



First Aid Policy

Including

Asthma Procedures

Safeguarding Statement

West Heath Primary will continuously strive to ensure that everyone in our school is treated with respect and dignity. Each person in our school will be given fair and equal opportunity to develop their full potential with positive regard to gender, ethnicity, cultural and religious background, sexuality or disability. West Heath Primary School is committed to safeguarding and promoting the welfare of children and young people, and expects all staff to share this commitment.

Owner	Governing Body
Date of review	March 2021
Date of next review	March 2022
Owners signature	

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Audience

All members of West Heath Primary School should read and understand this policy

Aims

The aim of this policy is to provide children and adults in our care good quality first aid, this may involve Treatment of injury or illness in order to prevent a condition from getting worse, promote recovery and ultimately preserve life. This care may extend to the administration of medicines.

Procedure

This policy

- Give clear guidelines to all staff regarding all areas of first aid and medicines.
- Defines the responsibilities of the staff.
- Ensures the safe use and storage of medication on the school site.
- Ensures safe administration of medication on site
- Ensures good first aid cover is available on site and visits.
- Supporting pupils with medical conditions.

Training

West Heath Primary have the following members of staff trained in the following areas

Paediatric First Aid - Rita Rose, Dean Taylor-Bryant, Sarah Ellis, Louise Baker

First Aid at Work - Kim Hatch & Dean Taylor-Bryant

Basic First Aid – Teachers and teaching assistants throughout the school are trained in basic first aid.

The school will receive ongoing support from the school nursing team who will help and support with ongoing medical needs. The school nursing team will also carry out training for staff which includes:

- Epi pen
- Epilepsy
- Asthma
- Diabetes awareness

This training last took place in January 2021 and will be renewed in January 2023.

First Aid and Illness

- Children who feel unwell during lessons should be dealt with by the Teaching Assistant in their class. If needed, they will then be taken to the medical area/school office. If the class doesn't have a Teaching Assistant, then the child would be taken to the school office for first aid to be administered.
- Monitoring of unwell children will be the responsibility of the Senior Leadership Team (SLT).
- If a child needs to be sent home a member of the SLT will be consulted first.
- Staff will be made aware of any children in their class who have an individual health plan. Care plans are available in the red medical folder in each classroom.
- The head teacher acting on behalf of the Local authority can exclude a child from school with the purpose of separation from others. This could be due to them having a potentially dangerous or infectious disease, thus stopping the infection spreading.
- Every classroom has a basic first aid kit and record book, also emergency sick bowls.
- Full emergency first aid kits are available around school, Medical rooms, School Office.
- A first aid kit is always taken with a group off site, also a qualified first aider must always accompany the group.
- At playtimes/lunchtimes, qualified first aider will be on duty in the playground and will be identified by their green high-viz first aid jacket.
- Children on the playground will initially be dealt with by the first aider if further aid is needed, they will be taken to the medical room.

Accident Procedure

The injured person will be seen by a first aider on duty. If the first aider requires further assistance they will ask for either a Paediatric or First aid at work trained member of staff to support them depending on the age of the casualty.

- If they believe hospital treatment is required, they will liaise with a member of the SLT who will:
 1. Arrange for emergency services (999) to be called
 2. Arrange Parent /carers to be informed
 3. Arrange child/adult to be transported to the appropriate hospital by Taxi or car, taking another adult as a driver (insured only).

All accidents must be fully recorded in the Accident/Illness register by the person who dealt with the incident.

Bumped Heads

Any bumped head is to be treated as serious, no matter how minor. All bumped heads are treated with an ice pack. Bumped head notes are sent home, and the child is given a bumped head sticker as a visual reminder. The class teacher should be informed and a close eye kept on the child. Parents **MUST** always be informed at the end of the school day. If the bump is substantial then parents must be informed immediately by telephone.

The first aider may ask the parent to collect their child and seek further medical advice.

Cuts

All open cuts should be covered after they have been treated with a medical wipe. The child must be asked if they can wear plasters before one is applied.

ANYONE TREATING AN OPEN CUT MUST WEAR GLOVES.

All blood waste is disposed of in the appropriate bin (yellow) located in the medical rooms.

Accident Register

The accident registers are located in the medical rooms. If a child is administered first aid they must be given an accident slip to take home to their parents. If a child is taken to hospital after an accident in school, then a form needs to be submitted to the local authority with seven days. The school office will be responsible for managing this task.

All old accident registers will be kept centrally and stored until the child reaches 21 years of age, if this relates to an adult the form will be kept for three years from the date of the injury.

Medicines in school

At West Heath Primary **Prescription medicines** will only be accepted when this is essential and staff should only accept medicines that have been prescribed by a doctor, dentist, nurse or pharmacist.

We will only administer prescribed medication, such as antibiotics that need to be administered four or more times a day. A medication administer form **MUST** be completed by a parent/carer prior to the child being given medication. All medication will be stored in the main office and will be administered by the office staff. This will be overseen by Mr Taylor-Bryant, who will check that it is necessary for medication to be administered during school hours, for example because the pupil will otherwise miss school and lose teaching time.

- Ensuring that all medication is provided in its original container with a label, from the pharmacist if the medication is prescribed or the parent if it is over the counter, showing the:
 - Child's name, date of birth;
 - Name and strength of medication;
 - Dose;
 - Any additional requirements, e.g. to take the medication with food etc.;
 - Expiry date; and
 - Dispensing date.

Pain relief / Over the counter medication

If a child requires pain relief consistently throughout the day, the question needs to be asked should they be in school. Pain relief and or over the counter medicines will be administered in school if the need arises this will be assessed on a case by case basis.

All medication that is administered will be recorded in the medical form log and filed in to the child's school folder.

Over the counter medication will only be administered in school if the medication is new and the seal hasn't been broken any used medication will not be administered.

See Appendix 2 for medication form

Creams and Lotions

Creams and lotions will not be administered in school; however, we will administer creams for skin conditions such as eczema if prescribed by the GP. Staff must not rub cream onto the child's body, this will be the responsibility of the child. For very young children it will not be undertaken, unless agreed with parents in writing that an application can be done by an appointed member of staff.

Sun Lotions

We recognize that dangers from the sun can happen on cloudy days too. The UV rays from the sun can be harmful, particularly to young children's skin and eyes. The heat from the sun can also cause dehydration and sun stroke.

Children should wear suitable clothes, covering up most of the skin, particularly shoulders and neck.

- Children should wear hats which cover the head (and neck if possible). Sun hats can be brought into school for children to wear during playtimes and during outside PE sessions.
- Parents are encouraged to apply high protection sun cream, preferably no lower than SPF 30 before school. Children will be allowed to bring in their own sun cream with the bottle clearly marked indicating the child's name and class. Sun cream **will not** be administered by staff; children have to put the cream on themselves.
- Due to allergies, children cannot share sun cream with other children.
- Children are encouraged to drink plenty of fluids, which is always available in the school. Children may bring in as many water bottles as needed, to drink throughout the day.
- Children are encouraged to seek shady places to sit with their friends, if the sun is very bright and hot.

Sunglasses that protect children from harmful UV rays can be worn at playtimes and during outings. They are the children's responsibility. (The school is not liable for breakage or loss.)

Medical Storage

Medication will be stored in the medical room cupboard or fridge if needed.

Medication that needs to be administered daily for a prolonged period and does not need to be kept in a fridge will be stored in a lockable box in the child's classroom.

Each class has a medical box within this box you will find the following;

Asthma inhalers

EPI Pens (**Anaphylaxis Shock**)

Antihistamines

Class medical folder

This medical box should go everywhere with the class, ensuring medication can be administered immediately.

Vomiting and Diarrhoea

If the child vomits or has diarrhoea on site, they will be sent home. Children will not be allowed back to school for 48 hours after the last symptom has elapsed.

Rashes

If a child is suspected of having chicken pox or any infectious disease their parents will be contacted and asked to take their child to the GP for a full examination and diagnosis.

If your child has any sign of infectious they need to stay off school for a prescribed period of time. Members of staff will be informed of any infectious diseases around school.

Asthma Procedures

All parent/carers will be asked to complete the Asthma consent form (**see appendix 1**) giving full details of their child's asthma needs. Regular medication, emergency contact, family GP and reliever details. This form will also allow staff to administer the school's emergency inhaler if the need arises.

This form will ask information such as.

- Known triggers
- How many puffs
- Emergency plan

Every child with an asthma diagnosis **MUST** have a reliever (blue) in school. Clearly labelled with name and class.

- It is the **PARENTS** responsibility to keep records up to date and inhalers expiry date and checked it is full.
- The school has an emergency Salbutamol Inhaler in school and will be used if needed. All parents would have consented to this when completing the initial asthma form. If this is used a record of this will be kept and the parents informed.

Storage and Disposal of Medication

- All inhaler need to be clearly labelled with the child's name.
- Inhalers are kept in the classroom in a suitable, clearly labelled medical Box, and is easily accessible and visible to staff and pupils.
- Older pupils are encouraged to become self-managing by the end of year 6, and may if requested by parents carry their own inhalers.
- Ideally 2 inhalers should be in school for emergency use.
- Emergency reliever inhalers are kept in the main office, medical room, PE office.
- Technique concerns should be referred to the school nurse.
- Most children do not use relievers on a daily basis, therefore if a child experiences prolonged symptoms and needs to use their inhaler excessively, parents will be informed.
- Every time an inhaler is used, it will be noted on the child's asthma record.
- Spacers should be sent home at least half termly to be washed and returned with the child again, clearly labelled.

Activities and Exercise

- If pupils leave the premises e.g. School trips, swimming, etc. The Asthma box/inhaler must go with them.
- Pupils with asthma are encouraged to participate in PE lessons.
- Some pupils with asthma may need to use their reliever inhaler, before, during or after exercise.
- Reliever inhalers are readily available at all times and are taken into the PE lessons.

Asthma Attack

- Staff are trained to spot and know how to manage a child experiencing an asthma attack, also when and how to call an ambulance and what to do whilst waiting for the ambulance to arrive.
- Staff will follow the procedure outlined in the “Asthma Attack Flow chart” this is visibly displayed in the medical cupboard and in the class medical folders. (**Appendix 1B**).
- Sit comfortably and try to keep calm.
- Take one puff of your reliever inhaler every 30-60 seconds. You can take up to 10 puffs.
- If your symptoms improve, you still need to contact your GP, nurse or out-of-hours service the same day.
- **If you feel worse while you're using your inhaler or you don't feel better after 10 puffs or you're worried, call 999.**

In this case, take 10 more puffs after 15 minutes, if you need to

Appendices

Asthma Consent Form

The school will not administer medicine unless this form has been completed and signed by a parent/guardian.

All inhaler use will be overseen or administered by a member of staff.

Pupil Details:

Name..... Class.....

Medication:

Name/Type of medication

Known triggers Possible side effects

How many puffs How often (as directed by your doctor)

Additional information:

.....

1. I understand that it is my responsibility for my child's inhaler/spacer to be in school at all times. This should be cleaned and returned to school every half term.
2. I will also keep the school fully informed of any change to my child's condition.
3. I am aware the school will contact me, if there are any concerns regarding my child's medication.
4. In the event that my child's Inhaler stops working or cannot be accessed I authorise the use of the school's emergency Salbutamol inhaler to help relieve my child's asthma symptoms.

Parent/guardian Signature Date

Print Name Relationship to child

Staff SignatureDate

HOW TO RECOGNISE AN ASTHMA ATTACK?

The signs of an asthma attack are

- Persistent cough (when at rest)
- A wheezing sound coming from the chest (when at rest)
- Difficulty breathing (the child could be breathing fast and with effort, using all accessory muscles in the upper body)
- Nasal flaring
- Unable to talk or complete sentences. Some children will go very quiet.
- May try to tell you that their chest 'feels tight' (younger children may express this as tummy ache)

CALL AN AMBULANCE IMMEDIATELY AND COMMENCE THE ASTHMA ATTACK PROCEDURE WITHOUT DELAY IF THE CHILD

- Appears exhausted
- Has a blue/white tinge around lips
- Is going blue
- Has collapsed

Guidance on the use of emergency salbutamol inhalers in schools

WHAT TO DO IN THE EVENT OF AN ASTHMA ATTACK

- Keep calm and reassure the child
- Encourage the child to sit up and slightly forward
- Use the child's own inhaler – if not available, use the emergency inhaler
- Remain with the child while the inhaler and spacer are brought to them
- Immediately help the child to take two separate puffs of salbutamol via the spacer
- If there is no immediate improvement, continue to give two puffs at a time every two minutes, up to a maximum of 10 puffs
- Stay calm and reassure the child. Stay with the child until they feel better. The child can return to school activities when they feel better
- If the child does not feel better or you are worried at ANYTIME before you have reached 10 puffs, CALL 999 FOR AN AMBULANCE
- If an ambulance does not arrive in 10 minutes give another 10 puffs in the same way.

Parental/carer consent to administer a prescribed medicine

- All prescribed medicines must be in the original container as dispensed by the pharmacy, with the child's name, the name of the medicine, the dose and the frequency of administration, the expiry date and the date of dispensing included on the pharmacy label.
- A separate form is required for **each medicine**.

Child's name	
Child's date of birth	
Class/form	
Name of medicine	
Strength of medicine	
How much (dose) to be given. For example: One tablet One 5ml spoonful	
At what time(s) the medication should be given	
Reason for medication	
Duration of medicine Please specify how long your child needs to take the medication for.	
Are there any possible side effects that the school needs to know about? If yes, please list them	

I give permission for my son/daughter to carry and administer their own medication in accordance with the agreement of the school and medical staff.	Yes	
	No	
	Not applicable	

Mobile number of parent/carers	
Daytime landline for parent/carers	

Alternative emergency contact name	
Alternative emergency phone no.	
Name of child's GP practice	
Phone no. of child's GP practice	

- I give my permission for school staff to administer the prescribed medicine to my son/daughter during the time he/she is at school. I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.
- I understand that it may be necessary for this medicine to be administered during educational visits and other out of school activities, as well as on the school premises.
- I also agree that I am responsible for collecting any unused or out of date medicines and returning them to the pharmacy for disposal and supplying new stock to the school, if necessary.
- The above information is, to the best of my knowledge, accurate at the time of writing.

Parent/carers name	
Parent/carers signature	
Member of staff accepting form	
Date	

Prescribed Medical Form

Child's Name		Class	Name of Medicine	
Date	Time Given	Dosage	Reason for medication	Given By (Print name)

Before filing, please make sure the parent has seen and sign this form.

Staff Signature

Parent Signature

Parental/carers consent to administer an ‘over-the-counter’ (OTC) medicine

- All over the counter (OTC) medicines must be in the original container.
- A separate form is required for **each medicine**.

Child's name	
Child's date of birth	
Class/form	
Name of medicine	
Strength of medicine	
How much (dose) to be given. For example: One tablet One 5ml spoonful	
At what time(s) the medication should be given	
Reason for medication	
Duration of medicine Please specify how long your child needs to take the medication for	
Are there any possible side effects that the school needs to know about? If yes, please list them	

Mobile number of parent/carers	
Daytime landline for parent/carers	
Alternative emergency contact name	
Alternative emergency phone no.	

Name of child's GP practice	
Phone no. of child's GP practice	

- I give my permission for the school staff to administer the OTC medicine to my son/daughter during the time he/she is at school. I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is no longer needed.
- I understand that it may be necessary for this medicine to be administered during educational visits and other out of school activities, as well as on the school premises.
- I confirm that the dose and frequency requested is in line with the manufacturers' instructions on the medicine.
- I also agree that I am responsible for collecting any unused or out of date medicines and returning them to the pharmacy for disposal. If the medicine is still required, it is my responsibility to obtain new stock for the school.
- The above information is, to the best of my knowledge, accurate at the time of writing.

Parent/carers name	
Parent/carers signature	
Member of staff accepting form	
Date	

Over the counter medication form

Child's Name		Class		Name of Medicine	
Date	Time Given	Dosage	Reason for medication	Given By (Print name)	

Before filing, please make sure the parent has seen and sign this form.

Staff Signature

Parent Signature