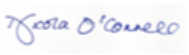
Holtsmere End Infant and Nursery School

First Aid Policy

Date: March 2025

Signed:

Nicola O'Connell – Headteacher 

Jane Bisseker – Chair of Governors

First Aid Policy

Rationale

Children and adults in our care need good quality first aid provision. 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 to dealing with Asthma and headlice.

Purpose

This policy;

1. Gives clear structures and guidelines to all staff regarding all areas of first aid and medicines

2. Clearly defines the responsibilities and the staff

3. Enables staff to see where their responsibilities 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 good first aid cover is available in the school and on visits

Guidelines

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. It is given to all new staff to the school as part of their induction pack. The policy is regularly reviewed and updated.

The administration and organisation of first aid and medicines provision is taken very seriously at Holtsmere End Infant and Nursery School. 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 with the school nurse each year. Adjustments are made immediately if necessary.

First aid in school

Training

All staff who work directly with children undertake offered emergency first aid training. Five members of staff have received Paediatric First Aid training. Fully trained first aiders attend retraining courses as required. There should always be one fully trained first aider on the school premises at any one time.

There is always a fully trained paediatric first aider in the EYFS at all times.

First aid kits

Midday Assistants are issued with their own first aid kit and carry this with them at lunchtime. All classes have an emergency first aid kit that the teacher keeps in a convenient place. These are checked and

restocked at the beginning of each term by a nominated member of staff.

Cuts

The nearest adult deals with small cuts. All open cuts should be covered after they have been cleaned. Children should always be asked if they can wear plasters BEFORE one is applied. Children who are allergic to plasters will be given an alternative dressing.

Any first aider can treat more severe cuts, but a fully trained first aider must attend the patient to give advice. Cuts, except very minor ones, should be recorded in the accident file and parents informed.

ANYONE TREATING AN OPEN CUT SHOULD USE RUBBER GLOVES.

All blood waste is disposed of in a yellow bag and disposed of by the site manager.

Bumped heads

Any bump to the head, no matter how minor is treated as serious. All bumped heads should be treated with an ice pack. An entry on Medical tracker indicating a head injury must be completed for any child who bumps their head and an indication whether they are well enough to remain in school. The child's teacher must be informed so that he/she can keep a close eye on the progress of the child.

Parents and guardians of a child with **ANY** bumped head injury are informed by email via 'Medical tracker' and they are given an 'I've bumped my head' wristband.

Accident logging.

All accidents are on 'Medical tracker'. Entries are checked by the office manager and are also sent to the Headteacher. They are sent to parents so that they are aware of the incident and the treatment provided.

For major accidents an online accident form needs to be completed on SOLERO within 24 hours of the accident. The Headteacher needs to be informed as is the case in all other accidents.

Emergency Procedures in the event of illness or accident

Please see attached document '*Emergency Procedures in the event of illness or accident*'

<u>Medicines in School</u>

What can be administered?

The school is able to administer prescribed medication. Parents need to complete a Permission form setting out the details of the medication to be administered.

Creams

In exceptional circumstances we may administer creams for skin conditions such as eczema if we have written authorisation from the child's parents/carers. HOWEVER, staff must not rub cream onto a child's body and the cream has to be administered by the child.

Asthma and other medical problems

At the beginning of each academic year, any medical problems are shared with staff and a list of these children and their conditions is kept in the class register. New photographs and signs are made of children with severe medical problems such as asthma.

These signs and notices are displayed,

1. In the class register

2. In the school office

3. In the school kitchen

4. In the staffroom

Epipens and anaphylaxis shock training

Some children require epipens to treat the symptoms of anaphylaxis shock. Epipens are all kept safely in the children's classes. Staff receive regular training on the use of epipens when there are pupils in school who require their use. Children who require these epipens are listed as above.

Inhalers

Inhalers are kept in a labelled box in each classroom and stored in a medical bag near the exit in each classroom.

OTHER ASTHMA SUFFERERS CANNOT SHARE INHALERS.

In the event of a child having an asthma attack, who has no inhaler, the parents must be sought quickly by phone to give permission for the administration of someone else's inhaler. If parents cannot be located, then the emergency services will be contacted and they would give permission for the sharing of the inhaler.

Headlice

Staff do not touch children and examine children for headlice. If a child is suspected of having headlice Parents/Carers are informed and asked to examine them. When we are informed of a case of head lice in school, we send a standard letter to the class where the case has been identified. Parents will be asked to collect their child and treat the headlice and return the child to school.

Vomiting and diarrhoea

If a child vomits or has diarrhoea in school, they will be sent home immediately. Children with these conditions will not be accepted back into school until 48 hours after the last symptom has elapsed.

Chicken pox and other diseases, rashes

If a child is suspected of having chicken pox etc, we will look at their arms or legs. To look at a child's back or chest would only be done if we were concerned about infection to other children. In this case another adult would be present and we would ask the child's permission.

If a child has any of these infections they will need to stay off school for a prescribed period of time. The Headteacher or school office will advise the parent of the timescales.

First Aid on School trips

All of our staff are First Aid trained and on any trip the Group Leader will ensure that an adequate first aid box is taken. Staff will be made aware of who is in charge of First Aid for the trip. Staff will be provided with information and a risk assessment will be in place for any additional provision required.
Staff will also be provided with contact details for all parents should there be a need to contact them urgently on the trip.
Medication, inhalers and epi-pens will be stored safely in the First Kit along with information about administration will also be included.

Monitoring and review

The effectiveness of this policy will be monitored by the Teaching and Learning Committee.

Review: March 2027