

St John's C. of E. Primary School, Gosport



First Aid Policy Statement

Ratification Date:	October 2018	Headteacher: Chair of Governors:	
Review Date:	October 2019	Headteacher: Chair of Governors:	

St John's Primary School will undertake to ensure compliance with relevant legislation with regard to the provision of first aid and all employees and to ensure best practice by extending the arrangements as far as is reasonably practicable to children and others who may also be affected by our activities.

Responsibility for first aid at St John's Primary School is held by Lyndon Strong who is the responsible manager

All first aid provision is arranged and managed in accordance with Children's Services Safety Guidance Procedure SGP 08-07 (First Aid)

All staff have a statutory obligation to follow and co-operate with the requirements of this policy.

AIMS & OBJECTIVES

Our first aid policy requirements will be achieved by:

- Carrying out a First Aid Assessment to determine the first aid provision requirements for our premises.
It is our policy to ensure that the first aid needs assessment will be reviewed periodically or following any significant changes that affect first aid provision.
The Children's Services First Aid Needs Assessment form (CSAF-002) will be used to produce the first aid assessment for the site.
- Ensuring that there are sufficient number of trained first aiders on duty and available for the number and risk on the premises in accordance with the First Aid Needs Assessment.
- Ensuring that there are suitable and sufficient facilities and equipment available to administer first aid in accordance with the First Aid Needs Assessment.
- Ensuring the above provisions are clear and shared with all who may require them

FIRST AID TRAINING

The responsible manager will ensure that appropriate number of appointed persons, school first aid trained staff, emergency first aiders, qualified first aider and paediatric first aid trained staff are nominated, as identified by completion of the First Aid Needs Assessment, and that they are adequately trained to meet their statutory duties

Qualified First Aiders (Those completing the HSE approved 3 day first aid course)

At St Johns's Primary School there are 7 Qualified First Aiders who are as follows:

- Jennifer Taylor
- Pete Mills (out of school sports events)
- Sharon Roberts
- Sharon White
- Jill Creton
- Emma Edmonds
- Lucy James

They will be responsible for administering first aid, in accordance with their training, to those that become injured or fall ill whilst at work or on the premises. There may also be other duties and responsibilities which are identified and delegated to the first aider (eg. First aid kit inspections)

Paediatric First aid trained staff

At St John's Primary School there are 2 paediatric first aid trained person;

- Jennifer Taylor
- Emma Edmonds

Mrs Taylor is in place to meet the Early Years Foundation Stage (EYFS) statutory obligations for provision of first aid to those children 5 years old and under.

Person overseeing first aid in St John's Primary School

Mrs Jennifer Taylor oversees the first aid provision in school. This entails providing cover for daily first aid, reordering first aid stock, making provision for children with medical conditions, recording daily accidents and incidents on the computer and checking all first aid bags.

FIRST AID PROVISION

Our first aid needs Assessment identified the following first aid kit requirements ;

Each class has a small first aid bag and vomit bowls usually kept under the sink.

- Year R
- Year 1
- Year 2

Have medicine cabinets on the wall in the centre area.

There is a room designated for first aid located in the junior corridor. In the medical room there is..

- A locked drugs cupboard on the wall for tablets and liquid medication.
- A locked fridge for ice packs and medication, emergency
- Information files and pictures of individual children's care plans.
- Stock cupboard with provisions for first aid.
- Letters, stickers and recording material for accidents.

There are 6 bum bags containing first aid requirement for using off site. These are green and found in the staff room or in the medical room under the sink.

Year R has also got a stock of plasters and other first aid provision for accidents.

In the fridge in the medical room are ice packs and also in the fridge in the Elsa room

Each classroom has a grab asthma bag with individual children's asthma inhalers.

Emergency asthma inhalers and disposable spacers in the treatment room.

EPI- PENS

Children that require Epi pens have their pens located in a designated area within their classroom. A picture of the child and where the pen is kept is displayed on the wall, cupboard where the epi pen is kept in their classroom. A photo and information is also display outside the classroom, in the dining room, main office and medical room. Every teacher has a lanyard with information on the location of Epi – pens.

Each child has an individual care plan signed by their parents on the treatment to be given.

Yearly epi pen training is given to staff .

All staff received printed out instructions on all medical cases needing emergency first aid.

Asthma inhalers

Children have their inhaler in a designated area within their classrooms. Each classroom has a grab asthma bag with individual children's asthma inhalers.

Each classroom has a red folder with the inhaler containing the individual child's care plan. A yellow folder containing information on all children in school with asthma is kept in the medical room.

All staff have had information on how to care for a child with asthma. Stickers are given for the use of an emergency inhaler or for when a child has used their own inhaler.

Emergency inhaler are available for children whose parents have given permission .

These inhalers are kept in the cupboard above the files in the medical room.

Each child has an individual care plan signed by their parents on the treatment to be given

Communicable Diseases

The school office should be informed immediately by parents if a child has been diagnosed with a communicable disease such as Chicken Pox or Measles.

The school will then inform any Parents of children who may have been in contact with this child.

Return to school after Illness

If a child is ill/unwell he/she should remain away from school until able to fully participate in the school day. In particular if he/she has had diarrhoea or vomiting within the last 24 hour period or if

the child has had a higher than normal temperature , they should remain away from school until they have had 24 hours symptom free. (see Appendix I. Parent Grid)

Emergency arrangements

Upon being summoned in the event of an accident, the first aider is to take charge of the first aid administration/emergency treatment commensurate with their training. Following their assessment of the injured person, they are to administer appropriate first aid and make a balanced judgement as to whether there is a requirement to call an ambulance.

The first aider is to always call an ambulance on the following occasions:

- In the event of a serious injury
- In the event of any significant head injury
- In the event of a period of unconsciousness
- Whenever there is the possibility of a fracture or where this is suspected
- Whenever the first aider is unsure of the severity of the injuries
- Whenever the first aider is unsure of the correct treatment

In the event of an accident involving a child, where appropriate, it is our policy to always notify parents of their child's accident if it:

- is considered to be a serious (or more than minor) injury
- requires first aid treatment
- requires attendance at hospital
- may warrant a visit to a GP

Our procedure for notifying parents will be to use all telephone numbers available to contact them and leave a message should the parents not be contactable.

In the event that parents can not be contacted and a message has been left, our policy will be to continue to attempt to make contact with the parents every hour. In the interim, we will ensure that the qualified first aider or another member of staff remains with the child until the parents can be contacted and arrive (as required).

In the event that the child requires hospital treatment and the parents can not be contacted prior to attendance, the qualified first aider or another member of staff will accompany the child to hospital and remain with them until the parents can be contacted and arrive at the hospital.

Records

All accidents requiring first aid treatment are to be recorded with (at least) the following information:

- Name of injured person
- Name of the qualified/emergency/school/paediatric first aider or appointed person
- Date of the accident
- Type of accident (eg. bump on head etc)
- Treatment provided and action taken
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Information kept on a computer for data protection and legal requirements

What to do

Advice on childhood

Go to school; if
needed getCan be catching.
Some restrictions for

Don't go to school

What it's called	What it's like	Going to school	Getting treatment	More advice
Chicken Pox	Rash begins as small, red, flat spots that develop into itchy fluid-filled blisters		Pharmacy	Back to school 5 days after on-set of the rash
Common Cold	Runny nose, sneezing, sore throat		Pharmacy	Ensure good hand hygiene
Conjunctivitis	Teary, red, itchy, painful eye(s)		Pharmacy	Try not to touch eye to avoid spreading
Flu	Fever, cough, sneezing, runny nose, headache body aches and pain, exhaustion, sore throat		Pharmacy	Ensure good hand hygiene
German measles	Fever, tiredness. Raised, red, rash that starts on the face and spreads downwards.		G.P.	Back to school 6 days from on-set of rash
Glandular fever	high temperature, sore throat; usually more painful than any before and swollen glands		G.P.	Child needs to be physically able to concentrate
Hand, foot & mouth disease	Fever, sore throat, headache, small painful blisters inside the mouth on tongue and gums (may appear on hands and feet)		G.P.	Only need to stay off if feeling too ill for school
Head lice	Itchy scalp (may be worse at night)		Pharmacy	
Impetigo	Clusters of red bumps or blisters surrounded by area of redness		G.P.	Back to school when lesions crust or 48 hours after start of antibiotics
Measles	Fever, cough, runny nose, and watery inflamed eyes. Small red spots with white or bluish white centres in the mouth, red, blotchy rash		G.P.	Back to school 4 days from on-set of rash
Ringworm	Red ring shaped rash, may be itchy rash may be dry and scaly or wet and crusty		G.P.	
Scabies	Intense itching, pimple – like rash Itching and rash may be all over the body but commonly between the fingers, wrists, elbows, arm		G.P.	Back to school after first treatment
Shingles	Pain, itching, or tingling along the affected nerve pathway. Blister-type rash		G.P.	Only stay off school if rash is weeping and cannot be covered
Sickness bug/ diarrhoea	Stomach cramps, nausea, vomiting and diarrhoea		Pharmacy	See GP if symptoms persist after 48 hours
Threadworms	Intense itchiness around anus		Pharmacy	Ensure good hand hygiene
Tonsillitis	Intense Sore throat		Pharmacy	See GP if temperature lasts more than 48 hours or cannot swallow
Whooping cough	Violent coughing, over and over, until child inhales with “whooping” sound to get air into lungs		G.P.	Back to school after 5 days of antibiotics or 21 days from onset of illness

