back to the child).

Asthma

Parents of asthmatic children are asked to complete a school medicine form to ensure that their child is equipped with a labelled inhaler. We also request that school is provided with a spare inhaler. Inhalers are stored in individual bags in the classroom in a cupboard. The cupboard has a red cross on it and the child has access to them at all times. Aysha Magre is responsible for insuring these inhalers go home each half term and check they come back in after the holidays in date.

We encourage children with asthma to participate in all aspects of the curriculum including PE. The school does all that it can to ensure that the environment is favourable to pupils with asthma.

This policy has been written by Helen Ward
Date for Review October 2017

Appendix 1
HAZELDENE SCHOOL
HEADTEACHER: Mrs Helen Ward

Dear Parents

The Administration of Medicine within school

It is important for the safety of our children that school has a safe, clear, smooth-running system of administering medicines to children during the school day.

The policy document has recently been updated and the new procedure is outlined below.

There are two main sets of circumstances when parents require medication to be administered to children in school:

- cases of chronic illness or long-term conditions such as asthma or diabetes;
 - cases where children are recovering from a short-term illness but are fit enough to come to school although require the completion of a course of medication, e.g. antibiotics
- Where possible, it is preferable that parents (or an adult nominated by the parent) administers' medication to their children. However, there are times when this might not be practicable and we will therefore administer the medicine . Please note we will only administer the medicine when it is prescribed to be taken four times in twenty four hours.

In these cases a written request must be made for medicine to be administered to your child in school. Each request will be considered on its merits. No organisation can insist that staff members administer medicine; however, our staff have agreed to administer medication in line with Bedford Borough Council Health and Safety guidelines and procedures outlined below:

It is the parent's responsibility:

- To ensure the appropriate form 'request for school to give medication' (available from Mrs Norman, our office manager) to be completed and approved;

- Once approved, to hand the medication to the above, clearly labelled with the owner's name, contents, and dosage, in the smallest practicable amount. No medicine can be accepted from a child;
- To collect the medication at the end of the day and to ensure that it is returned each day for the agreed period of administration.

The purpose and clarity of these procedures is important in ensuring the safety of all the children.

For your information we have included a copy of the 'Request for School to give Medication' form on the reverse of this letter.

Thank you for your support.

Yours sincerely
 Helen Ward
 Hazeldene School

Appendix 2 Administration of Medicines

Parental agreement for Hazeldene School to administer medicine.

Hazledene will not give your child medicine unless you complete and sign this form, and we have a policy in place so that staff can administer medicine.

Name of school	HAZELDENE LOWER SCHOOL
Name of child	
Date of birth	
Class	
Medical condition or illness	

Medicine

Name/type of medicine (as described on the container)	
Expiry date	
Dosage and method	
Timing	
Special precautions/other instructions	
Are there any side effects that the school need to know about	
Self-administration – yes/no	
Procedures to take in an emergency	

NB: Medicines must be in the original container as dispensed by the pharmacy

Contact Details

Name
 Daytime telephone number
 Relationship to child
 Address
 I understand that I must deliver and collect the medicine personally to the school office.

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

Signature Date

Appendix 3

Record of medicine administered to all children

Name of school/setting HAZELDENE SCHOOL

Date	Child's name	Time	Name of medicine	Dose given	Any reactions	Signature of staff	Print name

Appendix 4

Record of medicine administered to an individual child

Name of school	HAZELDENE SCHOOL
Name of child	
Date medicine provided by parent	
Class	
Name of medicine	
Expiry date	
Dose and frequency of medicine	

Staff signature

Signature of parent

Date	Time given	Dose given	Name of member of staff	Staff initials

Appendix 5

RIDDOR - Incidents to be reported

Accidents resulting in death or major injury

Accidents which prevent normal duties for more than 3 days

Loss of consciousness due to asphyxia or absorption of harmful substances

Fractures / Dislocations

Amputation

Loss of sight - temporary or permanent

Chemicals or hot metal burn to eye

Penetrating eye injury

Electric Shock

Injury leading to hypothermia

Unconsciousness needing resuscitation / hospital admission for over 24hrs.