



**First Aid Policy** 

# (To be read in line with the supporting pupils



with medical needs Policy)

## DATE: July 2023

## **Review date: July 2024**

### Stand tall, reach high, love learning

The Bowerham School community is proud to nurture aspiration, inspire love for life-long learning and prepare children for a changing society.

At Bowerham School we:

- Ensure all children have access to a fun and engaging, ambitious and creative curriculum that widens their life experiences
- Develop confident and independent learners with motivation, curiosity and a love of learning
- Ensure all children learn about and demonstrate the British Values of: tolerance, mutual respect, individual liberty, democracy and rule of law, while respecting differences including gender, ethnicity, religion and ability.
- Nurture, develop and challenge children to be aspirational and secure within themselves in order to prepare them for their future

#### Aims:

The aim of this policy is to set out guidelines for all staff in school in the administering of First Aid to children, employees or visitors. This policy shall be shared with all employees during their induction to ensure they are familiar with the school's first aid procedures. The Governors are committed to the Local Authority's procedure for reporting accidents and recognize their statutory duty to comply with the Reporting of injuries, diseases and dangerous occurrences regulations 1995.

#### What is first aid?

First aid can save lives and prevent minor injuries becoming major ones. Under health and safety legislation employers have to ensure that there are adequate and appropriate equipment and facilities for providing first aid in the workplace.

#### First aid and medication

At least one member of staff with current first aid training is on the premises at any one time. The first aid qualification includes first aid training for infants and young children.

The school currently has 65 emergency first aiders with valid certificates.

Posters displaying the names and locations of first aiders are on display around the school.

#### Our First Aid Kits:

• Comply with the Health and Safety (First Aid) Regulations 1981 and British Standard – BS 8599-1:2011;

• Include assorted plasters, disposable sterile triangular bandages, eye pads, medium-sized dressings, large-sized dressings, sterile cleansing wipes, nitrile powder-free gloves, first aid in an emergency booklet, safety pins, resusci aide, Tuff-Kut scissors, Burnshield dressing or cling film, finger dressings, conforming bandages, disposable heat retaining blanket, microporous tape and disposable tweezers.

• Are regularly checked.

Class teachers and support staff are responsible for maintaining the kits in their individual rooms. Senior midday meals supervisors are responsible for the resourcing of their lunch time bags, after school club take theirs out x

A location accessible to the school office hosts one of 3 Main first aid kits which are regularly checked and restocked. A second in nursery and a third in 2 year old provision both of which are maintained by the named first aider in each room. The remaining two are located in the PE hall and multi-use room. These are checked and restocked at the end of every half term by Site Supervisor.

- Are re-stocked as necessary;
- Are easily accessible to adults; and
- Are kept out of the reach of children.

#### Accident books:

• Due to the fact that we have a large school site, there are 5 accident books on the school premises. These are kept safely but accessible to first aiders.

• The infant and junior playgrounds have separate books for accidents that happen at playtimes and lunchtimes.

• The school office has its own book for accidents that happen at any other time. All serious accidents must be recorded in the office book, on the same day, and then handed to the School Business Manager to be uploaded onto IRIS (the electronic incident reporting system for the local authority) within 24 hours if applicable.

• The nursery and 2-year-old provision staff maintain their own records for their own children, which are shown to and signed by the parents at the end of the day.

• All staff and volunteers know where they are kept and how to complete them.

• All accident books are reviewed half termly to identify any potential or actual hazards. Our accident books keep a record of any first-aid treatment given by first aiders. These accident books MUST be written in pen, completed on the same day of the incident, and include:

- The date, time and place of the incident.
- The name of the injured or ill person.
- Details of the injury and first-aid given.

• What happened to the person immediately afterwards (for example, whether they went home, went back to class, or went to hospital). The information in the accident books can:

• Help the school identify accident trends and possible areas for improvement in the control of health and safety risks;

• Be used for reference in future first-aid need assessments;

• Be helpful for insurance and investigative purposes. All completed accident books should be given to the School Business Manager, who will store them for reference in future. Ofsted requirement to notify parents and the Data Protection Act Parents must be informed of any accidents, injuries sustained and/or first aid treatment given to their child whilst in school. The first-aider who treated the injury will be the person who contacts the parent to inform them of what happened and recommended next steps. Staff must be aware of the Data Protection Act and not allow parents to view personal information other than that relating to their child and must not allow parents to take photographs other than of their own child. It is not standard practice to give parents copies of the school's accident record. However, if a parent requests a copy of the accident form then this will need to be authorised by a member of the senior leadership team.

#### **Medical Emergencies at Bowerham**

All members of staff who have contact with pupils who have medical conditions will be informed about the best course of action if a child becomes seriously ill and needs emergency treatment. The child and the parents will be informed about the school's arrangements and there will be details in the plan if appropriate. The school will call an ambulance before contacting parents if a child becomes seriously ill – this applies to all children and not only those with health care plans. The school will arrange for a competent member of staff to travel to hospital in an ambulance and act in loco parentis until the parents arrive. The member of staff in loco parentis will have the right to sanction emergency procedures as advised by medical staff in the ambulance or at the hospital.

• We do not provide care for children, who are unwell, e.g. have a temperature, or sickness and diarrhoea, or who have an infectious disease

.• Children with head lice are not excluded, but must be treated to remedy the condition.

• HIV (Human Immunodeficiency Virus) may affect children or families attending the school. Staff may or may not be informed about it.

• Children or families are not excluded because of HIV status.

• Good hygiene practice concerning the clearing of any spilled bodily fluids is carried out at all times by the Health and Safety Coordinator and the Emergency First Aiders. Treatment of injuries Following an accident, the First Aider is to take charge of the first aid administration/emergency treatment commensurate with their training. Following their assessment of the injured person, they are to administer appropriate first aid and make a balanced judgement as to whether there is a requirement to call an ambulance. The First Aider should call an ambulance on the following occasions:

- In the event of a significant injury or head injury
- If bleeding cannot be controlled
- In the event of a period of unconsciousness
- Whenever a fracture or break is suspected
- Whenever the first aider is unsure of the severity of the injuries

Treatment of head injuries to children. Children often fall and bang themselves, and thankfully most bangs to the head are harmless events and can be dealt with by the supervising adult by applying a cold compress (wet tissue or cloth) for the child's own comfort. Parents/Carers must be contacted if the child has a visible or grazed bump to the head. All head bumps must be recorded into the accident book and a letter sent home informing parents of possible symptoms to look out for. It is the responsibility of the first aider dealing with the head bump to contact the parent and also inform the class teacher. Emergency First Aiders should be sought if the child:

- becomes unconscious;
- is vomiting or shows signs of drowsiness;
- has a persistent headache;
- complains of blurred or double vision;
- is bleeding from the nose or ear; and/or

• has pale yellow fluid from the nose or ear. If any of the above symptoms occurs in a child who has had a bang to the head, urgent medical attention is needed. Parents should be contacted and the emergency services too. In the event of an accident in which the child cannot stand up unaided, he/she should be left in the position that he/she was found (even if this is in the toilets or playground) so long as it is safe to do so and the emergency first aider must be called immediately to assess the situation. Treatment of suspected breaks/fractures The seven things to look for are: 1. Swelling 2. Difficulty moving 3. Movement in an unnatural direction 4. A limb that looks shorter, twisted or bent 5. A grating noise or feeling 6. Loss of strength 7. Shock

• If it is an open fracture, cover the wound with a sterile dressing and secure it with a bandage. Apply pressure around the wound to control any bleeding.

- Support the injured body part to stop it from moving. This should ease any pain and prevent any further damage.
- Once you've done this, call 999 or 111 for medical help. While waiting for help to arrive, don't move the injured person unless they're in immediate danger. Keep checking the casualty for signs of shock.

**First Aid training** states that clothing should only be removed if absolutely necessary. Where clothing needs to be removed which could cause a safeguarding issue then two members of staff should be present. Only one needs to be first aid trained. However, if waiting for a second member of staff puts a child's life in danger then the first aider should not withhold treatment. Disposing of blood or bloodied items should be placed in the yellow clinical waste bags and disposed of in the sanitary bin in the female staff toilets.

**Splinters-** Splinters can be removed if they are small and you can see the angle it went in but not if they are embedded or in a joint. They must be extracted in the same direction they went in. Sterile single-use tweezers are stored in the main first aid box located in the school office. Nursery have their own stock

**Asthma** We have many children at Bowerham with Asthma. All pumps are labelled and kept in the class medical trays. In the event of an attack, the inhaler must be taken to the child. 9 All inhalers should accompany children when they are off the school grounds e.g. on a trip, swimming, visiting another school, etc. Children on the asthma register who have parental consent for the use of the emergency inhaler are clearly indicated.

**Epi-Pens** are labelled and kept in the class medical trays. A spare is held in a locked cupboard in the school office. Anyone can administer an Epi-Pen in an emergency if the adult/child is unable to do it themselves. Should a member of staff, who has not had the training have to do this, then the emergency services must be informed at the same time as the Epi-Pen is administered.

**Diabetes** Where a child has a diagnosis of Diabetes. The child's IHP will have details of the child's needs and procedures, as agreed by parents, diabetes nurse and school. School is responsible for checking the insulin given by parents is in date. All insulin and equipment (diabetes pen, pump, or blood glucose meter) is kept at the school Office. Every time a trained member of staff is administering insulin, whether, through a pen or a pump, each dose is recorded. All sharps are stored in a Sharps Bin provided by parents, prescribed to the child, in the central office. It is the parents' responsibility to dispose of their child's sharps bin. School are to inform parents when the bin needs replacing.