

Orchard Community Primary School



First Aid Policy

This policy was approved by the Governing Body of Orchard Primary School at their meeting on.....

Signed..... Chair of Governors

Version	Date	Author	Reason for Change
0.1	9/2018	FS	New Policy

Review Frequency	Next Review Date
Every 3 years	9/2021

INTRODUCTION

The safety and wellbeing of all children at Orchard Primary School is of the highest importance to all staff. This policy explains the practices in place to address the health needs of the children as they relate to accidents and medical conditions.

FIRST-AIDERS

First-aid training is carried out in line with current HSE and LA recommendations and by accredited training organisations to a recognized standard. The vast majority of school staff (teaching, support staff and midday supervisors) will undertake training on a one day 'Emergency First Aid at Work (EFAW) with Paediatric Element' course in order to qualify as a 'First-Aider'/'Appointed Person'. Full training will take place every three years.

A list of currently-qualified personnel is placed on the medical room notice board. An e-version of the list is held on the Headteacher's computer system with details of qualifying and renewal dates. Whole school first-aid training will be held at appropriate intervals with the aim of keeping as many school staff current and effective.

Key personnel who take responsible for dealing with any serious first aid matters and can be called upon to offer advice whenever required will include the Headteacher, the DHT, and the members of staff responsible for co-ordinating First Aid (Mrs Daft and Mrs Farrer).

Additional training will be undertaken by staff with designated responsibilities relating to individual pupils (e.g. managing diabetic pupils, using an epi-pen).

All qualified first aiders will administer to small cuts and bruises that are the normal occurrence in a school day. Lunchtime Supervisors have also undertaken emergency first aid training and are expected to deal with minor playground injuries as part of their duties.

FIRST AID EQUIPMENT

The medical room is the main area for the administration of first aid. The disabled toilet may also be of use in some circumstances. In the case of a child waiting for an ambulance or one in need of more serious medical attention, the Rocket Room will be used to provide a safe, quiet and comfortable place to keep the casualty.

Clearly labelled First-Aid kits are kept strategically placed nearest to areas of greatest risk. First Aid equipment for general use is kept in the Medical Room and in Class 1. First Aid packs containing gloves, plasters and wipes are kept in each classroom, and smaller, portable first aid packs are kept centrally in the staffroom for use by the lunchtime supervisors and on school trips. There is a separate First-Aid kit for school trips.

FIRST AID MATERIALS

First Aid boxes comply with the HSE minimum list. The content and currency of first aid equipment is regularly monitored, and if necessary replenished, by the members of staff appointed as co-ordinating First Aid (the office team).

Each box will contain:

ITEM	QUANTITIES
Individually wrapped sterile adhesive dressing	20
Sterile eye pads and attachments	2
Triangular Bandages	4
Safety Pins	6
Medium size sterile un-medicated dressings	6

Large sterile un-medicated dressings	2
One pair of disposable gloves	1

Other items:

- Disposable yellow plastic bags for the disposal of used dressing, swabs, disposable gloves etc.

FIRST AID PROCEDURES

Minor injuries sustained during break or lunchtime are dealt with by staff and midday supervisors in the medical room. Staff will summon help in cases of more serious injury using the 'Red Triangle' system. There is always the Headteacher, DHT or a member of the Senior Leadership Team (SLT) available at lunchtime, or after-school, in case of an emergency.

Minor injuries can be dealt with in school.

Any doubt about whether an injury needs further attention must be referred to the Headteacher or a member of the SLT. Obviously, serious injury will need to be dealt with as soon as possible and it is the Headteacher's/an SLT decision to call for an ambulance. If the Headteacher or an SLT member is not immediately available, any member of staff can phone for an ambulance. It is always better to err on the side of caution. The school's policy is: if there is any doubt, call an ambulance.

FIRST-AID TREATMENT

The aim of first-aid treatment is to sort out minor injuries in such a way that a pupil can return to normal school activities OR to stabilise a serious injury until expert medical help becomes available.

Treatment will be administered as per the training received. For example:

Procedure to adopt when dealing with bodily fluids

- Isolate the area.
- Always use disposable gloves. NEVER touch body fluids with your bare hands.
- In the case of blood-loss, give the pupil a cotton pad to hold against themselves whilst you put on disposable gloves.
- Clean the spillage area with the appropriate materials available from the Premises Officer's Room.
- Use the bodily fluids kit to deal with the spillage. E.g. powder on the liquid.
- Bag all materials in the yellow clinical waste bags used and dispose of in outside dustbin.
- Always wash hands with anti-bacterial pump soap after taking disposable gloves off.

Cleaning cuts/grazes

- Wear disposable gloves.
- Clean cuts using running water or water from a spray bottle and/ or alcohol wipes and if needed.
- Cover with a waterproof dressing (plasters are available for pupils with no plaster allergy. Padded dressings are also available).

Other

- Sprains can be bandaged and slings applied if a fracture is suspected.
- Rinse eyes with cold water or sterile saline solution.
- Ice packs are kept in the staffroom fridge and can be used to reduce the swelling for bumps and suspected strains and sprains; a cold compress will be used for head injuries.
- Ice pack holders will always be used to prevent direct contact between ice packs and skin.

- For bites or scratches, wash the wound in clean running water and then cover with a waterproof dressing.

CLINICAL WASTE DISPOSAL

All medical waste is disposed of in the designated clinical waste disposal units in the Medical Room. Soiled first aid material should be first wrapped in a plastic bag and then placed in a standard black bag lining the bin. Bins are emptied daily and the waste they contain disposed of appropriately and collected from the school by the LA collection services.

REPORTING PROCEDURES AND KEEPING A RECORD OF FIRST-AID TREATMENT

Any injury for which first-aid is administered **MUST** be recorded, however minor.

All appropriate record-keeping logs and documentation are kept with the medical room first-aid kits.

Statutory documentation relating to serious injury is kept in the School Office. All entries in first-aid logs and associated documents must be in pen and must adequately describe the injury and treatment, and be signed and dated. The log will be monitored by the Headteacher.

All head bumps, however minor must be recorded in the accident log with the injury marked with a X on a picture of a head. Parents must be informed of the situation by telephone and by 'head bump' letter. Younger pupils in EYFS/KS1 will be given a head bump sticker to wear on their jumper. A copy of the letter is kept in the accident book. It is vital that first-aiders pass on to class teacher information about head injuries happening during break-time and lunchtime so that the pupil can be kept under observation for delayed and untoward symptoms. This is also vital when handing on pupils to clubs after school.

Any pupil injured at break or lunch will be given an 'I've been injured' note to inform both their teacher, and the parents/carers that they have received first aid treatment; alternatively, the teacher may be informed personally by the first-aider in the case of more serious accidents. Parents of children receiving an injury whilst at school are always contacted as a matter of courtesy.

In more serious cases, the pupil should not be moved until checked by a First Aider. Parents will be contacted immediately and advised of the need to take the child to a doctor/hospital. In emergencies, an ambulance will be called and the parent informed immediately. In such cases the school's order of care is entrusted to the NHS ambulance personnel. School staff cannot give permission for casualty treatment.

Accidents needing hospital treatment will require the completion of a serious injury form which should be forwarded to the Health and Safety department of the Local Authority. This is the responsibility of the Headteacher or the Office Manager. This may need to be done retrospectively if the pupil is taken to hospital by parents after the end of the school day.

Any injury which is likely to result in a pupil being absent from school for three or more days should be immediately reported to Health and Safety under RIDDOR Regulations as per the Health and Safety Act.

OFF-SITE VISITS

All trip planning involves consideration of arrangements for medical issues and first aid. The school trip pro forma signed off by the Educational Visits Coordinator (EVC) makes explicit reference to this aspect of organisation and the trip will not be signed off until all reasonable eventualities are covered.

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 must be checked against the contents list before departure. Medical equipment (such as inhalers, nebulisers and Epipens) must be checked as functioning and in date. This is the responsibility of the trip leader.

Minor injuries can be dealt with in the usual way. Records must be completed at the time in the portable log in the first-aid kits. Details must be transferred to central log within a reasonable time after the return of the trip.

The lead teacher will inform school directly and immediately of any serious injury incurred by anyone on the trip. School will contact parents/next of kin, as appropriate. All teachers on or leading trips should be equipped with a charged mobile phone in to which the school number (and those of SLT) are entered. Residential trips are required to take with them the emergency contact details of all participants, including adults. Procedures to be followed in the case of serious injury are specified in detail in the Major Incident Policy.