



FIRST AID POLICY INCLUDING ADMINISTRATION OF MEDICINE AND INHALERS

This policy is a whole school policy including the EYFS

At Deepdene we are committed to ensuring that our staff follow best practice with first aid by regularly organising in-house paediatric first aid courses. The training is renewed every three years and is delivered by a competent provider of regulated qualifications. (TigerLily Ofsted Approved)

- All staff are aware of the school's first aid area. This area is located next to the staff workroom and is equipped with all first-aid requirements, is near toilets and has access to hot and cold running water.
- First Aid kits are available at designated locations across the school. A designated member of staff has a list of areas where First Aid kits are kept and manages the contents to ensure the kits are fully complete at all times.
- At least one member of staff who has current paediatric first aid certification will be on the premises and available at all times when children are present.
- At least one member of staff who has current paediatric first aid certification will be on the premises and available at all times when children go on outings.
- A list of staff qualified with First Aid certification is kept up to date and these staff renew their training on a three year cycle.
- In case of a child having an accident the member of staff involved will assess the situation and take the appropriate action.

- Particular attention is given to any child following a head injury. If necessary the parents would be contacted even if the child does not need to be sent home (a 'bumped head' form is completed and sent home with the child).
- Parents / Carers are expected to advise us if their child has any specific medical needs and are responsible for notifying the school of any known changes to the condition. We will ensure that this information is then updated.
- All children in the school have an emergency contact form which includes:-
 - Parent's/carer's telephone numbers
 - Doctor's name and contact number
 - Any current medical conditions
 - Any prescribed medication required
 - Signed permission for the administration of calpol if necessary
- All staff know where the emergency contact forms are kept.
- Accident Records are maintained. There is a separate page for each child to ensure confidentiality. These are signed by the member of staff involved and the parent/carer.
- These can be located:-
 - Prep – in the First Aid area
 - Nursery – in the Reception Area
 - Sunflower babies – in their own room
- **Reporting to Parents** In the event of accident or injury parents must be informed as soon as practicable. The member of staff in charge at the time will decide how and when this information should be communicated, in consultation with the Headteacher if necessary. Parents are always called if there is a head injury, no matter how apparently minor.
- If hospital treatment is required we will contact the parents and arrange to either meet them at the hospital or for them to come and collect their child.
- If a child arrives at school with an existing injury we will record it in an incident book.

GUIDANCE ON THE ADMINISTRATION OF MEDICINE

- Parents/Carers must give written permission for any medicine they wish to be administered at school and state the exact dosage and time to be given.
- **Prescription medicines must not be administered to EYFS children unless they have been prescribed for a child by a doctor, dentist, nurse or pharmacist.**
- The school are aware that medicines containing aspirin should only be prescribed by a doctor.
- Staff and parents to sign a medicine administration form. The school will keep a written record each time any medicine is administered to a child, and will inform the child's parents and or/ carers on the same day, or as soon as reasonably practical.
- Medicine must be clearly labelled and given to the class teacher.

PUPILS WITH INHALERS

There are 2 main types of inhalers

Relievers – clearly relieve the symptoms of asthma – common examples are called 'Ventolin' and 'Bricanyl' and are usually **BLUE** in colour.

Preventers – relieve inflammation and are clearly designed to prevent the onset of asthma – common preventers are 'Beclafort', 'Becotide', and 'Intal' and are usually **BROWN** in colour.

- Inhalers and Epipens should be clearly labelled and given to the relevant class teacher.
- These will be taken out of school for off-site activities if necessary.
- It is the responsibility of parents / carers to ensure that these medications have not reached their expiry date.

We do not encourage pupils to miss lessons or to stay indoors during break and lunchtimes, so before a pupil returns to school after an illness, parents / carers should ensure that they can cope with the whole school day.

A member of the Senior Leadership Team would notify Ofsted and any of the relevant agencies of any serious accident or injury to a child whilst in our care.

HYGIENE PROCEDURES FOR DEALING WITH THE SPILLAGE OF BODY FLUIDS

Special care should be taken when dealing with the spillage of bodily fluids (vomit, urine, faeces, blood etc.). Disposable gloves should be worn. These can be found in all first aid kits. The area should be isolated if possible and then treated with the Emergency Spillage Compound, a yellow sachet located in all first aid kits. This will reduce the spillage to a gel allowing for prompt and easy clearance. The gel waste should be cleared (a dustpan and brush can be used) and placed in a plastic bag, knotted tightly and removed to an outside bin. The affected area should then be further cleaned with a sanitising fluid found in the designated First Aid area in the Business Managers Office. Additionally, a mop and bucket and additional cleaning products are located in the locked cleaning products shed should this be required.

REPORTING TO HSE

Regulations (**RIDDOR**) legislation (2013) www.hse.gov.uk/riddor Tel: 0845 300 9923 to report the following to the HSE (most easily done by calling the Incident Contact Centre (ICC) on 0845 300 99 23). The Headmaster must keep a record of any reportable injury, disease or dangerous occurrence. This must include: the date and method of reporting; the date, time and place of the event; personal details of those involved and a brief description of the nature of the event or disease. This record can be combined with other accident records. The following accidents must be reported to the HSE involving employees or self-employed people working on the premises:

- accidents resulting in death or major injury (including as a result of physical violence)
- accidents which prevent the injured person from doing their normal work for more than three days
- accidents resulting in the person being killed or being taken from the site of the accident to hospital and the accident arises out of or in connection with work i.e. if it relates to:
 - any school activity, both on or off the premises;
 - the way the school activity has been organised and managed;
 - equipment, machinery or substances;
 - the design or condition of the premises.

HSE must be notified of fatal and major injuries and dangerous occurrences without delay. The Headmaster is responsible for ensuring this happens, but may delegate the duty to the Health and Safety Officer. The School Administrator will report the incident to HSE and also to our insurers.

GUIDANCE ON WHEN TO CALL FOR AN AMBULANCE

An emergency 999 ambulance should be called when a qualified First Aider has assessed a casualty and deemed it necessary to do so based upon the knowledge acquired through their training. Usually this will be for casualties with the following problems:

- any instance in which it would be dangerous to approach and treat a casualty
- unconscious
- not breathing
- not breathing normally and this is not relieved by the casualty's own medication
- severe bleeding
- neck or spinal injury
- injury sustained after a fall from a height (higher than 2 metres)
- injury sustained from a sudden impact delivered with force (e.g. car knocking a person over)
- suspected fracture to a limb
- anaphylaxis (*make sure to use this word when requesting an ambulance in this case*)
- seizure activity that is not normal for the casualty, especially after emergency medication has been administered
- symptoms of a heart attack or stroke
- rapid deterioration in condition despite the casualty not initially being assessed as requiring an ambulance

IF IN DOUBT, IT IS BETTER TO CALL FOR AN EMERGENCY AMBULANCE THAN NOT

If, for whatever reason, a qualified First Aider is not available, the above guidelines should be used to determine whether to call for an emergency ambulance.

How to call for an emergency ambulance

Should the need arise for an emergency ambulance to be summoned, the First Aider should:

- remain calm
- ask a bystander* to call 999 or 112 and, when prompted for which service is required, ask for an ambulance

**Should a bystander not be available it may be necessary for First Aiders to leave the casualty and make the call themselves, relaying this information to the operator*

The caller should:

- be ready to provide details of their name, telephone number, address and exact location within the School
- relay the condition of the casualty, as assessed by the First Aider, and how the casualty came to be in this condition
- provide details of the number of casualties along with names, age and gender if these details are known
- ask that ambulances come to '**DEEPDENE, 195 New Church Road, Hove BN3 4ED**'; if possible, it should be arranged for a member of staff or bystander who knows the location of the casualty to meet the ambulance on arrival

- communicate any dangers or hazards into which the ambulance may be arriving
- stay on the line with the emergency operator until they have cleared the line
- return to the casualty immediately after the call to inform the First Aider that an ambulance is on the way and to bring a First Aid kit and blanket.

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