

Ashton CEVC Primary School



Administration of First Aid and Medicines Policy

“Do for others just what you want them to do for you.”
Luke 6 v 31

Rationale

Children and adults in our care need good quality first aid provision. Clear and agreed systems should ensure that all children are given the same care and understanding in our school. This care should extend to emergency first aid provision and the administration of medicines; including the management and/or treatment of Asthma and Epilepsy.

Purpose

This policy;

1. Gives clear structures and guidelines to all staff regarding all areas of first aid and medicines
2. Clearly defines the responsibilities and the staff
3. Enables staff to see where their responsibilities end
4. Ensures the safe use and storage of medicines in the school
5. Ensures the safe administration of medicines in the school
6. Ensures good first aid cover is available in the school and on visits

Guidelines

New staff to the school are given a copy of this policy when they are appointed. This policy is reviewed and updated annually. This policy has safety as its priority. Safety for the children and adults receiving first aid or medicines and safety for the adults who administer first aid or medicines.

Conclusion

The administration and organisation of first aid and medicines provision is taken very seriously at Ashton CEVC Primary School. There are annual procedures that check on the safety and systems that are in place in this policy. Adjustments are made immediately if necessary.

First Aid Policy Guidelines

Training

All staff at Ashton CEVC Primary School are offered emergency first aid training. This is repeated on a 3 year cycle. Staff recruited mid cycle will be offered the training too. Dates of training are recorded on the school's Safeguarding Audit. 3 members of staff are fully trained first aiders – having been accredited with the **Paediatric First Aid**. With 3 fully trained first aiders, there should always be one on the school premises at any one time. Fully trained first aiders attend retraining courses as required.

First aid kits are kept in the cupboard in the disabled toilets in the hall. First aid kits must always be carried on any school trip.

All injuries sustained on school premises are expected to be recorded in the Minor Incident File and a letter sent home to parents within the same school day. All forms are kept in the school office.

Cuts

Cuts can be treated by **any** trained first aider. All open cuts should be covered after they have been cleaned with clean water or a medi wipe. **All plasters used should be dermalogically tested to ensure that no child can have an allergic reaction to wearing one.** (N.B. All parents/guardians are asked to complete a Medical Form that details any allergies when they register their child at Ashton CEVC Primary School).

For more severe cuts a fully trained first aider must attend the patient to give advice.

All cuts must be recorded in the Minor Incident File (which is kept in the cupboard).

ANYONE TREATING AN OPEN CUT SHOULD USE RUBBER GLOVES.

Bumped heads

Any bump to the head, no matter how minor is treated as serious. All bumped heads should be treated with an ice pack; and the child's teacher must be informed and asked to keep a close eye on the progress of the child throughout the remainder of the day.

All bumped head incidents must be recorded in the Minor Incident File **and the child's parent/guardian must be contacted by telephone to ensure that they are aware of the incident and the treatment provided BEFORE the child leaves that day.** Concerned parents should always be invited to come into school to assess their child personally. A bumped head letter must be sent home with the child on the same day that the injury occurs.

Any trained first aider can apply an ice pack when a child or adult has bumped their head. However, if the child shows any signs of concussion then advice from a fully trained first aider must be sort.

The signs of concussion include:

- Dizziness or nausea.
- Loss of memory of any events that occurred at the time of, or immediately preceding, the injury.
- Mild, generalised headache.

Bumps & grazes to other parts of the body

If a child reports an injury to any part of their body that is above the knee but below the neck (not including the arms) - that is hidden by their clothing - then they must be asked if they are comfortable to show their injury to a trained first aider. In the event that a child needs to remove any clothing to expose the region that has been injured then another member of staff must be present.

Any child who does not feel comfortable to do this should be encouraged to examine themselves privately, and report any marks, bruising or bleeding. If a child reports that they are injured but still feels uncomfortable to have the injury assessed by a first aider then their parents must be contacted by telephone to make them aware of the situation; and that no treatment has been able to be carried out.

In the case of an emergency - and the need for a child to go to the local minor injuries unit at Northampton General Hospital - the child's parent must be called immediately. If all contacts are unavailable two members of staff will take the child by car to the hospital and the parent will be informed as soon as possible. A full handover of information about the child must be given to the hospital on arrival.

Calling the emergency services

In the case of major accidents, it is the decision of the fully trained first aider if the emergency services are to be called. Staff are expected to support and assist the trained first aider in their decision.

If a member of staff is asked to call the emergency services, they must,

1. State what has happened
2. The child's name
3. The age of the child
4. Whether the casualty is breathing and/or unconscious
5. The location of the school

In the event of the emergency services being called, a member of the Admin staff OR another member of staff, should wait at the gate and direct the emergency vehicle in through the school gates.

If the casualty is a child, their parents should be contacted immediately and given all the information required. If the casualty is an adult, their next of kin should be called immediately. All contact numbers for children and staff are clearly located in the school office.

Minor Incidents and First Aid File

The Minor Incidents and First Aid File is located in the Administration Office. At the end of each term, records are removed, analysed and stored in the filing cabinet in the Administration Office.

For major accidents - where the casualty leaves school early or further medical advice and services are sought - a further local authority form must be completed within 24 hours of the accident taking place. These forms are located in the filing cabinet in the Administration Office (filed under 'Medical'). The form must be copied twice, one copy placed in the file, one sent home with the casualty and the original copy forwarded to the local authority. The forms that have been sent to the local authority are kept for 21 years.

Medicines in School

What can be administered?

In school we can administer medicines prescribed by a doctor or covered by a doctor's note. All medicines must be clearly labelled with the child's name and clearly state the dosage that needs to be administered.

In some circumstances we are able to administer non-prescription medication but we must have **written** consent in order to do this and a record of any dose given is maintained in school and parents informed.

Parental permission

Medicines will not be administered unless we have the written permission of parents. Medicines forms are available from the school office.

Where medicines are stored

No medicines should be kept in the class or in the child's possession (except inhalers). All medicines are kept in the filing cabinet in the Administration office or in the kitchen fridge.

Administration of medicines file

All medicine permission slips are placed in the administration of medicines file, which is kept in the administration office.

Whenever medicine is administered, staff must first check to ensure that the medicine has not already been administered by checking the Medical form. They should also check the label on the medicine bottle/container to ensure they are administering the correct medicine and the correct dosage. Once the medicine has been administered, the Medical form must be completed and signed – **and a copy should be given to the child to take home.**

Once the course of medication is complete the Medical Form must be stored in the Filing Cabinet in the Administration Office (under 'Medical'). The member of staff responsible for administering the medication will be detailed on the Medical Form.

Asthma and other medical problems

At the beginning of each academic year, any medical problems are shared with staff and a list of these children – including their photograph and details of their conditions - are kept:

1. In the class register
2. In the school office
3. In the staffroom

Inhalers

Children should have their inhalers in school with them at all times. Key Stage 2 children are expected to take their inhalers with them whenever they do rigorous activity. Key stage 1 children will keep their inhalers with their class teacher in a designated container for safety.

Other asthma sufferers cannot share inhalers. In the event of a child having an asthma attack, who has no inhaler with them, the parents must be contacted and informed quickly (by telephone) and the emergency services contacted.

Epipens and anaphylaxis shock training

Some children require epipens to treat the symptoms of anaphylaxis shock. Epipens are kept in a box in the Administration Office. Staff receive regular training on the use of epipens.

Headlice

Staff do not touch children and examine them for headlice. If we suspect a child has headlice we will inform parents and ask them to examine them. When we are informed of a case of headlice in school, we send a standard letter to the class where the case has been identified.

Vomiting and diarrhoea

If a child vomits or has diarrhoea in school, they will be sent home immediately. Children with these conditions will not be accepted back into school until (in the event of vomiting) 48 hours OR (in the event of diarrhoea) 48 hours after the last symptom has elapsed.

Chicken pox and other diseases, rashes

If a child is suspected of having chicken pox etc, we will only look at their arms or legs with the child's permission. To look at a child's back or chest would only be done if we were concerned about infection to other children. In this case another adult would be present and we would ask the child if it was alright.

If a child has any of these infections they will need to stay off school for a prescribed period of time; as advised by School Nursing Team and public health advice.

Reviewed October 2023

To be reviewed October 2025