

First Aid Policy and Reporting Procedure

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| SCOPE: | Academy Policy |
| AUTHOR/ORIGINATOR: | King's Park Academy |
| NAME OF RESPONSIBLE DIRECTOR/PRINCIPAL: | Lauren Dean, Principal |
| APPROVING COMMITTEE: | Sector Director |
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FIRST AID POLICY AND REPORTING PROCEDURES

The **first aid procedure** at King's Park Academy is in operation to ensure that every pupil, member of staff and visitors to the Academy will be well looked after in the event of an accident, no matter how minor or major.

In the event of an accident all members of the Academy should be aware of the support available and the procedures available to activate this.

1. The purpose of the Policy is therefore:

- a) To provide effective, safe First aid cover for pupils, staff and visitors.
- b) To ensure that all staff and pupils are aware of the systems in place.
- c) To provide awareness of Health & Safety issues within school and on school trips, to prevent, where possible, potential dangers or accidents

NB The term FIRST AIDER refers to those members of the school who are in possession of a valid First Aid at Work certificate or equivalent.

2. First aiders will:

- a) Ensure that their qualification is always up to date. First aiders should refer to the training schedule kept by King's Park Academy
- b) Always attend 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
- c) Help fellow first aiders at an incident and provide support during the aftermath.
- d) Act as a person who can be relied upon to help when the need arises.
- e) Insist that **any** casualty who has sustained a significant head injury is seen by professionals at the hospital, either by sending them directly to hospital or by as parents to pick up a child to take them to hospital; ensure that parents are aware of **all** head injuries promptly.
- f) Ensure that a child who is sent to hospital by ambulance is either:
 - 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.
 - Met at hospital by a relative/named carer
- g) The First aider need not be the member of staff to accompany the casualty to hospital, however, an appropriate person should be sent.
- h) Keep a record of each student, member of staff or visitor attended to, the nature of the injury and any treatment given, in the book provided in the First aid Room. In the case of an accident, the Accident Book must be completed by **the lead first aider**
- i) Ensure that everything is cleared away, using gloves, and every dressing etc. be put in a yellow bag for contaminated/used items and sealed tightly before disposing of the bag in a bin. Any bloodstains on the ground must clean using sanitizer concentrate available from the Site Manager. No contaminated or used items should be left lying around.
- j) The lead first aider will ensure that first aid boxes are kept stocked.
- k) The lead first aider will ensure pupil epipen information and health care plans are displayed in the first aid room and staff rooms.
- l) The lead first aider will ensure all staff receive annual epipen training or other training to meet the needs of specific pupils.

3. The Academy Advisory Committee will ensure that the academy:

- a) Provide adequate first aid cover as outlined in the Health & Safety [First Aid] Regulations 1981.
- b) Monitor and respond to all matters relating to the health and safety of all persons on school premises.
- c) Ensure all new staff are made aware of first aid procedures in school.

4. The Principal and Vice Principal will:

- a) Ensure that they always obtain the history relating to a student particularly in the cases of headaches, to ensure that no injury has caused the student to feel unwell.
- b) Ensure that in the event of an injury, the student **must** be referred to a first aider for examination.
- c) At the start of each academic year, provide the first aid Team with a list of students who are known to be asthmatic, anaphylactic, diabetic, epileptic or have any other serious illness.

5. All staff will:

- a) Familiarise themselves with the first aid procedures in operation and ensure that they know who the current first aiders are and the location of first aid boxes
- b) Support the first aiders in calling for an ambulance or contacting relatives in an emergency
- c) Be aware of specific medical details of individual students.
- d) Never move a casualty until they have been assessed by a qualified first aider unless the casualty is in immediate danger.
- e) Reassure, but never treat a casualty unless staff are in possession of a valid Emergency Aid in Schools Certificate or be trained in the correct procedures; such staff can obviously start emergency aid until a first aider arrives at the scene or instigate simple airway measures if clearly needed.
- f) Pupils who feel generally 'unwell' should not be referred to a first aider unless there is a cause for concern.
- g) Have regard to personal safety.
- h) Staff will refer to a first aider to request permission from the Parent/Carer to administer paracetamol or other medication if a care plan is in place.

* Staff to follow guidelines (see Appendix 3)

6. Offsite activities.

At least one first aid kit will be taken on all off-site activities, along with individual pupil's medication such as inhalers, epipens etc.

A person who has been trained in first aid will accompany all off site visits.

7. Residential Trips

Parents will complete the medical questionnaire (Appendix 3)

Medications to be administered whilst away to be handed to/collected from first aider at start/end of trip and to complete 'Medication in School' Form (Appendix 4) to be completed

8. Administering Medicine

Parents must complete the 'Medication in School' form (Appendix 4) form. The dispensing label must be 'prescription only' and must state the pupil's correct name and still be in date. A correct medicine spoon must also be provided. No non-prescription drugs or analgesics are to be brought into school. When a first aider is not trained to administer medicine, the pupil will be directly supervised at all times by an adult whilst they are taking their own medicine. If there is a need for a child to take long term regular medication, a Healthcare Plan will be drawn up.

9. Storage of Medicines

Epipens and inhalers must be kept in the class room in unlocked cupboards, labelled with name/class. Parents/carers are responsible for ensuring any medication kept in school is within its expiry date. All other medication is to be kept in a cupboard or fridge in the first aid room out of the reach of children.

10. Epilepsy

This epilepsy statement has been written in line with information provided by Epilepsy Action, students and parents.

This statement applies equally within the school and at any outdoor activities organised by the school. This includes activities taking place on the school premises, and residential stays. Any concerns held by the pupil, parent or member of staff will be addressed at a meeting prior to the activity or stay taking place.

King's Park Academy recognises that epilepsy is a common condition affecting children and welcomes all children with epilepsy to the school. This statement ensures all relevant staff receive training about epilepsy and administering emergency medicines. All new staff and supply staff will also receive appropriate training.

When a child with epilepsy joins King's Park Academy or a current pupil is diagnosed with the condition, the inclusion team will arrange a meeting with the pupil and the parents to establish how the pupil's epilepsy may affect their school life. This should include the implications for learning, playing and social development, and out of school activities. They will also discuss any special arrangements the pupil may require, for example extra time in exams. With the pupil's and parent's permission, epilepsy will be addressed as a whole-school issue through assemblies and in the teaching of PSHE or citizenship lessons. Children in the same class as the pupil will be introduced to epilepsy in a way that they will understand. This will ensure the child's classmates are not frightened if the child has a seizure in class. The school nurse or an epilepsy specialist nurse may also attend the meeting to talk through any concerns the family or school staff may have, such as whether the pupil requires emergency medicine. The following points in particular will be addressed.

Record keeping - During the meeting school staff will agree and complete a record of the pupil's epilepsy and learning and health needs. This document may include issues such as agreeing to administer medicines and any staff training needs. This record will be agreed by the parents, and the health professional, if present, and signed by the parents and associate principal. This form will be kept safe and updated when necessary. Staff will be notified of any changes in the pupil's condition through regular staff briefings. This will make staff aware of any special requirements, such as seating the pupil facing the class teacher to help monitor if the student is having absence seizures and missing part of the lesson.

Medicines - Following the meeting, an individual healthcare plan (IHP) will be drawn up. It will contain the information highlighted above and identify any medicines or first aid issues of which staff need to be aware. In particular it will state whether the pupil requires emergency medicine, and whether this medicine is rectal diazepam or buccal midazolam. The IHP will also contain the names of staff trained to administer the medicine and how to contact these members of staff.

First aid - first aid for the pupil's seizure type will be included on their Independent Healthcare Plan and all staff (including support staff) will receive basic training on administering first aid. The following procedure giving basic first aid for tonic-clonic seizures will be prominently displayed in relevant classrooms.

Do...

- Protect the child from injury (remove harmful objects from nearby)
- Place something soft, such as a folded sweater, under their head
- Help the child to breathe by gently placing them in the recovery position once the seizure has finished
- Stay with the child until they come round and are fully recovered
- Be calmly reassuring

Don't...

- Restrain the child's movements
- Put anything in the child's mouth
- Try to move them unless they are in danger
- Give the child anything to eat or drink until they are fully recovered
- Attempt to bring them round

Call for an ambulance if...

- The seizure continues for more than usual for that child or longer than five minutes
- One seizure follows another without the child regaining consciousness in-between
- The child is injured during the seizure
- The child has difficulty in breathing
- You believe the child needs urgent medical attention

Sometimes a child may become incontinent during their seizure. If this happens, try to put a blanket around them when their seizure has finished, to avoid potential embarrassment. First aid procedures for different seizure types can be obtained from the school nurse, the pupil's epilepsy specialist nurse or Epilepsy Action.

Learning and behaviour -King's Park Academy recognises that children with epilepsy can have special educational needs because of their condition (Special Educational Needs Code of Practice). Following the initial meeting, staff will be asked to ensure the pupil is not falling behind in lessons. If this starts to happen the teacher will initially discuss the situation with the parents. If there is no improvement, then discussions should be held with the Inclusion Team and school nurse. If necessary, a Pupil Passport will be created and if the Inclusion Team thinks it appropriate, the child may undergo an assessment by an educational psychologist or neuropsychologist to decide what further action may be necessary.

School environment – King's Park Academy recognises the importance of having a school environment that supports the needs of children with epilepsy. A medical room is kept available and equipped with a bed in case a pupil needs supervised rest following a seizure.

Reporting and Recording of Accident and Incidents

Accident/Incident including Dangerous Occurrence and physical assault in School suffered by Pupil/Employee/Visitor

Minor Injury

Reportable Incidents



Complete Accident Form



Inform Parent/Carers

An accident that involves an employee being incapacitated from work for more than 7 consecutive days.
An accident which requires admittance to hospital for in excess of 24 hours.
Death of an employee.
Major injury such as fracture, amputation, dislocation of shoulder, hip, knee or spine.
For non-employees and pupils an accident will only be reported under RIDDOR:
where it is related to work being carried out by an employee or contractor and the accident results in death or major injury, or;
It is an accident in school which requires immediate emergency treatment at hospital

Inform Parents/Carers. Complete form F2508

First Aid Box – Location

Main Front Office
Each class has individual first aid kit
Mobile first aid kit for Break times

Guidance for first aid

If the child has received a head bump:

- complete an injury report slip (to be found in medical room or first aid station at lunch times)
- give the slip to the child to put in bag to take home
- attach red wrist strap to child
- assess if the child is going home with a visible mark and ensure a phone call to parent/carer is made.

If the child has received treatment for a minor injury:

- clean the wound under drinking-quality running tap water – avoid using antiseptic as it may damage the skin and slow healing. Pat the area dry with a clean towel.
- write what the injury is and where on the body it is onto the yellow wrist strap, before attaching to the child.

If the child has received treatment for a major injury (requires a plaster or more):

- complete an injury report slip (to be found in medical room or first aid station at lunch times)
- give the slip to the child to put in bag to go home
- attach yellow wrist strap to child

For KS1 only:

If the child has received an injury you would consider very minor, such as a trip, fall or bump that required some TLC, but did not require any treatment: write on class white board so teacher can inform parent/carer at the end of day if necessary.

If a child is sick and needs to be sent home:

- Call parent/carer and bring the child to the front office for collection.

If the child has sustained any injury which you would consider fairly major, such as nasty head bumps, significant bleeding, deep cuts or abrasions, bruising or visible swelling that does not subside fairly quickly it is better to err on the side of caution and call parent/carers.

If you are in doubt as to whether the injury necessitates a call home to parent/carer, please do not hesitate to contact the lead first aider for further guidance.

KING'S PARK ACADEMY
Administration of Prescribed Medicines

To: Mrs L Dean, Principal

My child has been diagnosed as suffering from

.....

He/She is considered fit for school but requires the following prescription medication to be administered during school hours.

DETAILS OF PUPIL

Surname

Forname(s) Male/Female

D.O.B. Class

MEDICATION

Name/Type of Medication (as described on container)

Date dispensed Expiry date

For how long will your child take this medication?

FULL DIRECTIONS FOR USE

Dosage and method

Timing (eg lunch time)

Special precautions (if any)

Side Effects (if any)

Self Administration

Procedures to take in an Emergency

CONTACT DETAILS

Name Relationship to Pupil

Daytime Tel No

Address

I understand that I must deliver the medicine personally to the school office and accept that this is a service that the school is not obliged to undertake.

Date Signature(s)