

WESTFIELD SCHOOL

Main Road, Westfield, East Sussex, TN35 4QE

Tel: 01424 751404 Fax: 01424 756898

Headteacher: Matt Jarvis

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Westfield School

First Aid Policy

*(Including Medicines, Asthma and
Headlice)*

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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, the administration of medicines to dealing with Asthma and headlice.

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 regularly reviewed and updated. 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 Westfield School. There are annual procedures that check on the safety and systems that are in place in this policy. The school takes part in the Health and Safety checks by East Sussex County Council. The school also discusses its first aid and medicines procedures with the school nurse each year. Adjustments are made immediately if necessary.

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FIRST AID POLICY GUIDELINES

First Aid AT Westfield School

Revised April 2015

Training

Staff volunteer for specific first aid training. At this moment in time, we have three members of staff fully trained as First Aiders at Work, three Paediatric First Aiders and most TAs are trained as Emergency First Aiders. With three fully trained first aiders and three Paediatric First Aiders, there should always be at least one on the school premises at any given time. A Paediatric First Aider will accompany Reception aged children on all off site school trips. Fully qualified first aiders attend retraining courses every three years as required and all Emergency First Aiders attended a refresher training session each year as recommended.

We also have two members of staff specifically trained in the administration and control of medicines; EYFS and KS1-Sherry Thunder and KS2 Cheryl Finch. All medicines must only be administered by these two members of staff.

A number of staff are trained in blood glucose level testing, caring and administering injections to diabetic children. A list of all first aider's qualifications is on view on the door of the first aid cupboard and on the classroom information posters.

Annually, the children in Year 6 attend a half day training session with St John's Ambulance, giving them experience in basic CPR and how to deal with bleeding, burns, head injuries and electrocution.

First Aid Kits

MDSAs and all classrooms are issued with their own first aid kits. These must be carried with all staff on duty at break and lunchtimes. First aid kits are stored in the first aid cupboard next to the atrium doors. All classes have an emergency first aid kit that the teacher keeps in a convenient place.

Cuts And Minor Injuries

The nearest adult deals with small cuts and minor injuries. All open cuts should be covered after they have been treated with water or alcohol free wipes only. Children should always be asked if they can wear plasters BEFORE one is applied. Children who are allergic to plasters will be given an alternative dressing. All minor injuries need to be recorded in the child's section of their class accident file and a parent advice slip sent home.

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Any first aider can treat more severe cuts, but a fully trained first aider must attend the patient to give advice. More serious cuts and injuries should be recorded in the accident file, the parents informed by phone and an advice slip home.

ANYONE TREATING AN OPEN CUT SHOULD WEAR VINYL DISPOSABLE GLOVES. All blood waste is disposed of in the first aid bin, located in the first aid area by the atrium doors.

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. Parents and guardians must be informed **BY TELEPHONE AND A RED ADVICE SLIP HOME**. Parents should be advised to seek professional medical advice. The child's teacher should be informed so they can keep a close eye on the progress of the child. **ALL** bumped head incidents should be recorded in the child's section of their class accident file.

Choking

A choking child should be given up to 5 back slaps and 5 abdominal thrusts which should be repeated until the blockage is dislodged. Any child given even one abdominal thrust should be sent to hospital to check for bruising and damage to internal organs and the head teacher and parents informed immediately.

Eyes

Any foreign object on the white of a child's eye can be washed out using sterile eye irrigation solution. Parents need to be informed. A child with foreign objects on the iris, pupil or embedded in any part of the eye should be sent straight to hospital.

Accident Files

The accident files are located in the first aid cupboard next to the atrium doors. Each year group has their own file and every child has their own personal record sheets. These are replaced each year. Old record sheets are stored in each individual child's school file and kept for a minimum of seven years.

For major accidents, a further county report form (RIDDOR) must be completed within **24 hours** of the accident. These forms are located in the office. Please ask the secretary for assistance. These forms need to be signed by the Head teacher, a copy taken and placed in the child's section of their class accident file and the original copy forwarded to county.

For injuries to adults on the premises, the adult accident file is located in the school office. Serious incidents should be reported to the Head teacher and county as above.

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Toxins and Chemicals

Every care is taken to ensure that children do not have access to anything toxic within the school and grounds. However, in the event of a child swallowing something that is suspected to be toxic eg. berries or similar, parents should be CONTACTED IMMEDIATELY AND TOLD TO COLLECT THEIR CHILD. They should take them to A & E for medical attention and assessment. A sample of the plant or substance that has been swallowed should be given to A & E staff wherever possible. If parents are not immediately available, then the NATIONAL POISONS UNIT 0844 892 0111 should be contacted for advice. The child must be closely monitored and an ambulance called if necessary. When dealing with accidents involving chemicals held within the school, the first aiders will follow the guidelines that have been put in place following the COSHH assessment.

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. The Head teacher must be informed as soon as possible. **DO NOT MOVE THE CHILD.**

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 by the school gate on the A28.

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 or on the SIMs program.

Medicines In School

At Westfield, we recognise that there will be occasions when it is necessary to administer medicines during school hours. However, before asking us to administer medicines we would ask you to consider the following:

- **Does your child really need the medication?** The benefits of administering over the counter medicines to your child need to be clearly weighed against the risks.

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- **Does the medication need to be administered during school hours?** Often medicines such as paracetamol and ibuprofen suggest doses can be administered every 4 to 6 hours. As the school day is 5 hours long it is normally quicker to administer the medicine just before and just after school. Even medicines that need to be taken 3 times a day can be taken before school, at the end of the school day and just before bed.
- **How long does your child need to be taking the medication?** When the school is asked to administer over the counter medicines such as paracetamol it is important for us to know when to stop giving your child the medication. Often, medicines will state a maximum time to administer the medication before visiting a doctor, e.g. most paracetamol bottles state if symptoms persist for longer than 48 hours, please visit your doctor.

Having considered these questions, if you need to ask us to administer a medicine to your child please make sure the medicine is handed to the school office staff by an adult who is able to give consent for the medicine to be administered.

What Can Be Administered?

In school we will administer medicines such as antibiotics, anti-histamine, cough mixture, throat lozenge and paracetamol. All medicines must be clearly labelled with the child's name, class and be in their original packaging. Parents should also state how long medicines have been open, if applicable, as some medicines have a short life span once they have been opened. If the child has already received a dose of the medicine, you must also give the time that the dose was administered to enable staff to ensure the correct time is given between doses. **Recent training on the 'Administration of Medicines' has recommended that only the two trained members of staff may administer medicines to a specific child. This enables the school to ensure children are given the appropriate dosage to meet a specific medical condition.**

ANTIBIOTICS

We can administer antibiotics although this is usually undertaken by the member of staff trained in administration of medicines. In her absence it will be under taken by one of the fully trained first aiders. We can only administer ONE dose of an antibiotic during the school day.

ANTI-HISTAMINE

We can administer anti-histamines in school. This will be administered by staff as above. We will administer these medicines as stated or when required.

COUGH MIXTURE/THROAT LOZENGES

We can administer cough mixture and throat lozenges in school, by staff as above. We will administer these medicines as stated or when required. Children should not be sucking on throat lozenges unsupervised.

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PARACETAMOL/IBUPROFEN

We can administer paracetamol/ibuprofen in school, by staff as above. We will administer these medicines as stated. These medicines recommend visiting a doctor if symptoms persist for longer than 48 hours. Because of this we will only administer the medicine for that period of time without further contact with you to give permission to continue. Please also remember to take the medicine home again when it is no longer needed.

CREAMS

We can administer creams for mild skin conditions. HOWEVER, staff must not rub cream onto a child's body, unless agreed with the parents. With agreement, application of these creams must be made under the observation of another adult. Children may bring in their own, named, sun cream on hot days, which the teacher will keep in a safe place in the classroom.

SUN CREAM

Children should apply their own sun cream, under supervision of an adult.

Parental Permission

Medicines will not be administered unless we have the written permission of parents.

Medicines forms are available from the school office.

In the event of a child coming into school with medicines without a permission slip, we will attempt to gain consent for administration over the phone. If we are unable to contact parents this way then the **medicine will not be administered**.

Where Medicine Is Stored

No medicines should be kept in the class or in the child's possession (**except inhalers and epipens**). All medicines are kept in the staff room fridge or locked medicine safe at the bottom of the staff room stairs.

Administration Of Medicines Records

All medicine permission slips are placed in the child's section of their class accident folder. When medicine is administered, staff must complete the dated entry section which is printed on the back of the consent form and an advice slip to parents stating the dosage and time that the medicine was given. Before administering medicines, staff should check the dated entry section on the back of the consent form, to check that the medicine has not already been administered.

All medicines held in the safe are checked at the end of each term to ensure that they are still in date and if due to expire, returned to parents so they can provide a replacement if necessary.

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At the end of the academic year, all medicines are returned to parents. Any remaining medicines will be taken to a local pharmacy for their safe disposal.

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 and their conditions is kept in the Health Folder in the first aid cupboard. Each class teacher is given their own individual file for their year group. All files are updated as soon as new information is given by parents. New photographs and signs each year are made of children with severe medical problems such as asthma. These signs and notices are displayed at the bottom of the staff room stairs.

Epipens And Anaphylactic Shock

Some children require epipens to treat the symptoms of anaphylactic shock. For each child with this type of extreme diagnosis, there should be an epipen available in the classroom, suitably labelled and date checked. Staff receive training on the use of epipens. Children who require these epipens are listed as above. As the risk of allergic reaction (mild or severe) is ever present in all our lives, the school carries a spare epipen for use in the case of an emergency. This is stored in the school's medicines safe.

Inhalers

Inhalers for each class are stored in the class cupboard so that they are available quickly if needed. The class teacher will take inhalers on trips and have them available for PE, Run a Mile and other rigorous activities.

IDEALLY, ASTHMA SUFFERERS SHOULD NOT SHARE INHALERS. HOWEVER IN THE EVENT OF A SEVERE ASTHMA ATTACK WHERE THE PUPIL'S OWN INHALER CANNOT BE REACHED QUICKLY, IT IS APPROPRIATE TO USE ANOTHER PERSON'S MEDICATION TO SAVE A LIFE.

In the event of a child having an asthma attack, who has no inhaler, the parents must be sought quickly by phone to give permission for the administration of someone else's inhaler. If parents cannot be located, then the emergency services will be contacted and they would give permission for the sharing of the inhaler.

Please remember to update the school if your child no longer needs an inhaler. If your child is registered at school as asthmatic but does not have an inhaler this can cause problems with permissions for school trips etc.

Headlice

Staff do not touch children and examine them for headlice. If we suspect a child has headlice we will inform the parent and they will 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.

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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 **24 hours after the last symptom has elapsed.**

Chicken Pox, Rashes And Other Infectious Diseases

If a child is suspected of having chicken pox etc, we will look at their arms or legs. 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 your child has any of these infections they will need to stay off school for a prescribed period of time. The Head teacher or school office will advise timescales.

Revised 12.12.18
Matt Jarvis
Laylee Pocock

Karen Whitehead/Carrie Spice/Pat Burgess FAWs