EWELL GROVE PRIMARY SCHOOL



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POLICY STATEMENT

FIRST AID & MANAGEMENT OF MEDICINES IN SCHOOL

This policy must be read in conjunction with DfE document

Guidance on First Aid for Schools

This policy should be read in conjunction with:

- The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013
- The Health Protection (Notification) Regulations 2010
- Public Health England (PHE) (2017) "Health protection in schools and other childcare facilities"
- DfE and PHE (2020) "COVID 19: guidance for educational settings"

REVISION DATE: ANNUALLY SUMMER TERM

RATIONALE

First Aid can save lives and prevent minor injuries becoming major ones. Under health and safety legislation employers have to ensure that there are adequate and appropriate equipment and facilities for providing First Aid in the workplace. The minimum First Aid provision that can be provided is:

- a suitably stocked First Aid container;
- an appointed person to take charge of First Aid arrangements;
- information for employees on First Aid arrangements.

First Aid provision must be available at all times whilst people are on school premises and also off school premises whilst on educational visits. Clear and agreed systems should ensure that all children are given the same care and understanding in our school. This care should extend to emergency First Aid provision, the administration of medicines and when dealing with specific situations such as asthma, headlice etc.

PURPOSE

This policy:

- 1. Gives clear structures and guidelines to all staff regarding all areas of First Aid and administration of medicines;
- 2. Clearly defines roles and responsibilities;
- 3. Enables staff to see where their responsibilities begin and end;
- 4. Ensures the safe use and storage of medicines in the school;
- 5. Ensures the safe administration of medicines in the school:
- 6. Ensures efficient and effective First Aid cover is available in the school and on visits.

GUIDELINES

Staff new to the school are given the staff log in details for the school website where copies of school policies (including this policy) are held. This policy is regularly reviewed and updated. This policy has safety as its priority; safety for the children and adults receiving First Aid or medicines and safety for the adults who administer First Aid or medicines.

CONCLUSION

The administration and organisation of first aid and medicines provision is taken very seriously at Ewell Grove Primary and Nursery (Ewell Grove). There are annual procedures that check on the safety and systems that are in place in this policy. The school also discusses its First Aid and Medicines procedures and staff training needs with the school nurse. Adjustments are made if necessary.

FIRST AID POLICY GUIDELINES

RESPONSIBILITIES

All staff must take the same care that reasonable, responsible and careful parents would take in similar circumstances, whilst they are responsible for the care and control of children. In all circumstances, particularly in emergencies, staff are expected to use their best endeavours. The consequence of taking no action is likely to be more serious than those of trying to assist in an emergency. In no circumstances must a child ever be left unattended during First Aid treatment or whilst requiring the administration of medication.

Parents and Carers

Must ensure that their contact details are current and kept up to date.

Must ensure that the school is informed of changes to medical needs/concerns; providing appropriate background information when necessary.

First Aiders

Following training on a course approved by the Health & Safety Executive, the main duties of First Aiders at Ewell Grove are:

- to give immediate help to children with common injuries or illnesses and those arising from specific hazards at school;
- when necessary to ensure that an ambulance is called;
- provide care, support and monitoring for long-term conditions such as asthma and diabetes.

First Aiders <u>must never</u> give treatment for anything in which they have not been trained. Additional training has been provided in the past for specific medical needs from the school/specialist nurse.

Appointed Person

An appointed person is someone who:

- takes charge when someone is injured or becomes ill;
- looks after the First Aid equipment e.g. restocking central supplies (maintaining stock in class based resources is the responsibility of all staff and they should notify the appointed person if supplies in the central store are deplete);
- ensures that an ambulance or other professional medical help is summoned when appropriate.

An appointed person does not have to be a First Aider, but at Ewell Grove they are likely to be because of our whole staff commitment to training and the fundamental belief that an appointed person with training will have their competence and confidence improved. If the appointed person is not First Aid qualified, they <u>must not</u> give treatment for which they have not been trained.

The Headteacher

The Headteacher is responsible for putting the policy into practice and for developing detailed procedures. The Headteacher should also make sure that parents are aware of the schools' arrangements for First Aid.

Teachers and Other School Staff

Teachers' conditions of employment do not include giving First Aid, although any member of staff may volunteer to undertake these tasks. Teachers and other staff in charge of children are expected to use their best endeavours at all times, particularly in emergencies, to secure the welfare of the children at our school in the same way that parents might be expected to act towards their own children. In general, the consequence of taking no action is likely to be more serious than trying to assist in an emergency situation.

Training

All staff at Ewell Grove are offered emergency First Aid training. This last took place in September 2021. By having all staff First Aid trained, the school ensures adequate cover at all times, allowing for staff turnover and sickness. In addition to this and in line with Early Years Foundation Stage (EYFS) requirements we also have some staff (presently 8) who are paediatric First Aid trained in line with statutory requirements.

Confidentiality

All staff must treat medical information confidentially. The extent to which information can be shared must be agreed with the child's parent.

First Aid Materials and Equipment

Ewell Grove will provide the proper materials and equipment at all times. First Aid equipment will be clearly labelled and easily accessible. All First Aid containers must be marked with a white cross on a green background.

First Aid boxes can be found in all of the disabled adult toilets around the school, within the Clean Up boxes.

First Aid containers should, wherever possible, be kept near to hand washing facilities. These should be checked frequently and restocked as soon as possible after use. However if anyone using the equipment notices it is either missing or running low on stock, then they are responsible for notifying the office in advance of their usual examination. There should always be extra stock in the school. Items should be discarded safely after the expiry date has passed.

Red clipboard register for PE and medical conditions	
The red clipboard register must be taken to PE sessions or group activities. Each	
register has a class list and the pictures of children with medical conditions, allergies	
or dietary requirements.	
In the case of a LOCK IN or a FIRE DRILL the red clipboard register can be used to	
keep track of the children taking part in activities away from the classroom.	
PE, group sessions in school	Please indicate on your register the children who are in the PE or group session and write the number indicating how many children at the top of the register. This will enable Gavin to identify the children and the medical conditions within the group.
	Along with the red clipboard register please ensure you take the First Aid bag containing medical boxes for the children taking part in PE.
PE sessions	Please take the red clipboard register indicating any child absences and write the number indicating how many children in the group at the top of the register.
at Old Schools Lane	Along with the red clipboard register, please ensure you take the First Aid bag containing medical boxes for the children taking part in PE. In the event of a medical emergency, the school mobile will be used to contact the school/ambulance service directly.

Class First Aid Bags

First Aid provision must be available at all times whilst people are on school premises and off school premises whilst on educational visits.

The purpose of the class First Aid bag is to ensure the children with medical conditions can instantly receive treatment when needed.

It is our responsibility to give immediate help to casualties with common injuries or illnesses and those arising from specific hazards at school.

When necessary, ensure that an ambulance or other professional medical help is called.

Playtimes and Lunchtimes PE, group sessions and assemblies in school

Please ensure the First Aid Bag containing the medical boxes for the children taking part in the activity is taken to any PE, group sessions or assemblies. First Aid Bags should go onto the playground/lunch hall with the children.

PE sessions at Old Schools Lane

Please ensure all First Aid is taken to Old Schools Lane and taken back to the classrooms after the session.

All injuries requiring First Aid must be recorded in the First Aid books (Entrance hall, Nursery and Reception classrooms); anything more than a simple grazed knee should be recorded in enough detail to enable staff dealing with parental concerns to have as much information as possible. Any child that has received First Aid must be identifiable by the use of First Aid stickers with date and time of injury noted. All bumps to the head **must** be notified to the office staff, using the summary sheet on the clipboard, the office will notify parents.

The First Aid Bag **MUST** be kept in a safe and secure place and away from the children within the classroom.

The First Aid bag must contain:

- one large sterile unmedicated wound dressing approximately 18cm x 18cm
- two triangular bandages
- two safety pins
- individually wrapped moist cleansing wipes or water and cotton wool
- disposable gloves
- plasters

Travelling First Aid Containers

Before undertaking any off-site activities, the party leader should carry out an assessment of what level of First Aid provision is needed. The HSE recommend that, where there is no special risk identified, a **minimum** stock of First Aid items for travelling First Aid containers is:

- a leaflet giving general advice on First Aid (as given by training provider);
- individually wrapped sterile adhesive dressings;
- one large sterile unmedicated wound dressing approximately 18cm x 18cm;
- two triangular bandages;
- two safety pins;
- individually wrapped moist cleansing wipes or water and cotton wool;
- disposable gloves.

Equivalent or additional items are acceptable and additional items may be necessary for specialised activities.

Provision must also be made to deal appropriately with travel sickness issues.

Hygiene/Infection Control

All staff should take precautions to avoid infection and must follow basic hygiene procedures. Staff have access to single-use disposable gloves and hand washing facilities, and should take care when dealing with blood or other body fluids and disposing of dressings or equipment. All sick /bodily fluids must be cleared up as soon as possible using the appropriate materials (Clean Up boxes are kept in all adult disabled toilets).

Handwashing throughout the day should be scheduled into daily routines. Children should be reminded to rinse the soap off their hands thoroughly and take extra care with drying the backs of their hands.

All areas should be well ventilated.

GUIDANCE ON COMMON FIRST AID SITUATIONS IN SCHOOL

Cuts, Scratches and Grazes

- Make sure your own hands are clean and dry (ensure any cuts on your hands are covered and if required use disposable gloves).
- Clean the cut either under running water or using a wet hand towel or cotton wool wrapped in a hand towel.
- If bleeding is severe, where possible, apply direct pressure to the wound with a pad (e.g. a clean cloth) or fingers (when gloves are being used) until a sterile dressing is available. Raise the affected area above the heart.
- Cover any open cut (as opposed to a graze) with a sterile dressing or plaster.

Children must always be asked if they can wear plasters <u>before</u> one is applied. Children who are allergic to plasters will be given an alternative dressing. Good practice is to ask the child to hold the cotton wool/pad in place once an adult has cleaned the wound. Any injury that requires First Aid must be recorded in the accident file.

Any First Aider can treat more severe cuts, but wherever possible the advice of a paediatric First Aider should be sought.

Anyone treating an open cut must use gloves. All blood waste is disposed of in the yellow clinical waste bin in the First Aid area and the disabled toilet in the EYFS/KS1 building.

The use of a plaster or alternative dressing must always be recorded.

Severe bleeding can lead to shock. This can be recognised by any of the following:

- Pale face:
- · Cold, clammy skin;
- Fast, shallow breathing;
- Rapid, weak pulse;
- Yawning;
- Sighing;
- In extreme cases, unconsciousness.

If you are concerned, lay the casualty down, raise their legs and get immediate assistance. **Do not leave the casualty.**

Nose Bleeds

- Ask the child to sit down.
- Tilt their head forwards to allow the blood to drain from the nostrils.
- Tell them to breathe through their mouth (this will also have a calming effect) and to pinch the soft part of the nose.
- Reassure and help if necessary.
- Tell them not to speak, swallow, cough, spit or sniff because this may disturb blood clots that may have formed in the nose.
- After 10 minutes release the pressure. If the bleeding has not stopped, reapply the pressure for two further periods of 10 minutes.
- Once the bleeding has stopped and with the casualty still leaning forwards, clean around their nose with lukewarm water.
- Ensure they understand they need to rest quietly for a few hours, to avoid exertion and in particular, not to blow their nose, because these actions will disturb any clots.
- Make sure the office staff are asked to phone the parents.

Head Injuries

Any bump to the head, no matter how minor is treated as serious. All bumped heads should be treated using the following procedure:

- Ask the child to identify where they have bumped their head but also take time to look generally all over to ensure nothing is missed;
- Treat the injury immediately with a cold compress;
- Observe the child closely, if anything gives you cause for concern seek help immediately;
- Ensure the child is given a yellow 'I've bumped my head' sticker, with the date and time clearly written on it;
- Inform the staff in the child's class of the injury by using a 'Please Note' form and ensure they understand the need for close observation of the child;
- Parents and carers must be informed BY TELEPHONE, therefore the duty to inform the Office Staff to contact the parents rests with the person administering First Aid;
- ALL bumped head incidents MUST be recorded in the First Aid file.

Fever

Fever is a sign of a variety of medical conditions. Your normal temperature may differ slightly from the average body temperature of 98.6 F (37 C). However if a child's temperature reads above this it is essential that the parents are contacted to ascertain how they would prefer to deal with the situation. Ear thermometers are located in each of the buildings in the Assistant Head's office or the First Aid area.

Spillages of Body Fluids

First Aiders should wear protective gloves when disposing of bodily fluids. Bodily fluid spillages should be dealt with as soon as possible with ventilation of the area. Anyone not involved with the cleaning of the spillage should be kept away from the area and protective clothing should be worn when dealing with the spillage such as gloves and aprons.

Disposable paper towels should be used to mop up the excessive spillage and then discarded into a yellow clinical waste bin. Bodily fluid cleaning kits are kept in all adult disabled toilets. Once initial cleaning has been performed, the caretaker must be informed to arrange for the carpet to be cleaned further, if appropriate.

Intimate Care Arrangements

Encourage the child to undertake as much of the procedure for themselves as possible; including wiping intimate areas and dressing/undressing. If you do need to assist, speak to the child first, using their name, to ensure they try and understand why you are helping them. Where possible give an explanation of what is happening in a straightforward, but reassuring, manner.

Always respect the child's right to dignity and privacy and be aware of cultural/religious sensitivities that could be related to intimate care procedures.

Intimate care procedures can be carried out by one person, but the following safeguarding practices must be adhered to:

When intimate care has been administered it must be recorded in the First Aid Staff must always notify a colleague about what they are doing and why. A record of the need for intimate care must be recorded. If at any point the member of staff assisting a child has cause for concern or embarrassment they must be reported as soon as practically possible. Likewise, any responses by the child that give cause for concern must be recorded and discussed with the class teacher (or in the absence of the class teacher one of the DSLs). Staff must ensure they use protective equipment as required e.g. gloves, aprons etc.

Sun Cream

An application of high factor sunscreen should be **administered by parents** before school. This coupled with sunhats, water, use of shade and our uniform (which covers a significant percentage of the children's bodies should significantly reduce the risk of heat stroke and sunburn.

Individual Health Care Plans

Once the parent/carer has informed the school of specific medical needs/conditions, it may be necessary to write a Health Care Plan in conjunction with the parents/carers. Individual Health Care Plans may be needed in respect of medication or personal/medical needs for:

- ADHD
- Anaphylaxis
- Asthma
- Diabetes
- Epilepsy

This is in no way considered an exhaustive list, but covers the most common medical conditions that presently require a plan in our school. If a child enters with a condition we have not supported before, then our first point of contact must be the School Nurse Team.

In order to compile an effective Health Care Plan the school must agree with the child's parents exactly what support the school should provide for the child. Any concerns that the school has in relation to being able to meet these requirements, or where a parent's expectations are unreasonable then this must be taken up further with both the School Nurse Team and LA Specialist Teachers.

Individual Health Care Plans and corresponding medication can usually be located in the School Office (unless there is a specific requirement to have the medication in the classroom). The Health Care Plan must be applied in all cases; staff must never make individual judgements regarding the medication, always following instructions as per the pharmacy label.

The plan must always be reviewed in the event of it needing to be followed to ascertain if it was effective or not and amend as required.

Recording and Reporting First Aid

The First Aid file is located in the School Office. All injuries requiring First Aid must be recorded; anything more than a simple grazed knee should be recorded in enough detail to enable staff dealing with parental/carers concerns to have as much information as possible. Any child that has received First Aid must be identifiable by the use of dated First Aid stickers. If a child's injury requires a member of staff to speak to a parent/carer at the end of the day, then details must be recorded on a 'Please Note' form attached to the laminated class register.

For major accidents, a further electronic form must be completed within 24 hours of the accident. If you are unsure you must always check with a member of the School Leadership Team. It is always best practice to over report rather than under. The office staff will be able to give assistance with the completion of this; however the person who first (as they are likely to have actually seen how it occurred) or mainly dealt with the injury needs to give the wording.

Calling the Emergency Services

In the case of major accidents, it is the decision of the fully trained paediatric First Aider or Headteacher if the emergency services are to be called. Staff are expected to support and assist the trained First Aider or Headteacher in their decision.

If a member of staff is asked to call the emergency services, they must:

- 1. State what has happened;
- 2. The child's name;
- 3. The age of the child;
- 4. Whether the casualty is breathing and/or unconscious;
- 5. The location of the school.

Wherever possible, the person making the call should be near/with the casualty in order to give detailed information about their presentation and condition to the emergency services. In the event of the emergency services being called, a member of the office staff OR another member of staff, should wait by the school gate on West Street and guide the emergency vehicle into the school.

If the casualty is a child, their parents/carers should be contacted immediately giving all the information required. If the casualty is an adult, their next of kin should be called immediately. All contact numbers for children and staff are clearly located in the School Office. If the school is unable to make contact with a parent/carer then a member of staff must accompany the child, ideally this should be someone the child is familiar with. The member of staff will require a copy of the child's data sheet to take to the hospital. A member of office staff should provide them with this.

MEDICINES IN SCHOOL POLICY GUIDELINES

Children with medical needs have the same rights of admission to a school or setting as other children. Some children with medical needs are protected from discrimination under the Disability Discrimination Act. The DDA defines a person as having a disability if s/he has a physical or mental impairment which has a substantial and long-term adverse effect on her/his abilities to carry out normal day-to-day activities.

Under the DDA, responsible bodies such as schools must not discriminate against disabled pupils in relation to their access to education and associated services – a broad term that covers all aspects of school life including school trips, clubs and activities. Schools should be making reasonable adjustments for disabled children, including those with medical needs at different levels of school life; and for the individual disabled child, in their practices and procedures and in their policies.

Schools are also under a duty to plan strategically to increase access, over time, for disabled children, including those with medical needs. If as a school we are encountering difficulties in making adjustments to accommodate children with medical needs, advice must be sought from the Local Authority, as soon as possible, in the first instance.

At Ewell Grove we follow Surrey's Guidance Manual entitled "Young People's Health and the Administration of Medicines". Therefore this document must be read in conjunction with the full document, a copy of which is available from the School Office. In summary the document guidance suggests the following in relation to administration of medicines within our school setting:

To enable us to carry out the above it is essential that parents/carers provide full information about their child's medical needs, including details on medicines their child needs.

Parents are responsible for making sure their child attends school whenever they are well enough to do so. They must also provide the school with sufficient information about their child's health, care needs, special dietary requirements and where required, medication to support these needs. Parents/carers should work collaboratively with the school to enable an effective Individual Health Care Plan to be developed, if required.

Schools are advised not to keep medicines in school for general use. A school Epi-pen and an asthma inhaler are available for emergency use when advised by the emergency services to do so.

Schools cannot be expected to take responsibility for any non-prescribed medicines that parents may bring or send into school for minor ailments.

Schools must never accept medicines that have been taken out of the container as originally dispensed (and with original pharmacy label clearly readable) nor make changes to dosages as per the pharmacy label. Medication must be brought into school by an adult (it will not be accepted if brought in by a child under the age of 16); medication will not be administered unless accompanied by signed agreement form by a parents/carers with parental responsibility.

Schools may accept prescribed medicines, where it would be detrimental to the child's health if not taken during the school day. Medicines will only be accepted if prescribed by a doctor, dentist or Nurse who is authorised to prescribe medicines. Any member of staff may administer a controlled drug when it has been prescribed for the child. All medicines must be given to the School Office to be stored in an appropriate manner e.g. refrigerated as necessary (with the exception of asthmas inhalers and Epi-pens, which should be in the class First Aid bag for fast access).

In many circumstances, the dosages of prescribed medicines can be arranged to enable it to be taken outside school hours. Parents/carers are asked to discuss this with the prescriber. Parents/carers will be reminded that medicines that need to be taken three times a day should be taken in the morning before school, after school hours and at bedtime; so that administration is not required at school.

No child must ever be given medication without written consent from their parents. All medicines must be accompanied by written instructions from the parents/carers and/or doctor specifying the type of medicine, the circumstances under which it should be given, the frequency and dosage. A Health Care Plan and Administering Prescribed Medication form can be found on the school website within the Virtual Office.

Misuse of a controlled drug, including administering it to another child, is an offence. All medicines must be returned to their parents/carers when no longer in use for safe disposal. If this is not possible, they must be returned to a dispensing pharmacist