

Medical Needs and First Aid Policy

Adoption by Governing Body		
(Sigr	nature of Chair of Governors)	
January 2018	(Date)	
To Be RevisedJanuary 2019	(Date)	
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Dealing with Injuries:

The vast majority of school-based injuries, such as grazes, require minimal treatment and can be dealt with by most members of staff acting in a sensitive and caring manner. However, staff are not expected to deal with first aid issues if they do not feel confident or competent to do so.

All staff at the school have a first aid qualification. There is always a first aider on site and where possible, on all school visits. The school nurse conducts training on epipens. Additional training is given if children with diagnosed medical conditions are admitted.

At present four staff hold the 'First Aid At Work' qualification. They are

- Debbie Collins
- Emma Dawe
- Ashi Ali
- Gayner Hamilton (Paediatric only)

A list of staff who are trained in both paediatric and basic first-aid is displayed in the medical room.

Medical Protocols:

Those children with ongoing medical conditions which may require the administration of first aid or medicine during the school day have a medical protocol. An example of the 'short protocol' is given (Appendix A). These are reviewed annually with advice sought from the school nurse, signed by the parents and include a photograph of the child. Protocols are kept in the staffroom and a copy is held in the child's classroom.

Medicines:

We comply with the DES guidance Managing Medicines In Schools And Early Years Settings (DES 2005.) A copy is available in school. Parents are expected to complete a Med 1 form (Appendix B) and consent must be given by the headteacher (Appendix C.) All prescribed medicines which have been formally agreed are kept locked in the medical room. A record will be kept whenever medicines are administered (Appendix D.)

Location & Storage of First Aid Equipment:

General first aid sundries are kept in the first aid cabinet in the medical room. Spares are kept in the cupboard with the first aid kits.

Replenishing of First Aid Equipment:

First aid cabinets and kits will be checked each half term by Debbie Collins, one of our office staff, and stock ordered as required.

Known Medical Issues:

A list of known medical issues, such as allergy to plasters, is kept on the door of the first aid cabinet.

Each classroom has a medical bag where asthma inhalers are kept. There is also a book to record the date, time and dose given which must be signed by the member of staff overseeing the child. These medications are checked termly by Mrs Collins and parents are contacted when replacements are needed.

The medical needs and allergies of the children in each class are listed inside the register so they are available to class teachers, TAs and supply teachers.

Off-Site Visits and Residential Trips:

First aid kits and medicines are taken on all off-site visits and residential trips. Where possible a first aider attends all off-site visits. On residential trips, a medical form must be completed. If a child requires any medication (including travel sickness tablets) the details must be entered on the form.

Head Injuries:

Instant ice packs are available to take on trips. All head injuries, even minor bumps, are recorded in the First Aid Log which is kept in the medical room. Parents are always informed when a child sustains a head injury.

Blood Injuries:

All staff are aware of the necessity of wearing gloves when dealing with blood. Disposable gloves are available in the medical room and in all first aid kits. Injuries which result in any blood loss are always covered to avoid infection. There is a yellow bin in the medical room to dispose of items which have been contaminated by blood.

Cleaning cuts and grazes:

These should be cleaned using gauze and water with the adult wearing gloves.

Lunchtimes:

First aid requirements at lunchtime are usually dealt with by a Mid-day Assistant, who is available in the playground. However, any serious concerns are always referred to the HT or DHT.

Advice:

A book of paediatric first aid guidance is available in the medical room and should not be removed from the medical room.

First-aid Records:

Whenever first-aid has been administered, a record is made using the Visit-Ed software in the office or on the appropriate forms used by the Midday staff. If parental contact is required, for instance to report a head-bump, a more detailed form must be completed and these are given to the pupil to take home. These records are then kept in case of future requests. For more serious incidents an Online Accident/Incident Form will be completed by office staff and sent to LIDA via the HT.

Emergency Procedures:

Red triangular cards are kept in the hall, dining room, classroom and other communal areas to be used to summon emergency help wherever necessary. In classrooms, these will be kept near the interactive white board or the door.

First aid kits and class medication bags are carried on all trips outside school, including swimming lessons.

If an ambulance is required, another member of staff will dial 999 to allow a first aider to remain with the casualty. Parents will be called. Once the casualty has been assessed by paramedics and either taken to hospital, taken home or deemed fit to stay, the relevant forms (eg. Online Accident/Incident form) will be completed and sent to the LA H&S Team via the HT.

Sending Children Home:

The Head or Deputy are informed of any children being sent home unwell. Children must always be collected by an adult and will not be allowed to walk home alone. If the Head/Deputy feels that the child should attend hospital then either an ambulance will be called or the child's parents will be asked to collect the child, depending on the severity of the accident.

Upon Entry to School:

Before admission, parents/carers complete forms relating to emergency health cover, emergency medical advice or treatment, special health requirements, concerns and allergies (see appendix E.)

Training:

Qualified professionals are employed to provide training to staff, such as recommended First Aid trainers or the school nurse. All staff are encouraged to participate in the training but are not obligated to administer medication. A record of staff training is held in the school office (Appendix F.)

Review date: Jan 2018

EXAMPLE DOCUMENT

Short protocol

APPENDIX A

Name of	Child

......will suffer an Anaphylactic allergic reaction if he either eats or comes into contact with

NUTS

If is known to come into contact with these he can be given 5ml Piriton as a precautionary measure and closely monitored for 15 minutes.

PHOTO of CHILD

Procedures in case of a severe reaction/hypoglycemic event etc

Administer the Adrenalin injection (**Epipen**). The injection may be given in the outer thigh, if necessary through clothing.

If no improvement in 5-10 minutes or if the condition deteriorates repeat the adrenaline injection and closely monitor.

If no pulse can be felt or breathing stops then commence Cardio-Pulmonary Resuscitation (C.P.R.)

At the same time as administering the injection, instruct another member of staff to contact the following in direct order of priority.

- 1. AMBULANCE: EMERGENCY SERVICE 999
- 2. Message to be given -

Name of child + "anaphylactic reaction"

3.PARENTS' contact number: -

(Home) (mobile)

(wk) (other)

4. G.P. (for info) Dr...... Tel

The administration of these medicines are safe for and even if they are given through misdiagnosis they will do no harm.

On arrival of the qualified staff, the member of the school staff in charge will appraise them of the medication given. All medication will be handed to the medical person.

MED 1

APPENDIX B

Squirrels Heath Junior School

Parental agreement for school/setting to administer prescribed medicine

The school/setting will not give your child medicine unless you complete and sign this form, and the school or setting has a policy that staff can administer medicine.

Date:
Child's Name:
Group/Class/Form:
Name and strength of medicine:
Expiry date:
How much to give (i.e. dose to be given):
When to be given:
Any other instructions:
Number of tablets/quantity to be given to school/setting:
Note: Medicines must be the original container as dispensed by the pharmacy
Daytime phone no. of parent or adult contact:
Name and phone no. of GP:
Agreed review date to be initiated by:[name of member of staff]:
The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school/setting staff administering prescribed medicine in accordance with the school/setting policy. I will inform the school/setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.
Parent's signature:
Print Name:
If more than one medicine is to be given a separate form should be completed for each one. From: MANAGING MEDICINES IN SCHOOLS AND EARLY YEARS SETTINGS (DES 2005)

APPENDIX C

Confirmation of the Head's agreement to administer medicine

It is agreed that	[name	of child] will re	eceive
	[quantity and no	ame of medicine	e] every day at
	[time medicine to be	administered e	.g. Lunchtime or
afternoon break].			
1	[name of child] will be	given/supervis	ed whilst he/she
takes their medication	by	[name of m	ember of staff].
This arrangement will o	continue until		_ [either end date
of course of medicine o	r until instructed by po	arents].	
Date:			
Signad.	- head	Teacher)	

APPENDIX D

Squirrels Heath Junior School

Record of medicine administered to an individual child

Name of Child:						
Date medicine provided by parent:						
Group/class/ form:						
Quantity received:						
Name and strength of medicing	ne:					
Expiry date:						
Quantity returned:						
Dose and frequency of medici	ine:				•••••	
Staff signature:						
Parent signature:		····				
Date		. .		-		
Time Given		<u>.</u> .		-		
Dose Given		<u>-</u> .		-		
Name of member of staff				-		
Staff initials				-		
Date						
Time Given						
Dose Given				-		

Name of member of				
staff			· -	
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APPENDIX E

Squirrels Heath Junior School

<u>Health Record (To be completed upon entry to the school)</u>
Child's Doctor Telephone
Name and Address of Surgery
Name of Health Visitor
Medical History (please continue on a separate sheet if necessary)
Any known allergies
Does your child suffer with any medical conditions e.g. asthma, eczema, fits
Does your child take prescribed medication (please give details)
If your child needs to take prescribed medication (eg asthma inhaler) you must complete a medical from (MED1) which is available from the school office.
In cases where pupils have been prescribed medication by a doctor, which they need to take after they are well enough to return to school, we ask parents to come in to administer this medicine wherever possible. If this is impossible please speak to the school office to make arrangements for the medicine to be administered in your absence. When pupils need medication for long term conditions, arrangements can be made for this after speaking to the head teacher.
Any other medical information you feel we should know (please include operations, hospital stays, concerns about sight, speech and hearing etc)
Medical emergency
In the event of more serious incidents, which we think might require hospital treatment or advice from other professionals, we will contact parents immediately. However, we also require your permission to seek emergency advice or treatment just in case we can not make contact with you.
I give permission for school staff to seek emergency advice or treatment:
Signed
From: MANAGING MEDICINES IN SCHOOLS AND EADLY VEADS SETTINGS (DES 2005)

APPENDIX F

First Aid Kit Contents:

There is no mandatory list of contents set down by HSE or DCSF. **Minimum** provision is suggested for a low risk workplace by HSE and DCSF.

- a first aid guidance leaflet
- 20 individually wrapped sterile adhesive dressings [assorted sizes]
- two sterile eye pads
- four individually wrapped triangular bandages
- six safety pins
- six medium [12cm x 12cm] individually wrapped sterile unmedicated wound dressings
- two large [18cm x 18cm] individually wrapped sterile un-medicated wound dressings
- three pairs of disposable gloves

The Paediatric First Aid Association [PFAA] would endorse the above list for use with children. The PFAA would recommend the plasters included are hypoallergenic and would add items such as "melolin" and "micropore", round ended scissors, gauze swabs, round ended scissors and a face shield for CPR.

HSE suggest a travelling first-aid kit could include

- a first aid guidance leaflet
- 6 individually wrapped sterile adhesive dressings [assorted sizes]
- two individually wrapped triangular bandages
- two safety pins
- one large [18cm x 18cm] individually wrapped sterile un-medicated wound dressings
- individually wrapped moist cleansing wipes
- · one pair of disposable gloves

(Taken from Staying Alive paediatric first aid training website)