



Monkwick

JUNIOR SCHOOL

First Aid & Medical Conditions Policy

Inspiring Lifelong Learners

Monkwick Junior School – First Aid Policy

1. Aims

Monkwick Junior School is committed to providing emergency first aid provision in order to deal with accidents and incidents affecting employees, children and visitors. The arrangements within this policy are based on the results of a suitable and sufficient risk assessment carried out by the academy in regards to all staff, pupils and visitors. The school will take every reasonable precaution to ensure the safety and wellbeing of all staff, pupils and visitors.

The aim of this policy is to:

- Ensure that the school has adequate, safe and effective first aid provision in order for every pupil, member of staff and visitor to be well looked after in the event of any illness, accident or injury; no matter how major or minor.
- Ensure that all staff and pupils are aware of the procedures in the event of any illness, accident or injury.
- Ensure that medicines are only administered at the academy when express permission has been granted for this.
- Ensure that all medicines are appropriately stored.
- Promote effective infection control.

Nothing in this policy should affect the ability of any person to contact the emergency services in the event of a medical emergency. For the avoidance of doubt, staff should dial 999 for the emergency services in the event of a medical emergency before implementing the terms of this policy, and make clear arrangements for liaison with ambulance services on the school site.

2. Legislation and guidance

This policy is based on the [Statutory Framework for the Early Years Foundation Stage](#), advice from the Department for Education on [first aid in schools](#) and [health and safety in schools](#), and the following legislation:

- [The Health and Safety \(First Aid\) Regulations 1981](#), which state that employers must provide adequate and appropriate equipment and facilities to enable first aid to be administered to employees, and qualified first aid personnel
- [The Management of Health and Safety at Work Regulations 1992](#), which require employers to make an assessment of the risks to the health and safety of their employees
- [The Management of Health and Safety at Work Regulations 1999](#), which require employers to carry out risk assessments, make arrangements to implement necessary measures, and arrange for appropriate information and training
- [The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations \(RIDDOR\) 2013](#), which state that some accidents must be reported to the Health and Safety Executive (HSE), and set out the timeframe for this and how long records of such accidents must be kept

- [Social Security \(Claims and Payments\) Regulations 1979](#), which set out rules on the retention of accident records
- [The Education \(Independent School Standards\) Regulations 2014](#), which require that suitable space is provided to cater for the medical and therapy needs of pupils

3. Roles and Responsibilities

First Aid staff are responsible for:

- Ensuring that their qualification of first aid is kept up to date (Certificates of qualification in first aid are valid for three years only).
 - o Always attending a casualty when requested to do so and treat the casualty to the best of their ability in the safest way possible. This includes wearing gloves where any loss of blood or body fluid is evident, calling for help from other First Aiders or Emergency Services.
 - o Helping fellow First Aiders at an incident and provide support during the aftermath.
 - o Acting as a person who can be relied upon to help when the need arises.
 - o Ensuring that portable first aid kits are adequately stocked and always on hand around the school and that the First Aid Room is well stocked with equipment and organised. (See First Aid Room and Equipment section).
 - o Insisting that any casualty who has sustained a significant head injury is seen by professionals at the hospital, either by taking them directly to hospital or by asking parents to pick up a child to take them to hospital. Ensure that parents are aware of all head injuries promptly.
- Ensuring that a child who is sent to hospital by ambulance is either:
 - o Accompanied in the ambulance at the request of paramedics.
 - o Followed to a hospital by a member of staff to act in loco parentis if a relative cannot be contacted.
 - o Met at hospital by a parent/carer.
- Keeping a record of each pupil attended to, the nature of the injury and any treatment given, in the accident log kept in the school office. If a child suffers a minor bump to the head or face then parents will be contacted (this will be via email, text or telephone depending on the severity). Records held in the first aid and accident log will be retained by the school for a minimum of 3 years, in accordance with regulation 25 of the Social Security (Claims and Payments) Regulations 1979, and then securely disposed of.

The School are responsible for:

- Providing adequate first aid cover, equipment and facilities.
- Monitoring and responding to all matters relating to the health and safety of all persons on the school premises.
- Ensuring all new staff are made aware of First Aid procedures in school.

The Leadership Team are responsible for:

- Ensuring that they always obtain the history relating to a pupil with medical issues. (See section entitled Children with Medical Needs).
- Ensuring that in the event that an injury has caused a problem, the pupil **must** be referred to a first aider for examination.

- Ensuring Individual Care Plans are in place for children with medical needs. (See section entitled Children with Medical Needs).
- Ensuring that, where relevant, new staff are first aid trained as soon as is practical according to their role.

Teachers are responsible for:

- Familiarising themselves with the first aid procedures in operation and ensuring that they know who the current First Aiders are.
- Being aware of specific medical details of individual pupils in their class.
- Ensuring that their pupils are aware of the procedures in operation.
- Sending for help to the school office and first aid room as soon as possible, ensuring that the messenger knows the precise location of the casualty. Where possible, confirmation that the message has been received should be obtained.
- Reassuring, but never treating, a casualty unless staff are in possession of an Appointed Persons Certificate or know the correct procedures; such staff can start emergency aid until a First Aider arrives at the scene or instigate simple airway measures if clearly needed.
- Seeking advice from a first aider. A first aider can come to the classroom and decide the best course of action for the injured person, if needed.
- Ensuring that the injured person is accompanied by an adult at all times until they are sent home or returned to class.
- Having regard for personal safety.

Office Staff are responsible for:

- Calling for a qualified First Aider, to treat any injured pupil.
- Supporting the First Aiders in calling for an ambulance or contacting relatives in an emergency.
- Maintaining a training record of all staff qualified in first aid.
- At the start of each academic year, providing the first aid team with a list of persons who are known to be asthmatic, anaphylactic, diabetic, and epileptic or have any other serious illness.
- Post notices around the school identifying the location of first aid kits and a list of trained first aiders.

4. First Aid Provision

An awareness list of children and adults in the school who have medical needs is displayed in the Staff Room.

Every First Aider has access to first aid equipment and we have several first aid kits. First aid kits contain sufficient quantity of suitable first aid materials and nothing else. First aid kits do NOT contain drugs of any kind including Aspirin or similar painkillers and such medicines should NOT be issued to staff or pupils as there is a danger of adverse reaction in some cases. Such advice extends to antiseptic creams or liquids etc which may aggravate injuries. Splinters should not be removed either. (See section entitled Administration of Medicines for further information).

The part of the dressing which comes into contact with a wound should be absorbent. There should be a bandage or other fixture attached to the dressings. Dressings, including adhesive ones, should be of a design and type which is appropriate for their use.

Disposable plastic gloves are provided. These are checked regularly to ensure that they remain in good condition.

All first aid kits will be identified by a white cross on a green background.

Blunt-ended stainless steel scissors are kept in case clothing has to be cut away. The first aider is responsible for examining the contents of first aid bags. These should be checked frequently and restocked as soon as possible after use. Items should be discarded safely after the expiry date has passed.

1. Minor Injuries

In the case of minor injuries, discretion will be used as to the nature of the injury and parents/carers may be contacted to alert them.

The first aider will ensure that everything is cleared away, using gloves, and dressings, etc. will be put in the clinical waste bin. Any bloodstains on the ground must be washed away thoroughly. No contaminated or used items should be left lying around.

The following count as minor injuries (this is not an exhaustive list):

- Cuts or grazes where blood is drawn
- Visible bruising
- Minor burns and scalds
- Minor head injuries (with no loss of consciousness or severe swelling)
- Minor illness - for example, earache, sore throat
- Insect bites (unless the swelling extends further than the marked area)
- Nosebleeds (unless the bleed continues for longer than 10-15 minutes or is accompanied by other symptoms such as dizziness, and vomiting)
- Minor or slight twist of joints

2. Major Injuries

In the case of major injuries parents/carers will always be contacted to inform and alert them.

The first aider will ensure that everything is cleared away, using gloves, and dressings etc. will be put in the clinical waste bin. Any bloodstains on the ground must be washed away thoroughly. No contaminated or used items should be left lying around.

The following count as major injuries:

- Any joint dislocation
- Any type of fracture
- Cuts or grazes where the bleeding cannot stop or they have had to revisit a first aider multiple times
- Any major head injuries with loss of consciousness or severe swelling
- Any injury that causes the child or adult to be unconscious
- Any choking
- Any time a child is unable to put weight on a joint or limb

3. Known Illness and Medication

Teachers will be informed if they have pupils who have known medical conditions. First aiders at the school's reception will also be aware of pupils with known illnesses. Where relevant a risk assessment or healthcare plan will be put in place and parents/carers will be informed about this.

Pupils with inhalers and epi pens will be monitored while they take their medication/use their medical equipment.

Known medication will be kept in the child's classroom in the medical bag. This will be taken with the child for activities like PE and lunch. This bag will also be taken with the class in the event of a fire evacuation.

A record of all pupils with known medical conditions will be kept in the staff room so that all members of staff can access this information should it be required.

Parents/carers should keep the school informed of any changes to their child(ren)'s medical condition(s) and check that the school have been appropriately informed if the child(ren) is new to the school.

4. Accident Reporting

In the event of incident or injury to a pupil, at least one of the pupil's parents must be informed as soon as practicable.

Parents must be informed of any injury to the head, minor or major, and be given guidance on action to take if symptoms develop.

The first aider will ensure that records are kept of any injuries, accidents or illnesses, 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 office staff will liaise with the Sigma Trust to 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.

Any accidents that are more than minor need to be reported to the Health and Safety Department at Essex County Hall using the appropriate form. Some accidents may need to be reported to the Health and Safety Executive.

5. Non – Accidental Injury

If the child has received an injury from something that is non-accident related, they should first be given first aid. After receiving first aid, the adult who is dealing with the injury should seek further guidance from the behaviour policy.

6. Administering First Aid

When a child first attends the office/medical room, the first aider should speak to them about their injury and assess what actions to take next. If the casualty can be treated by the first aider, treatment should be administered without delay. If the child is to stay in the medical room, they should be checked on every 10 minutes. A child should only leave the medical room with permission from a first aider. If the child does not seem to be getting better, a parent/carer should be contacted to discuss next steps. If the child comes back to the medical room about the same injury, the first aider should consider contacting a parent/carer to discuss next steps (this will not always be appropriate).

Any first aid administered should be recorded in line with procedures laid out in this policy.

Please see the procedure for dealing with accidents flow chart at the end of this policy and Section 9 for further information.

7. Monitoring Procedures

Children who have received first aid and need to stay in the medical room, should be monitored by the office staff at least every 10 minutes.

Those who do not need to stay in the medical room should be monitored by an adult who is with the class, as and when needed.

If a child returns to the medical room more than twice, it should be considered whether their parent/carer should be informed.

Any child in the medical room should only return to class under the instruction of a first aider.

8. Visits and Events Off-Site

Before undertaking any off-site 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 event and persons involved. This will be reviewed by the Deputy EVC before the event takes place. Please see the separate Educational Visits Policy for more information about the Academy's educational visit requirements.

9. Emergency procedure in the event of an accident, illness or injury

If an accident, illness or injury occurs, the member of staff in charge will assess the situation and decide on the appropriate course of action, which may involve calling for an ambulance immediately or calling for a first aider.

If called, a first aider will assess the situation and take charge of first aid administration. In the event that the first aider does not consider that they can adequately deal with the presenting condition by the administration of first aid, then they should arrange for the injured person to access appropriate medical treatment without delay.

Where an initial assessment by the first aider indicates a moderate to serious injury has been sustained, or the individual has become seriously unwell, a responding staff member will call 999 immediately.

Where necessary, a trained staff member will administer emergency help and first aid to all injured persons. The purpose of this is to keep the accident victim(s) alive and, if possible, comfortable, before professional medical help can be called. Also, in some situations, immediate action can prevent the accident from getting more serious, or from involving more victims.

Where the seriously injured or unwell individual is a pupil, the following process will be followed:

- A responding staff member calls 999 immediately and follows the instructions of the operator –this may include the administering of emergency first aid. Another staff member will inform the pupil's parents/carers.
- Where an ambulance is called, the child should either be accompanied in the ambulance at the request of paramedics, followed to a hospital by a member of staff to act in loco parentis if a relative cannot be contacted or met at hospital by a parent/carer.
- Where an ambulance is not required, but medical attention is needed, the pupil's parents or carers will be phoned and asked to collect their child as soon as possible.
- The school will ensure that no further injury can result from any incidents that occur either by making the scene of the accident safe, or (if they are fit to be moved) by removing injured persons from the scene.
- Responding staff members will see to any pupils who may have witnessed the incident or its aftermath and who may be worried, or traumatised, in spite of not being directly involved. They will need to be taken away from the scene and comforted. Younger or more vulnerable pupils may need parental support to be called immediately.
- When the above action has been taken, the incident must be reported to the Headteacher and, if not already contacted, the parent/carer of the child(ren).

10. Storage of Medication

Medicines are always securely stored in accordance with individual product instructions, save where individual pupils have been given responsibility for keeping such equipment with them.

Medicines will be stored 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. All medicines will be returned to the parent to arrange for safe disposal when they are no longer required.

Parents should advise the school when a child has a chronic medical condition or severe allergy so that staff can be trained to deal with any emergency in an appropriate way. Examples of this include epilepsy and diabetes and anaphylaxis. The parent will work with the academy to complete a Health Care Plan


11. Administration of Medication

If a parent/carer would like medication administered to their child in school, they will need to fill out a Medicine Request Form (shown below). They should state and provide the type of medication, dosage, timing of administration and additional relevant information required to administer the medication safely. In some cases, the school may request that parents attend the school to administer the medication themselves.

Medication can be administered by any of the school's first aiders but will mostly take place at the

school's office. Staff who administer medication will record that this has been completed on the school's medication form. This will include the date, child's name, timing of administration, dose given, a note if there have been any reactions and a signature of the first aider. Recording this information is essential to the child's safety.

Medicine Request Form



Date of Request:

Name of Child: _____ Date of Birth: _____ Class: _____

Medication Condition or illness: _____

Medicine (Medicines must be in the original container as dispensed by the pharmacy)

Name / type of medicine (as described on the container): _____

Dosage and method of administration: _____

Timing / when to be given: _____

Special precautions / other instructions: _____

Are there any side effects school needs to know about: _____

Self-administration? _____ Procedures to take in an emergency? _____

Parent/Carer Contact Details

Name: _____ Relationship to child: _____

Daytime phone number: _____

Name and number of GP: _____

The above information is, to the best of my knowledge, accurate at the time of writing. I give consent to school staff administering medicine in accordance with the school policy. I will inform the school immediately, in writing, if there is any change in dosage, frequency of the medication or if the medicine is stopped. I understand that all medication needs to be hand delivered by a parent / carer to the school reception.

Parent / Carer Signature: _____ Date: _____

Print Name: _____

Note: If more than one medication is to be given, a separate form must be completed for each one. Medicines will be returned at the end of course of treatment or the end of the academic year.

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12. Illness and Allergies

When a pupil becomes ill during the day, the parent/carer will be contacted and asked to pick their child up from the school. For instance, sickness, high temperature, diarrhoea etc. A quiet area will be set aside for withdrawal and for pupils to rest while they wait for their parent/carer to arrive to pick them up. Pupils will be monitored during this time.

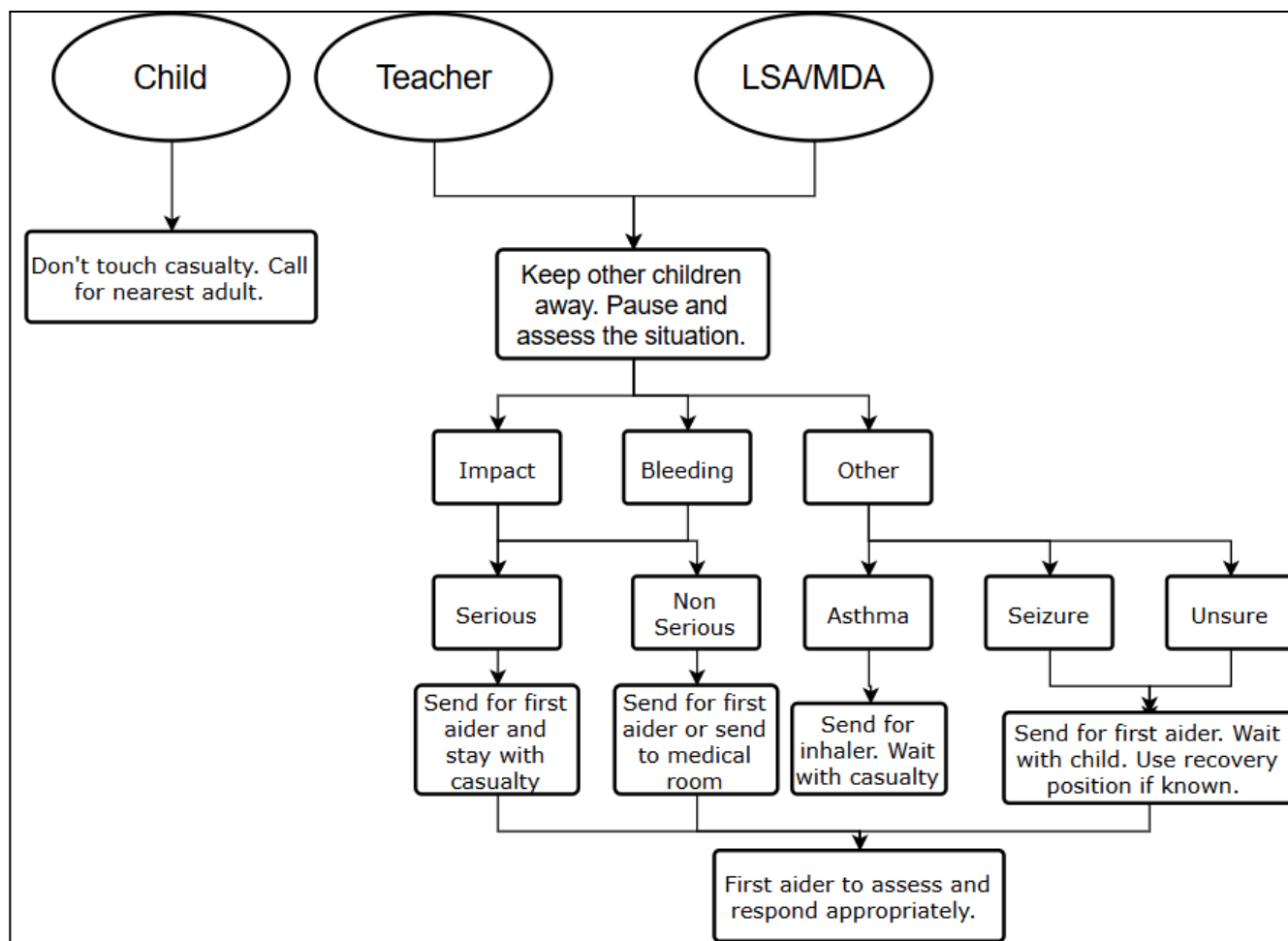
13. Consent

Parents will be asked to complete and sign a summary of information consent form which includes medical information about their child(ren) when their child is admitted to the academy, which includes emergency numbers, details of allergies and chronic conditions, and consent for the administration of emergency first aid.

Staff do not act 'in loco parentis' in making medical decisions as this has no basis in law. Staff always aim to act and respond to accidents and illness based on what is reasonable under the circumstances and will always act in good faith while having the best interests of the pupil in mind.

Procedure for dealing with accidents

Most accidents occur on the playground at playtime or during P.E. lessons. The first observers are likely to be Teachers, LSAs, MDAs or children. The first action to be taken is as follows:



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