

Morpeth First School First Aid and Medication Administration Policy

Policy Statement

Morpeth First School will undertake to ensure compliance with the relevant legislation with regard to the provision of first aid for all employees and to ensure best practice by extending the arrangements as far as is reasonably practicable to children and others who may also be affected by our activities.

Responsibility for first aid at Morpeth First School is held by Nadine Fielding (Headteacher) who is the responsible manager.

The Health and Safety Executive (HSE), states that under the Health and Safety (First-Aid) Regulations 1981, 'first aid' refers to:

- Treatment for the purpose of preserving life and minimising the consequences of injury and illness until help from a medical practitioner or nurse is obtained, and;
- The treatment of minor injuries which would otherwise receive no treatment, or which do not need treatment by a medical practitioner or nurse.

This policy should be read in conjunction with 'Supporting Children with Medical Conditions' (available on our website) which deals with our approach to medication and its administration.

All first aid provision is arranged and managed in accordance with the Children's Services Safety Guidance Procedure SGP 08-07(First Aid).

All staff have a statutory obligation to follow and co-operate with the requirements of this policy.

Aims & Objectives

Our first aid policy requirements will be achieved by:

- Carrying out a First Aid Needs Assessment to determine the first aid provision requirements for our premises
- Reviewing our policy following any significant changes that may affect first aid provision
- Ensuring that there are a sufficient number of trained first aid staff on duty and available for the numbers and risks on the premises in accordance with the First Aid Needs Assessment
- Ensuring that there are suitable and sufficient facilities and equipment available to administer first aid in accordance with the First Aid Needs Assessment
- Ensuring the above provisions are clear and shared with all who may require them

First Aid Training

The Head Teacher will ensure that appropriate numbers of appointed persons, school first aid trained staff, emergency first aiders, qualified first aiders and paediatric first aid trained staff are nominated, as identified by completion of the First Aid Needs Assessment, and that they are adequately trained to meet their statutory duties.

Appointed Persons

Where the first aid needs assessment identifies that qualified first aid staff are not necessary due to the nature/level of risk, the minimum legal requirement is to appoint a person (the Appointed Persons) to be on site at all times during the working day. Appointed persons are in place to take charge of first aid arrangements including looking after equipment and calling emergency services or directing others to do so. They are also responsible for ensuring that adequate first aid equipment is correctly stored and ensuring that the AED battery is functioning.

Note: Appointed Persons are not necessarily First Aiders and should not provide first aid for which they have not been trained. However, it is good practice to provide appointed persons with some level of first aid training. Such training does not require HSE approval. At Morpeth First School the appointed person responsible for the oversight of the first Aid arrangements is Amy Moody who is also Paediatric First Aid trained.

School First Aid Trained Staff

At Morpeth First School, most teachers, teaching assistants and some lunchtime supervisors hold Paediatric First Aid Certificates which includes first aid for adults and children of any age. This ensures that at any point during the day and in different areas of the school, including EYFS and wrap around care, there are several members of staff that can be called on to administer first aid where necessary to both children and adults.

They will be responsible for administering first aid, in accordance with their training, to those that become injured or fall ill whilst at work or on the premises. They may also have other duties and responsibilities which are identified and delegated as appropriate (e.g. first aid kit inspections).

First Aid Needs Assessment

Our First Aid Needs Assessment has identified the following first aid kit requirements:

There are several first aid kits on the premises. They are in the following locations:

- The medical room. There is an extensive supply of first aid equipment situated in the cupboard above the sink
- EYFS unit
- Outside on the main yard during lunchtime
- Forest school
- 2 kits for use on school trips kept in medical room and taken when required
- The kitchen (specifically for use in that area)
- Each classroom also keeps a small supply of plasters, wipes etc for use in the case of small minor injuries

It is the responsibility of the Appointed person to undertake a regular check of the contents of all first aid kits at the beginning of each term and reorder items required. Class staff / first aiders should also ensure that class medical kits are replenished as items are used and inform the appointed person if supplies are dwindling from the main store in the medical room.

First Aid Room

The Medical Room (situated at the main entrance of the school) is designated as the first aid room for treatment, sickness and the administering of first aid and administration of medicines. The first aid room has the following facilities:

- Clean running water;
- first aid kit/supplies; plastic chairs that can be easily disinfected;
- a fridge
- easy access to the telephone.

There is also an automated external defibrillator device (AED)

First Aid Provision

The school will routinely re-evaluate its first aid arrangements, at least annually, to ensure that these arrangements continue to be appropriate for hazards and risks on the school premises, the size of the school, the needs of any vulnerable individuals onsite, and the nature and distribution of pupils and staff throughout the school. The school will have suitably stocked first aid boxes in line with the assessment of needs. Where there is no special risk identified, a minimum provision of first aid items will be as follows:

- A leaflet giving general advice on first aid
- 40 individually wrapped sterile adhesive dressings, of assorted sizes
- 2 sterile eye pads
- 4 individually wrapped triangular bandages, preferably sterile
- 4 medium-sized (approximately 12cm x 12cm) individually wrapped sterile wound dressings
- 2 large-sized (approximately 18cm x 18cm) individually wrapped sterile dressings 2 conforming bandages
- 5 low adherent dressings (approx 10cm x 10cm)
- 1 roll of hypoallergenic tape

- 1 pair of shears, with rounded ends
- 6 pairs of disposable gloves
- 10 packs of 5 sterile gauze swabs (5cmx5cm) and/or individually wrapped alcohol free moist wipes
- 1 finger dressing
- 1 foil blanket

The appointed person will routinely examine the contents of first aid boxes, including any mobile first aid kits for offsite use – these will be frequently checked and restocked as soon as possible after use. Items will be safely discarded after the expiry date has passed. Staff taking the kits of site should also ensure the contents meet the requirements.

Emergency Arrangements

Upon being summoned in the event of an accident, the first aider and/or appointed person 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/appointed person is to always call an ambulance on the following occasions:

- In the event of a serious injury
- In the event of any significant head injury
- In the event of a period of unconsciousness
- In the event of a serious asthma attack or allergic reaction
- Whenever there is the possibility of a fracture or where this is suspected
- Whenever the first aider is unsure of the severity of the injuries
- Whenever the first aider is unsure of the correct treatment

In the event of an accident involving a child, where appropriate, it is our policy to always notify parents of their child's accident if it:

- is considered to be a serious (or more than minor) injury
- requires first aid treatment (other than a minor injury)
- Bump to the head (other than a minor bump)
- requires attendance at hospital

Our procedure for notifying parents will be to use all telephone numbers available to contact them and leave a message should the parents not be contactable. In the event that parents cannot be contacted and a message has been left, our policy will be to continue to attempt to make contact with the parents at least every hour. In the interim, we will ensure that the qualified first aider, appointed person or another member of staff remains with the child until the parents can be contacted and arrive (as required).

In the event that the child requires hospital treatment and the parents cannot be contacted prior to attendance, the qualified first aider/appointed person/another member of staff will

accompany the child to hospital and remain with them until the parents can be contacted and arrive at the hospital.

Out of hours and Trips

The first aid arrangements for all school-managed and organised after school activities (parent's evenings, school fetes and sports activities) are considered in this policy. On occasions where there may be the need for additional provision the school will carry out a needs assessment for that activity. Where the school have arrangements to let/hire out buildings to external organisations there need to be arrangements in place to co-ordinate the first aid arrangements with the hirer. This is managed by Jane Bryson, School Business Manager, or Jill Hodgson, Admin Assistant in her absence who will ensure that these arrangements are recorded in the lettings/hire agreement.

The first aid arrangements for school organised trips/visit are included in the Evolve risk assessment for each trip. These are reviewed for each trip/visit and the level of first aid provision is reviewed to ensure adequate cover is provided for the trip/visit, and that sufficient cover is retained at the school to cover those who stay at school.

Records

All accidents requiring first aid treatment are to be recorded with (at least) the following information:

- Name of injured person
- Name of the qualified/emergency/school/paediatric first aider or appointed person
- · Date of the accident
- Time of the accident
- Type of accident (e.g. bump on head etc)
- Treatment provided and action taken
- A treatment slip will be given to a child where they have received First Aid.

Pupils with Medical Conditions and / or Allergies

(Please also see Children with medical conditions Policy available on the website)

It is the school's aim that pupils with on-going medical conditions or allergies are fully supported so they can play a full and active role in school life, remain healthy and achieve their academic potential.

The school will ensure the needs of children with medical conditions are effectively supported in consultation with health and social care professionals, their parents and the pupils themselves.

When the school is notified that a child has a medical condition or has an allergy, the school will ensure that: -

- sufficient staff are suitably trained
- all relevant staff are made aware of a child's condition
- cover arrangements in case of staff absence/turnover is always available
- supply teachers are briefed
- risk assessments for visits and activities out of the normal timetable are carried out

Individual healthcare plans (IHCP) are monitored (at least annually). If a child's needs change, the above measures are adjusted accordingly. Details of the medical condition are held on the school's information Management System (SIMS). Any pupil with a medical condition requiring medication or support in school should have an individual healthcare plan which details the support that child needs. If the parents, healthcare professional or school consider that the healthcare plan is inappropriate or disproportionate, further clarification or advice will be sought from the healthcare professionals involved and/or from Northumberland County Council Health and safety department. A record of the child's medical condition and any implications for the child will be kept in the school's medical record and the child's individual record.

The Role of Parents:

Parents must provide the school with sufficient and up-to-date information about their child's medical needs. They are the key partners and should be involved in the development and review of their child's IHCP

- Parents should carry out any action they have agreed to as part of the IHCP implementation
- Parents should ensure that they, or another nominated adult, are contactable at all times.

The Role of Pupils

Pupils should, wherever possible or appropriate, be fully involved in discussions about their medical support needs and contribute to, and comply with, their IHCP.

The Role of School Staff:

- Staff may be asked to provide support to pupils with medical conditions, including the administering of medicines, but are not required to do so.
- Staff should consider the needs of pupils with medical conditions in their lessons when deciding whether or not to volunteer to administer medication.
- Staff should have sufficient training and achieve the required level of competency before taking responsibility for supporting pupils with medical conditions.

• Staff should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

Notification procedure

- When the parent is notified that a pupil has a medical condition that requires support in school, the parent informs the Headteacher. Following this, the school will arrange a meeting with the parents / carers, healthcare professionals (as appropriate) and the pupil, with a view to discussing the IHCP. Information in school
- In each classroom, the teacher has a list, detailing the special medical needs of pupils in their class.
- IHCP's are kept in the file in the medical room organised by year group
- Details, including photos of the pupil in the case of significant medical needs (eg diabetes, anaphylaxis, severe asthma, epilepsy), with medical requirements are kept in the first aid room.
- The catering staff also have information detailing all pupils with allergies, as well as food requirements such as vegetarian or Halal.

Reporting accidents and record keeping

In the event of incident or injury to a pupil, a parent or guardian will be informed as soon as practicable. In the event of a serious injury or an incident requiring emergency medical treatment, the pupil's class teacher, a member of the office staff or the Headteacher will telephone the pupil's parents or guardians as soon as possible. Any serious incidents involving the child's head, the pupil's parents or guardians will be telephoned. A list of emergency contacts will be kept at the school office on the information management system. The first aider will ensure that records are kept of any injuries or accidents requiring first aid in the carbon copy recording book, as well as any first aid treatment that is given – this will include:

- The date, time and place of the incident.
- The name and class of the injured or ill person.
- Details of the injury or illness and what first aid was given.
- What happened to the person immediately afterwards, e.g. whether they were sent home or went back to class.
- Name and signature of the first aider or person dealing with the incident.

The headteacher will ensure that any injury or accident that must be reported to the HSE or LA under RIDDOR obligations is reported in a timely and detailed manner. All records will be filed and stored in line with the Record Management Policy.

Offsite visits and events

Before undertaking any offsite visits or events, the teacher organising the trip or event will assess the level of first aid provision required by undertaking a suitable and sufficient risk assessment of the visit or event and the persons involved. This will be recorded as part of

the Evolve Visits process. Any medication (including AAI devices and inhalers) will be taken on the trip along with a stocked first aid supply.

Storage of medication

Any prescription medicines required by pupils must be brought in by parents and an appropriate administration of medication form filled in. These are available from the school office. Parents should discuss with their GP as to whether the medication can be given outside school hours where possible. Medicines will be stored securely and appropriately in accordance with individual product instructions. Medicines will be stored in medical room ina locked box or locked fridge in the original container in which they were dispensed, together with the prescriber's instructions for administration, and properly labelled, showing the name of the patient, the date of prescription and the date of expiry of the medicine. Any left over medicine will be returned directly to parents for safe disposal when they are no longer required or have expired. In general, the school will not administer over the counter medication without the express permission of the Head or other senior leader. If these products are accepted, an administration of medication MUST be completed. Children should not bring in 'beauty' based products (eg lip balm) to be kept in pockets/ book bags as these are often lost and the ingredients in these may cause a severe allergic reaction in other children. Children are not allowed to self medicate unless with the express permission of the head or in the presence of a member of staff.

Asthma and anaphylaxis

Children with severe anaphylactic reactions requiring the use of Auto adrenalin injectors are required to have 2, in-date AAI in school. These are kept in the main office in individual boxes with a photograph of the child and contain the AAI pens, the agreed IHC plan. The expiry dates of all AAI devices are kept on a easily seen list on the cupboard door to ensure parents can be informed when the devices are about to expire. Parents must complete appropriate forms stating the allergens to avoid as well as any other medications (eg anti-histamine) required to manage the condition.

Asthma reliever inhalers are kept in the child's classroom for easy access when required. Generally, pupils do not carry their own medication on their person as most are too young to take responsibility and many children require the use of a spacer device for effective delivery. Older pupils are allowed to administer their own asthma medication in the presence of a member of staff. Younger pupils are supported in using their inhaler. An administration of medication slip is sent home if a child has been given their inhaler during the day and this is logged in the medication register.

School holds a number of emergency inhalers which can be used (with parent's permission) if the child's own inhaler is not available or fails to function.

Inhalers and AAI devices are returned to parents at the end of summer term for safekeeping or renewal if required.

Illnesses and allergies

When a pupil becomes ill during the school day, their parent or guardian will be contacted and asked to pick their child up as soon as possible. The pupils will be asked to rest in the office or another staffed area while they wait for their parent or guardian to pick them up. Pupils will be monitored during this time.

Consent

Parents or guardians will be asked to complete and sign a medical consent form when their child is admitted to the school, which includes emergency numbers, alongside details of allergies and chronic conditions – these forms will be updated at the start of each school year.

Monitoring and review

This policy will be reviewed every 2 years (or earlier if legislation or need dictates this) and any changes communicated to all members of staff. Staff will be required to familiarise themselves with this policy as part of their induction programme. Staff will be informed of the arrangements that have been made in connection with the provision of first aid, including the location of equipment, facilities and personnel.