



First Aid in School Policy

This policy was reviewed by: Vicky Brown and Yvonne McFarlane
This policy was adopted by the Governing Body in Spring 2024
It will be reviewed Spring 2026

"For learning, smiling and remembering"

First Aid Policy

Aims

The aim of this policy is to set out guidelines for all staff in school in the administering of First Aid to children, employees or visitors.

This policy shall be shared with all employees during their induction to ensure they are familiar with the school's first aid procedures.

The Governors are committed to the government's procedure for reporting accidents and recognise their statutory duty to comply with the reporting of injuries, diseases and dangerous occurrences regulations 1995.

All staff at Avondale Primary School have a duty of care to the children in our school.

The Governing Body has responsibility for First Aid at Avondale Primary School. The head teacher is responsible for putting the governing body's policy into practice and for developing detailed procedures. Teachers and other staff in charge of pupils are expected to use their best endeavours at all times, particularly in emergencies, to secure the welfare of the pupils at the school in the same way that parents might be expected to act towards their children. In general, the consequences of taking no action are likely to be more serious than those of trying to assist in an emergency. The employer must arrange adequate and appropriate training and guidance for staff who volunteer to be first aiders/appointed persons. The employer must ensure that there are enough trained staff to meet the statutory requirements and assessed needs, allowing for staff absences. We all have responsibility to access a child's injury, provide care for minor cases and call for the assistance of a qualified First Aider if we judge this to be necessary.

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.

First-aid provision at Avondale Primary School

First aid provision at Avondale Primary School is as follows:

- 2 designated 1st Aid areas; (1st Aid room and the Medical room)
- First Aid travel bags for trips;
- Suitably stocked first-aid containers in KS1 and KS2;
- Basic first aid equipment in all classrooms
- 21 qualified First Aiders (2024) and defibrillator trained staff; (names of which are located on posters across school)
- Two staff who have completed the first aid at work 2 day training
- Defibrillator, which is located outside the school office.

First Aiders' Main Duties

First aiders must complete a training course approved by the Health and Safety Executive (HSE).

At school, the main duties of a first aider are 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.

Appointed Person(s)

An appointed person is someone who:

- takes charge when someone is injured or becomes ill;
- looks after the first-aid equipment eg: re-stocking the first-aid container;
- ensures that an ambulance or other professional medical help is summoned when appropriate.

The appointed person(s) are Sarah Crossley, Yvonne McFarlane and Danielle Loftus.

Risk Assessment / Assessment of need

The Senior Management will make a suitable and sufficient assessment of the risks to the health and safety of their employees at work, and others who may be affected by their undertaking, to identify what measures they need to take to prevent or control these risks. First Aid Provision will be reviewed annually to monitor the effectiveness of the provision and ensure standards are being met.

First Aid & First Aid Forms App

- A minor accident log is located in the first aid room and the accessible wet room in KS1. It is accessible to first aiders and senior staff and is completed if the injury needs first aid, even if minor first aid eg. a wipe, cold compress or plaster.
- All injuries must be recorded on the First Aid Forms app on the same day.

Our accident logs only keeps a record of any first-aid treatment given not accidents that may have occurred. These accident books **MUST** be written in pen, completed on the same day of the incident, and include:

- The date, time and place of the incident.
- The name of the injured or ill person.
- Details of the injury or illness and first-aid given.
- What happened to the person immediately afterwards (for example, whether they went home, went back to class, or went to hospital).

The Information from the First Aid Forms App Report can

- Help the school identify accident trends and possible areas for improvement in the control of health and safety risks;
- Be used for reference in future first-aid need assessments;
- Be helpful for insurance and investigative purposes.

Requirement to Notify Parents and the Data Protection Act

Staff will **ONLY** contact parents by telephone if they have concerns about an injury.

Staff must be aware of the Data Protection Act and not allow parents to view personal information other than that relating to their child and must not allow parents to take photographs other than of their own child. It is not standard practice to give parents copies of the school's accident

record. However, if a parent requests a copy of the accident form then this will need to be authorised by a member of the senior leadership team.

Treatment of Injuries

Following 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 consult with a senior member of staff as to whether there is a requirement to call an ambulance.

First Aider/Senior Staff should call an ambulance on the following occasions:

- In the event of a significant injury or head injury
- If bleeding cannot be controlled
- In the event of a period of unconsciousness
- Whenever a fracture or break is suspected
- Whenever the first aider is unsure of the severity of the injuries

Cuts & Grazes, Wasp Stings

- All minor cuts/grazes can be treated with a cleansing wipe/or wet paper towel and covered if necessary.
- More severe cuts are treated in the same way, but a fully trained first aider must attend the patient to give advice.
- Minor cuts or grazes should be recorded on the First Aid Form app.
- Severe cuts requiring stitches, parents should be called to take them to a medical centre and recorded on the First Aid Form app:
- A wasp sting should be removed if possible and cold compress (wet tissue, paper towel) applied.

ANYONE TREATING AN OPEN CUT SHOULD USE MEDICAL GLOVES.

Splinters

Splinters can be removed if they are small and you can see the angle it went in but not if they are embedded or in a joint. They must be extracted in the same direction they went in. Sterile single-use tweezers are stored in the main first aid box located in the first aid room.

Treatment of Head injuries to Children

Children often fall and bang themselves, and thankfully most bangs to the head are harmless events and can be dealt with by the supervising adult by applying a cold compress (wet tissue or cloth) for the child's own comfort. Parents/Carers/Guardians must be contacted by telephone if the child has a visible or grazed bump to the head. All head bumps must be recorded on the First Aid Form app informing parents of possible symptoms to look out for. It is the responsibility of the first aider dealing with the head bump to contact the parent and also inform the class teacher.

Under NO circumstances, should ICE PACKS be applied to head bumps. It will reduce swelling but it can actually do more harm if there is a hairline fracture as this could result in the child needing additional emergency hospital treatment.

Emergency First Aiders should be sought if the child:

- becomes unconscious;
- is vomiting or shows signs of drowsiness;
- has a persistent headache;
- complains of blurred or double vision;
- is bleeding from the nose or ear; and/or has pale yellow fluid from the nose or ear.

If any of these symptoms occurs in a child who has had a bang to the head, urgent medical attention is needed. Parents should be contacted and the emergency services too.

In the event of an accident in which the child cannot stand up unaided, he/she should be left in the position that he/she was found (even if this is in the toilets or playground) so long as it is safe to do so and the emergency first aider must be called immediately to assess the situation.

Sprains, Strains or

Bruises Ice Packs

Instant ice packs are single-use only and for the treatment of sprains, strains and bruises ONLY and must be kept out of children's reach. These are stored in the main first aid room.

Guidance on the use of ice packs: Ideally an ice pack should be applied within 5 -10 minutes of the injury occurring. The pack should be applied to the injured area for 20 - 30 minutes. Emergency first aiders must check the colour of the skin after 5 minutes of applying the pack. If the skin is bright red or pink, remove the pack.

Precautions when using ice packs

DO NOT USE ICE OR HEAT

- If the casualty is diabetic
- Over areas of skin that are in poor condition
- Over areas of skin with poor sensation to heat or cold
- Areas with known poor circulation
- In the presence of visible or know infection(s)

Treatment of Suspected

Breaks/Fractures

The seven things to look for are:

1. Swelling
2. Difficulty moving
3. Movement in an unnatural direction
4. A limb that looks shorter, twisted or bent
5. A grating noise or feeling
6. Loss of strength
7. Shock

- If it is an open fracture, cover the wound with a sterile dressing and secure it with a bandage. Apply pressure around the wound to control any bleeding.
- Support the injured body part to stop it from moving. This should ease any pain and prevent any further damage.

- Once you've done this, call 999 or 111 for medical help. While waiting for help to arrive, don't move the injured person unless they're in immediate danger and keep checking for signs of shock.

First Aid training states that clothing should only be removed if absolutely necessary. Where clothing needs to be removed which could cause a safeguarding issue then two members of staff should be present. Only one needs to be first aid trained. However, if waiting for a second member of staff puts a child's life in danger then the first aider should not withhold treatment.

Body Spillages/HIV

All body spillages should be cleaned ideally by a First Aider within 15 minutes.

- Ideally protective gloves should be used when treating a pupil who is bleeding.
- Designated protective gloves are stored in the cleaning cupboard.
- All body fluid spillages (Vomit, Urine, Excrement and Blood) must be cleaned immediately. This is vital if the spread of infection is to be reduced. Gloves should be worn when in contact with blood or body fluid is likely.
- Spillage compound should be dispersed over vomit and left to absorb for 10/15 minutes, then swept up and disposed of in a plastic bag in the GREEN external bins. Spillage compound, a designated dust pan and brush and mop and bucket available for body spillages is kept in cleaning cupboard near on the KS2 corridor. Wash the affected area with warm water and detergent and then place the used mop head in the washing machine (Infant Kitchen).
- Excrement should be cleaned up and disposed of in a plastic bag.
- Urine should be mopped up with the designated mop and warm water and detergent.
- Blooded items should be placed in the yellow clinical waste bags (located in the first aid room) and disposed of in the sanitary bin in the female staff toilets.
- Inform the site supervisor who can then arrange for the area affected to be sanitized.

Procedures

All children who feel unwell during class time and need to go home should, where possible, be brought to the Office; where it is unsafe to move the child, a 'help hand' should be sent or a phone call made to Office or a first aider for assistance.

Staff who are qualified in First Aid will initially assess the child's need and apply basic first aid; a second opinion where necessary should also be sought from a member of SLT or another qualified first aider.

If there is even the slightest concern that the injury may be more serious, parents will be contacted immediately.

For serious incidents/medical emergencies then an ambulance will be called immediately. The decision to call an ambulance is usually the responsibility of the Head or Deputy; however, in a genuine emergency the nearest first aider will phone directly and inform the Headteacher once this is done.

Lunchtimes:

All children who require first aid during lunchtimes should be treated using the class first aid bum bags which should be taken out each day

A nominated first aider MUST inform early years' staff on a daily basis of ANY first aid that has been administered to EYFS children. It is the duty of staff members to investigate how an incident has occurred and this MUST be relayed back to the class teacher by designated welfare staff.

Breaktimes:

There are two first aid stations:

- Medical room
- 1st Aid room

During break time school needs to ensure that enough staff are on the yard, at least 2 members of staff, (usually three or four) so that one member of staff can administer first aid whilst another supervises the rest of the children. Class first aid bum bags must be taken out each breaktime.

Staff on duty MUST inform early years' staff of ANY first aid that has been administered to EYFS children. It is the duty of staff members to investigate how an incident has occurred and this MUST be relayed back to the class teacher by duty staff.

Any incident is recorded on the First Aid Forms app and a report is sent to parents/carers via email. Nominated first aiders will decide if a phone call home is necessary and will liaise with the office. Classroom staff will then re-assess the appropriate course of action on returning to the classroom through consultation with a qualified first aider.

Sickness

Our policy for the exclusion of ill or infectious children is discussed with parents. This includes procedures for contacting parents - or other authorised adults - if a child becomes ill while in the school.

- We do not provide care for children, who are unwell, e.g. have a temperature, or sickness and diarrhoea, or who have an infectious disease.
- Children with head lice are not excluded, but must be treated to remedy the condition.
- Parents are notified if there is a case of head lice in the school.
- HIV (Human Immunodeficiency Virus) may affect children or families attending the school. Staff may or may not be informed about it.
- Children or families are not excluded because of HIV status.

Inhalers and Epi-pens

All individual children's Epi-Pens are labelled and kept in their classrooms. An emergency epi-pen is located in the school office.

Staff have received Anaphylaxis and Epi Pen training. These include the staff working with children who currently have an epi pen. ANYONE can administer an Epi-Pen in an emergency if the adult/child is unable to do it themselves. Should a member of staff, who has not had the training have to do this, then the emergency services must be informed at the same time as the Epi-Pen is administered.

We have many children at Avondale Primary School with Asthma. All pumps and spacers should be labelled and kept in a plastic container in their child's classrooms. A note must be made on the First Aid Forms app

when a child uses their inhaler, including the date/time/dosage. It is a parents' responsibility to ensure that a child's inhaler is in school though school does have spare inhalers to use in an **emergency** situation. In the event of an attack, the inhaler must be taken to the child. All inhalers should accompany children when they are off the school grounds e.g. on a trip, swimming, visiting another school, etc. Children on the asthma register who have parental consent for the use of the emergency inhaler are clearly indicated. An emergency inhaler can be used if the child's prescribed inhaler is not available (for example, because it is broken, or empty). There are emergency kits which are clearly labelled for use in school, on trips and in the event of an evacuation.

Inhaler and epi-pens are checked monthly by the medical leads Mrs Yvonne McFarlane and Mrs Danielle Loftus.

Physical Education

All asthma inhalers should be taken with the children to the Physical Education lesson.

If an accident occurs, the pupil needs to be assessed by the teacher and sent to a qualified first aider, if required. The incident should be recorded on the First Aid Forms app, including the time and what happened, with specific detail.

A first Aid Kit is available from the School Office and an ice packs are kept in the fridge in the 1st Aid room. Portable first aid kits should be taken to all off-site events, together with inhalers and Epi-pens.

Educational Visits

The extent and nature of first aid provided will depend on the type of the visit and the risks identified. Organisers should undertake a *risk assessment* which will identify the level of first aid needed and make appropriate arrangements for pupils with special medical needs.

- A good knowledge of first aid and an adequate first aid box are required for all visits.
- In more remote locations, one of the teachers should be a fully-qualified first aider. First aid equipment carried should reflect specific hazards identified and the availability of professional medical help.
- Minimum first aid provision is:
 - a stocked and checked first aid box, appropriate to the nature of the visit and the numbers in the group;
 - an adult appointed to be in charge of first aid arrangements.
- An individual risk assessment would be needed for children with serious medical conditions.

Specific medical conditions

All children with specific conditions eg. Asthma, epilepsy will have a Care Plan which is written by the School Nurse and displayed in the school office, first aid room, SEN file, staff room and in the class file.

Appropriate medication should be with the child and in classrooms at all times (eg: inhalers and Epi-pens); a spare should also be kept in the Office.

Medicines in school

School staff are willing to administer basic medicines in school e.g. Antibiotics, creams that have been **prescribed** by a doctor with a minimum dosage of 4 times daily. A consent form needs to be completed by the parent, together with dosage directions. These form are located in the school office. Medicines will be stored in the school office and where necessary in a lockable fridge. Any medicines that are administered in school will be administered by staff who have had necessary training and they will be witnessed by another member of school staff to ensure correct administration.

