



St Joseph's Catholic Primary School

First Aid and Medication Policy

First Aid and Medication Policy Statement

The Governors and Headteacher of St Joseph's Catholic Primary School accept their responsibility under the Health and Safety (First Aid) regulations 1981 and acknowledge the importance of providing First Aid for employees, children and visitors within the school. This policy will cover specific procedures for managing prescription medicines which need to be taken whilst in school/nursery. A clear statement is provided on the role and responsibility of staff for managing and administering or supervising the administration of medicines. Parental responsibilities are outlined in respect of their child's medical needs and written agreement/consent is requested for medicines to be administered to their child. We are committed to the authority's procedure for reporting accidents and recognise our statutory duty to comply with the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995. This policy has due regard to legislation and statutory guidance, including, but not limited to, the following:

- Health and Safety at Work etc. Act 1974
- The Health and Safety (First Aid) Regulations 1981
- The Management of Health and Safety at Work Regulations 1999
- DfE (2015) 'Supporting pupils at school with medical conditions'
- DfE (2000) 'Guidance on First Aid for Schools'

Signed: _____ Date: _____
(Headteacher)

Signed: _____ Date: _____
(Chairperson of the Governing Body)

Statement

The school's arrangements for carrying out the policy include nine key principles:

- Places a duty on the Governing body to approve, implement and review the policy.
- Place individual duties on all employees.
- To report, record and where appropriate investigate all accidents.
- Records all occasions when first aid is administered to employees, pupils and visitors.
- Provide equipment and materials to carry out first aid treatment.
- Make arrangement to provide training to employees, maintain a record of that training and review annually.
- Establish a procedure for managing accidents in school which require First Aid treatment.
- Provide information to employees on the arrangements for First Aid.
- Undertake a risk assessment of the first aid requirements of the school

The health and safety of all children at St Joseph's Catholic Primary School is of the highest importance to all staff. This policy explains the practices in place to address the health needs of the children which may be as a result of accidents or medical conditions.



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Trained First Aiders

The school has six qualified First Aiders who have completed **The Combined First Aid at Work and Paediatric First Aid Course** and are responsible for dealing with any serious first aid matters and can be called upon to offer advice whenever required.

Name	Contact	Location	Date of first aid qualification
Name	Combined Paediatric and First Aiders: Email address	Location	Date
Bernadette Milnes	Office@stjosephsbradford.bradford.sch.uk	Office	17/04/2019
Juanita Superville	Office@stjosephsbradford.bradford.sch.uk	KS1/KS2	17/04/2019
Kelly Uttley	Office@stjosephsbradford.bradford.sch.uk	KS1/KS2	02/10/2019
Nichola Jeffrey	Office@stjosephsbradford.bradford.sch.uk	KS1/KS2	30/06/2017
Stephanie Keogh	Office@stjosephsbradford.bradford.sch.uk	EYFS	30/06/2017
Janette Oljanuk	Office@stjosephsbradford.bradford.sch.uk	Own office KS2	02/10/2019

First aid training is carried out in line with current Health and Safety and Ofsted recommendations. This is every 3 years to re-qualify as a first aider and annual refresher courses are available.

Name	Contact	Location	Date of first aid qualification
Name	Paediatric First Aiders RQF: Email address	Location	Date
Firasha Hussain	Office@stjosephsbradford.bradford.sch.uk	EYFS	17/09/2019
Lena Wasilewska	Office@stjosephsbradford.bradford.sch.uk	Dinner hall/KS2 playground	19/07/2017

We also have two Paediatric First Aiders who have completed **The QA Level 3 Award in** and can administer First Aid to children up to Puberty.

First Aid Equipment

First Aid equipment is kept in the;

- First aid cupboard in the medical room in key stage 1 hall



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- Cabinet in the key stage 2 building copy room in
- Cabinet at the end of the top floor corridor next to the nurture room.
- The first aid equipment is regularly checked and managed by Miss N Jeffrey.
- Small first aid packs are available in all classrooms and in bags used by the midday assistants.

Cuts

Anyone treating an open cut should use PPE equipment.

- To protect the individual and others from further risk of infection.
- To protect the individual administering first aid, cleaning, etc

The nearest adult deals with small cuts and grazes

All open cuts should be covered after they have been treated with a medical wipe. Children should have their medical data checked if they can wear plasters BEFORE one is applied. Children who are allergic to plasters will be given an alternative dressing. Minor cuts should be recorded in the accident file.

Any adult can treat more severe cuts, but a fully trained first aider must attend the patient to give advice. Severe cuts should be recorded in the accident file and a major accident form should be given to the parents/carers. A copy of this form should be given to the office to be kept on file.

Procedure to adopt when dealing with blood, body fluids, excreta, sputum and vomit:

- Isolate the area.
- Always use PPE equipment and apron (located in all the First Aid Boxes) NEVER touch body fluids with your bare hands
- Clean the spillage area with appropriate cleaning materials.
- Double bag all materials used and dispose of in outside dustbin.
- Blood loss – if possible give individual cotton pad to hold against themselves whilst you put on disposable gloves.
- Always wash hands after taking disposable gloves off.

Head Bumps

- Any bump to the head, no matter how minor is treated as serious. All bumped heads should be treated with an ice pack. If ice packs are used then these are first wrapped in a paper towel to prevent contact with the skin.
- Parents and Guardians must be informed by telephone. The adults in the child's class room should be informed and keep a close eye on the child. All bumped head accidents
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- should be recorded in the Inventory system. Children with a bumped head should be given a head injury letter and parents notified.
- In the event of serious injury or concerns, first aiders must complete an accident/ incident report form, and the HANDS form on Bradford Council's RIVO system must be completed. <https://www.bradford.gov.uk/hands/index.asp?a=Accidents>
- First Aiders may advise the parent to see a doctor or visit an accident and emergency department to seek further advice.

Asthma

There are two main types of medicines used to treat asthma, relievers and preventers. Usually a child will only need a reliever during the School day.

RELIEVERS (BLUE INHALERS) are medicines taken immediately to relieve asthma symptoms and are taken during an asthma attack. They are sometimes taken immediately before exercise.

PREVENTORS (BROWN, RED, ORANGE INHALERS) are usually taken at home.

Children with asthma need to have immediate access to their reliever inhalers when they need them. Inhaler devices usually deliver asthma medicines. A spacer is used with most inhalers some children may need help with this, many children from an early age learn to take charge of their inhaler themselves.

Staff will take responsibility for inhalers for younger children who are not personally able to be responsible for their inhaler. Inhalers will be stored in a safe but readily accessible place and clearly marked with child's name in the class and office. Children will always be shown where

their inhaler is stored. Inhalers will always be available during physical / sports activities and excursions.

Signs of an asthma attack

- Coughing
- Being short of breath
- Wheezy breathing
- Feeling of tight chest
- Being unusually quiet

When a child has an attack, a First Aider should be called and the child should be treated according to their individual educational health care plan as previously instructed by child's parent.



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An ambulance should be called if:

- The symptoms do not improve sufficiently in 5-10 minutes
- The child is too breathless to speak
- The child is becoming exhausted
- The child looks blue

The First Aider will stay with the child and ensuring the child remains calm and to give reassurance. Another member of staff will telephone parents immediately.

Parents of asthmatic children are asked to complete an Asthma Medication form (AM5: Appendix 2) and to ensure that their child is equipped with a labelled inhaler.

Calling the Emergency Services

In case of a major accident, it is the decision of the fully trained first aider if the emergency services are to be called. Staff are expected to support and assist the trained first aider in their decision. The Headteacher or Deputy Headteacher should be informed if such a decision has been made, even if the accident happened on a school trip or on school journey. If the casualty is a child, their parents/ guardians should be contacted immediately and given 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 available from the school office.

When contacting the Emergency Services, the full school address should be given and the postcode emphasised to distinguish from other St Joseph Schools.

Off-Site Visits

- It is the responsibility of the teacher in charge to ensure that they have a qualified First Aider with them on the visit and that they have a First aid box with them.
- All teachers taking children out of school for a trip or residential visit will carry any medication needed for individual children and include in risk assessments.

Chicken Pox and Other Diseases/Rashes

If a child is suspected of having chicken pox etc, we will look at the child's arms or legs. Chest and back will only be looked at if we are further concerned. We should call a First Aider and two adults should be present. The child should always be asked if it was ok to look.

Headlice

Staff do not touch children and examine them for headlice. If we suspect a child or children have headlice we will have to inform parents/carers. A standard letter should be sent home with all the children in that class where the suspected headlice incidence is. If we have concerns over



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headlice the school nurse can be called in, who is able to examine children and also give advice and guidance to parents/carers on how best to treat headlice

Medical Information

Medical information about a child is gathered through the data collection sheets, which are issued annually and updated throughout the year as and when required through information provided by parent or carer. When a new child starts within the school, parents are asked to supply information regarding medical and health issues.

All information is logged on the medical register, which is updated regularly by the SENCO.

All medical information is shared with class teachers and kept confidentially in classrooms. All emergency phone numbers are kept on Sims and in the pupil files in the office.

The school catering manager is notified of all children with food allergies. Photographs are provided to catering and school staff to help staff identify and therefore provide the appropriate care for specific children.

St Joseph's Catholic Primary School will not discriminate against pupils with medical needs and will take all reasonable steps to ensure they are included in all school activities.

In certain circumstances it may be necessary to have in place an Individual Educational Health Care Plan. This will help staff identify the necessary safety measures to help support young people with medical needs and ensure that they, and others, are not put at risk. These plans will be drawn up in consultation with parents and relevant health professionals. They will include the following:

- Details of the young person's condition
- Special requirements i.e. dietary needs, pre-activity precautions
- Any side effects of any medicines
- What constitutes an emergency
- What action to take in an emergency
- Who to contact in an emergency
- The role staff can play

Administration of Medicines

Ideally it is preferable that parents, or their nominee, administer medicines to their children, this could involve the young person going home during a suitable break or the parent visiting the school. However, this may not be appropriate. In such cases a request must be made for medicine to be administered to the young person at school using the appropriate form.

(Appendix 1). These are kept in the Administering Medication folder in the office.



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Medication

The school will only consider administering medication that has been prescribed by a doctor, dentist or nurse prescriber.

All medicines will be stored in the originally contained packaging in which they were dispensed, together with the prescriber's instructions for administration, properly labelled, showing name, dosage date of prescription and expiry date. Staff will only administer medication where the prescribed dosage is **at least four times a day**.

We will not accept medicines that have been taken out of the container as originally dispensed, nor make changes to dosage on parent's instructions.

If medicines are prescribed in dose frequencies which enable it to be taken outside school hours, parents will be encouraged to ask their prescriber about this.

A young person under 16 should never be given aspirin or medicines containing ibuprofen unless prescribed by a doctor.

Medicines brought into school are kept in the school office.

Before administering medication to a child, a colleague will also witness the and stay whilst medicine is being administered. They will then co-sign the Medication Permission Form. When the medicine is administered there should be two members of staff present. The member of staff administering the medicine should first check medication name, the name of child, previous dosage details, prescribed dose, expiry date on medicine label/container against the written dosage on the Medication Permission Form. These details should be also checked by the second member of staff. The person administering the medication will then check the dosage and the time is correct and sign once the task is completed. The witness must double check this information and witness the medication being administered. The witness must then co-sign the Medication Permission Form.

Medicines are stored strictly in accordance with the product instructions and in the original container in which they are dispensed. Staff ensure that the supplied container is clearly labelled with the name of the child, name and dosage of the medicine and the frequency of administration.

All medicines, including controlled drugs, will be returned to the parent, when no longer required, for them to arrange for safe disposal. The parent should also collect Medicines held at the end of the day. If parents do not collect all medicines they should be taken to a local pharmacy for safe disposal. An emergency supply of medication will be available for pupils with medical conditions that require regular medication or potentially lifesaving equipment, e.g. an EpiPen or inhaler.



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Medication and Educational Residential Visits

Prior to any residential visit taking place, medical forms will be completed by the parents/carers of all pupils, allowing school to act as loco parentis. This will allow the school to consider what reasonable adjustments may need to be made to enable young people with medical needs to participate fully and safely on visits, with arrangements for taking any necessary medicines taken into consideration. Staff supervising excursions will always be aware of the medical needs and relevant emergency procedures of pupils in their care.

Copies of medical forms will be taken on the visit and relevant information also stored in school. If staff are concerned about whether they can provide for a young person's safety, or the safety of others, on a visit, the school will seek parental views and medical advice from the school health service and/or the young person's GP, Specialist Nurse or Hospital Consultant.

Prior to the residential, medication should be handed to the First Aider by parents/ carers. Following the visit, the First Aider will hand back any medication to the child's parent. (Medication should not be handed back to the child).

Allergies

Parents will advise the school when a child has a chronic medical condition or severe allergy so that EHCP can be implemented and staff can be trained to deal with an emergency in an appropriate way. Examples of this include, epilepsy diabetes and anaphylaxis. A disclaimer must be signed by the parents in this regard.



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Appendix 1

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The Administration of Medication in School	
CONSENT FORM FOR PARENTS/CARERS TO COMPLETE IF THEY WISH THE SCHOOL TO ADMINISTER MEDICATION.	
The school will only administer medication that has been prescribed by a health professional. The school will not give your child any medication unless you complete and sign this form and the Headteacher/Office Manager has confirmed that school staff have agreed to administer the medication and, where necessary, have received appropriate training.	
DETAILS OF PUPIL	
Surname:	Forename:
Date of Birth	M/F
Class:	
Address:	
Condition or illness:	
MEDICATION	
Name/Type of Medication (as described on the container)	
For how long will your child take this medication:	
Date dispensed:	
Full Directions for use:	
Dosage and method:	
Timing:	
Special Precautions:	
Side Effects:	
Self-Administration:	
Action to be taken if pupil refuses to take the medication:	
CONTACT DETAILS:	
Name:	
Daytime Tel No:	



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Relationship to Pupil:

Address:

I understand that I must deliver the medicine personally to (agreed member of staff) and accept that this is a service which the school is not obliged to undertake.

I confirm that the medication has been prescribed by a Doctor/Consultant and that this information has been provided in consultation with my child's Doctor/Consultant.

I confirm that each item of medication has been delivered in the original container and is clearly labelled with the following information: pupil's name, name of medication, dosage, frequency of dosage, date of dispensing, storage requirements (if necessary) and expiry date.

I consent to medical information concerning my child's health to be shared with other school staff and/or health professionals to the extent necessary to safeguard his/her health and welfare.

Date: _____ Signature _____

For school use only:
Name of member of staff administering the medicine:
I agree to the above member of staff administering this medicine
Headteacher/Admin Manager:
Procedures to take in an Emergency:



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Appendix 2 - AM5

ASTHMA MEDICATION
This form must be completed by parents/guardian.
Pupils Name:
Class/Form:
Address:
Condition or Illness:
Inhaler Type:
Number of inhalations needed:
How often required:
Administered by pupil or needs assistance?
Procedures to be taken in an emergency:
CONTACT INFORMATION
Name:
Daytime Telephone no:
Relationship to Child:
I would like my son/daughter to keep his/her medication on him/her for use as necessary. I will take full responsibility for any loss or misuse of the medication.
Signed:
Date:
Relationship to Child: