

Broadway First School

First Aid Policy including Administering Medication

Updated: March 2024

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Statement of intent

Broadway First School is committed to providing emergency first aid provision in order to deal with accidents and incidents affecting staff, pupils and visitors. The arrangements within this policy are based on the results of a suitable and sufficient risk assessment carried out by the school in regard to all staff, pupils and visitors.

The school will take every reasonable precaution to ensure the safety and wellbeing of all staff, pupils and visitors.

This policy aims to:

- Ensure that the school has adequate, safe and effective first aid provision for every pupil, member of staff and visitor to be well looked after in the event of any illness, accident or injury, no matter how major or minor.
- Ensure that staff and pupils are aware of the procedures in the event of any illness, accident or injury.
- Ensure that medicines are only administered at the school when express permission has been granted for this.
- Ensure that all medicines are appropriately stored.
- Promote effective infection control.

Nothing in this policy will affect the ability of any person to contact the emergency services in the event of a medical emergency. For the avoidance of doubt, staff should dial 999 in the event of a medical emergency before implementing the terms of this policy and make clear arrangements for liaison with ambulance services on the school site.

1. Legal framework

- 1.1 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
 - The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 1995
 - DfE (2015) 'Supporting pupils at school with medical conditions'
 - DfE (2000) 'Guidance on first aid for schools'
 - DfE (2019) 'Automated external defibrillators (AEDs)'
 - DfE (2017) 'Statutory framework for the early years foundation stage'
 - DfE (2023) 'Early years foundation stage (EYFS) statutory framework'
 - DfE (2023) 'Automated external defibrillators (AEDs): a guide for maintained schools and academies'
- 1.2 The policy is implemented in conjunction with the following school policies:
 - Health and Safety Policy
 - Supporting a Child With A Medical Condition
 - Data Protection Policy
 - Behaviour and Discipline Policy
 - Child Protection and Safeguarding Policy
 - Learning Outside the Classroom Policy

2. Roles and responsibilities

- 2.1. The **governing body** is responsible for:
 - The overarching development and implementation of this policy and all corresponding procedures.
 - Ensuring that the relevant risk assessments, and assessments of the first aid needs of the school specifically, have been conducted.
 - Ensuring that there is a sufficient number of appointed first aiders within the school based upon these assessments.
 - Ensuring that there are procedures and arrangements in place for first aid during off-site or out-of-hours activities, e.g. educational visits or parents' evenings.
 - Ensuring that insurance arrangements provide full cover for any potential claims arising from actions of staff acting within the scope of their employment.
 - Ensuring that appropriate and sufficient first aid training is provided for staff, and ensuring that processes are in place to validate that staff who have undertaken training have sufficient understanding, confidence and expertise in carrying out first aid duties.
 - Ensuring that adequate equipment and facilities are provided for the school site.

- Ensuring that first aid provision for staff does not fall below the required standard and that provision for pupils and others complies with the relevant legislation and guidance.
- Ensuring that an 'appointed person' is selected from amongst staff to take the lead in first aid arrangements and procedures for the school.
- Ensuring that the school has:
 - A suitably stocked first-aid kit.
 - An appointed person to take charge of first-aid arrangements.
 - Information for all employees giving details of first-aid arrangements.

2.2. The **Headteacher** is responsible for:

- The day-to-day development and implementation of this policy and its related procedures.
- The development and implementation of this policy and its related procedures.
- Ensuring that all staff and parents are made aware of the school's policy and arrangements regarding first aid.
- Ensuring that all staff are aware of the locations of first aid equipment and how it can be accessed, particularly in the case of an emergency.
- Ensuring that all pupils and staff are aware of the identities of the school first aiders and how to contact them if necessary.

2.3. **All Staff** are responsible for:

- Ensuring that they have sufficient awareness of this policy and the outlined procedures, including making sure that they know who to contact in the event of any illness, accident or injury.
- Endeavouring at all times to secure the welfare of the pupils at school.
- Making pupils aware of the procedures to follow in the event of illness, accident or injury.

2.4. First aid trained staff are responsible for:

- Completing and renewing training as dictated by the governing body.
- Ensuring that they are comfortable and confident in administering first aid.
- Ensuring that they are fully aware of the content of this policy and any procedures for administering first aid, including emergency procedures.
- 2.5. The appointed person does not need to be a first aider, and must not conduct any first aid for which they have not been trained. More information on the role of the appointed person can be found here. The appointed person is responsible for:
 - Liaising with senior staff to oversee the school's first-aid arrangements.
 - Liaising with senior staff to ensure someone takes charge when someone is injured or becomes ill.
 - Looking after the first-aid equipment, e.g. restocking the first aid container.

- Liaising with office staff, ensuring that an ambulance or other professional medical help is summoned when appropriate.
- Liaising with senior staff to ensure that any reportable incidents are completed by the appropriate staff member.

3. First aid provision

- 3.1. The school will routinely re-evaluate its first aid arrangements, at least every two years, to ensure that these arrangements continue to be appropriate for hazards and risks on the school premises, the size of the school, the needs of any vulnerable individuals onsite, and the nature and distribution of pupils and staff throughout the school.
- 3.2. The school will have suitably stocked first aid boxes in line with the assessment of needs. Where there is no special risk identified, a minimum provision of first aid items will be as follows:
 - 20 individually wrapped sterile adhesive dressings, of assorted sizes
 - 2 sterile eye pads
 - 4 individually wrapped triangular bandages, preferably sterile
 - 6 safety pins
 - 6 medium-sized (approximately 12cm x 12cm) individually wrapped sterile unmedicated wound dressings
 - 2 large-sized (approximately 18cm x 18cm) individually wrapped sterile unmedicated wound dressings
 - 1 pair of disposable gloves
 - Medicated wipes
- 3.3. All first aid containers will be identified by a white cross on a green background.
- 3.4. The appointed person, in liaison with other staff, will routinely examine the contents of first aid boxes, including any mobile first aid boxes for offsite use these will be frequently checked and restocked as soon as possible after use. Items will be safely discarded after the expiry date has passed.
- 3.5. First aid boxes are in the following areas:
 - The school office (in Evac bag)
 - In every classroom
 - Minimum of 3 spare kits for offsite visits

4. First aiders and appointed persons

- 4.1. The main duties of first aiders will be to administer immediate first aid to pupils, staff or visitors, and to ensure that an ambulance or other professional medical help is called when necessary.
- 4.2. The school will ensure that all first aiders hold a valid certificate of competence, issued by a HSE-approved organisation.

- 4.3. The school will be mindful that many standard first aid at work training courses do not include resuscitation procedures for children, and will consequently ensure that appropriate training is secured for first-aid personnel where this has not already been obtained.
- 4.4. The school will ensure that refresher training and retesting of competence is arranged for first aiders within the school before certificates expire.
- 4.5. First aiders will ensure that their first aid certificates are kept up-to-date through liaison with the Appointed Person/School Secretary.
- 4.6. Each classroom's first aiders will be responsible for ensuring all first aid kits are properly stocked and maintained. The first aid appointed person will be responsible for maintaining sufficient supplies are available to do this.
- 4.7. First aid notices will be clearly displayed in the school with key information to ensure that pupils and staff know who they must contact in the event of illness or injury.
- 4.8. The current first aid trained person(s) are:

Name	Location	Certification type	Date of first aid qualification
Zoe Boulton	Class 3	Paediatric	14/03/2023
Lisa Fielder	Class 1	Paediatric	04/09/2023
Helena Lawes	Class 2	Paediatric	12/03/2023
Jackie McCorrie	Class 4	Paediatric	30/11/2023
Laura Kerby	Class 2	Paediatric	04/09/2023
Abigail Pearson	Class 3	Paediatric	04/09/2023
Julie Pearson	LTS/Cleaner	Paediatric	04/09/2023
Kristy Rose	LTS/Cleaner	Paediatric	04/09/2023
Sarah Worrall	Class 1	Paediatric	14/03/2023
Lauran Cotton	Class 2	Paediatric	04/09/2023
Jordan Ballard	Class 3	Paediatric	04/09/2023

- 4.9. The school will ensure that there is always a sufficient number of first-aid personnel available on site at all times to provide adequate cover to all areas of the school.
- 4.10. In line with government guidance, and taking into account staff:child ratios, the school will ensure that there is at least one member of staff with a current and full Paediatric First Aid (PFA) certificate on the premises and available at all times when Early Years pupils are present, and accompanying Early Years pupils on any and all outings taken.
- 4.11. EYFS only The school will ensure that PFA certificates are renewed every three years, and that training meets the criteria set out in Annex A of the 'Early years foundation stage (EYFS) statutory framework'.
- 4.12. EYFS only The school will display staff PFA certificates or a list of staff who have a current PFA certificate and make this information available to parents.

- 4.13. All staff members will be made aware that agreeing to become a first aider for the school is strictly on a voluntary basis and that they should never feel pressured to take on this role.
- 4.14. When selecting first aiders, the school will follow the criteria laid out in government guidance, considering the individual's:
 - Reliability and communication skills.
 - Aptitude and ability to absorb new knowledge and learn new skills.
 - Ability to cope with stressful and physically demanding emergency procedures.
 - Normal duties a first aider must be able to leave to go immediately to an emergency.

5. Emergency procedures

- 5.1. If an incident, illness or injury occurs, the member of staff in charge will assess the situation and decide on the appropriate course of action, which may involve calling for an ambulance immediately or calling for a first aider.
- 5.2. If called, a first aider will assess the situation and take charge of first aider administration.
- 5.3. If the first aider does not consider that they can adequately deal with the presenting condition by the administration of first aid, then they will arrange for the injured person to access appropriate medical treatment without delay.
- 5.4. Where an initial assessment by the first aider indicated a moderate to serious injury has been sustained, or the individual(s) has become seriously unwell, a responding staff member will call 999 immediately.
- 5.5. Where necessary, a trained staff member will administer emergency help and first aid to all injured persons. The purpose of this is to keep the victim(s) alive and, if possible, comfortable, before professional medical help arrives. In some situations, immediate action can prevent the accident from becoming increasingly serious, or from involving more victims.
- 5.6. Where the seriously injured or unwell individual(s) is a pupil, the following process will be followed:
 - A responding staff member calls 999 immediately and follows the instructions of the operator this may include the administering of emergency first aid.
 - Where an ambulance is required, a staff member accompanies the pupil in the ambulance and calls the pupil's parent as soon as possible to inform them of the course of action taken. The staff member remains with the pupil at the hospital until a parent arrives.
 - Where an ambulance is not required, but medical attention is needed, the pupil
 is taken to a hospital or doctor in a staff car, accompanied by at least two staff
 members one of whom will drive the car, and one of whom, a first aider, to sit

with the pupil in the back seat and attend to their medical needs. In this case, <u>business car insurance cover</u> will be required. The pupil's parent is called as soon as possible to inform them that this course of action has been taken, and at least one of the staff members remains with the pupil at the hospital or doctor's office until a parent arrives.

- The school will ensure that no further injury can result from any incidents that occur, either by making the scene of the incident safe, or (if they are fit to be moved) by removing injured persons from the scene.
- 5.7. Responding staff members will see to any pupils who may have witnessed the incident or its aftermath and who may be worried or traumatised, despite not being directly involved. These pupils will be escorted from the scene of the incident and comforted. Younger or more vulnerable pupils may need parental support to be called immediately.
- 5.8. Once the above action has been taken, details of the incident will be reported promptly to:
 - The Headteacher.
 - The parents of the victim(s).
- 5.9. The school is aware that responding to an incident can be stressful for the first aider, and that following an incident, the first aider may require support. This may take the form of a debrief from any ambulance crew on scene, an appointment with their GP, or mental health support from external helplines and websites located at the bottom of the government page 'Promoting and supporting mental health and wellbeing in schools and colleges'.

6. Reporting accidents and record keeping

- 6.1. In the event of incident or injury to a pupil, a parent will be informed as soon as practicable.
- 6.2. Parents will be informed in writing of any injury to the head, whether minor or major, and be given guidance on the action to take if symptoms develop.
- 6.3. In the event of a serious injury or an incident requiring emergency medical treatment, the pupil's class teacher or other appointed person will telephone the pupil's parents as soon as possible.
- 6.4. A list of emergency contacts will be kept at the school office and available electronically from the headteacher and school secretary.
- 6.5. The **appointed person** will ensure that records are kept of any injuries, accidents or illnesses, as well as any first aid treatment that is given this will include:
 - The date, time and place of the incident.
 - The name and class of the injured or ill person.
 - Details of the injury or illness and what first aid was given.

- What happened to the person immediately afterwards, e.g. whether they were sent home or went back to class.
- Name and signature of the first aider or person dealing with the incident.
- 6.6. The **Headteacher** will ensure that any injury or accident that must be reported to the HSE or LA under RIDDOR obligations is reported in a timely and detailed manner.
- 6.7. All records will be filed and stored in line with the **Data Protection Policy**.

7. Offsite visits and events

- 7.1. Before undertaking any offsite visits or events, the teacher organising the trip or event will assess the level of first aid provision required by undertaking a suitable and sufficient risk assessment of the visit or event and the persons involved.
- 7.2. The school will take a first aid kit on all offsite visits which contains at a minimum:
 - A leaflet giving general advice on first aid.
 - 6 individually wrapped sterile adhesive dressings.
 - 1 large sterile unmedicated dressing.
 - 2 triangular bandages individually wrapped and preferably sterile.
 - 2 safety pins.
 - Individually wrapped moist cleansing wipes.
 - 2 pairs of disposable gloves.
- 7.3. For more information about the school's educational visit requirements, please see the **Learning Outside the Classroom Policy**.

8. Administering medication

- 8.1. For clarification, "medication" is defined as any prescribed or over the counter medicine, including devices such as asthma inhalers and adrenaline auto-injectors (AAIs). "Prescription medication" is defined as any drug or device prescribed by a doctor. "Controlled drug" is defined as a drug around which there are strict legal controls due to the risk of dependence or addiction, e.g. morphine.
- 8.2. The headteacher will ensure that a sufficient number of staff are suitably trained in administering medication.
- 8.3. Staff will be advised not to agree to taking on the responsibility of administering medication until they have received appropriate training and can make an informed choice. The school will ensure that, as part of their training, staff members are informed that they cannot be required to administer medication to pupils, and that this is entirely

- voluntary, unless the supporting of pupils with medical conditions is central to their role within the school, e.g. the school nurse.
- 8.4. Medication will only be administered at school if it would be detrimental to the pupil not to do so. Only suitably qualified members of staff will administer controlled drugs. Staff will check the expiry date and maximum dosage of the medication being administered to the pupil each time it is administered, as well as when the previous dose was taken.
- 8.5. Medication will be administered in a private, comfortable environment and, as far as possible, in the same room as the medication is stored; this will be an appropriate area within school. The room will be equipped with the following provisions:
 - Arrangements for increased privacy where intimate contact is necessary
 - Facilities to enable staff members to wash their hands before and after administering medication, and to clean any equipment before and after use if necessary
 - Available PPE for use where necessary
- 8.6. Before administering medication, the responsible member of staff should check:
 - The pupil's identity.
 - That the school possesses written consent from a parent.
 - That the medication name, dosage and instructions for use match the details on the consent form.
 - That the name on the medication label is the name of the pupil being given the medication.
 - That the medication to be given is within its expiry date.
 - That the pupil has not already been given the medication within the accepted frequency of dosage.
- 8.7. If there are any concerns surrounding giving medication to a pupil, the medication will not be administered and the school will consult with the pupil's parent or a healthcare professional, documenting any action taken.
- 8.8. If a pupil cannot receive medication in the method supplied, e.g. a capsule cannot be swallowed, written instructions on how to administer the medication must be provided by the pupil's parent, following advice from a healthcare professional.
- 8.9. Where appropriate, pupils will be encouraged to self-administer under the supervision of a staff member, provided that parental consent for this has been obtained. If a pupil refuses to take their medication, staff will not force them to do so, but will follow the procedure agreed upon in their IHPs, and parents will be informed so that alternative options can be considered.
- 8.10. The school will not be held responsible for any side effects that occur when medication is taken correctly.

8.11. Written records will be kept of all medication administered to pupils, including the date and time that medication was administered and the name of the staff member responsible.

Training for administering Adrenaline auto-injectors (AAIs)

- 8.12. The school will arrange specialist training for staff on a termly basis **where** a pupil in the school has been diagnosed as being at risk of anaphylaxis. Designated staff members with suitable training and confidence in their ability to use AAIs will be appointed to administer this medication. As part of their training, all staff members will be made aware of:
 - How to recognise the signs and symptoms of severe allergic reactions and anaphylaxis.
 - Where to find AAIs in the case of an emergency.
 - How the dosage correlates with the age of the pupil.
 - How to respond appropriately to a request for help from another member of staff.
 - How to recognise when emergency action is necessary.
 - Who the designated staff members for administering AAIs are.
 - How to administer an AAI safely and effectively in the event that there is a delay in response from the designated staff members.
 - How to make appropriate records of allergic reactions.
- 8.13. There will be a sufficient number of staff who are trained in and consent to administering AAIs on site at all times.

9. Receiving prescribed medication from parents

- 9.1. The parents of pupils who need medication administered at school will be sent an administering medication parental consent form to complete and sign; the signed consent form will be returned to the school and appropriately filed before staff can administer medication to pupils under the age of 16. A signed copy of the parental consent form will be kept with the pupil's medication, and no medication will be administered if this consent form is not present.
- 9.2. The school will only store and administer prescribed medication. The school will store a reasonable quantity of medication, e.g. a maximum of **four weeks'** supply at any one time. Aspirin will not be administered unless the school has evidence that it has been prescribed by a doctor.
- 9.3. Parents will be advised to keep medication provided to the school in the original packaging, complete with instructions, as far as possible, particularly for liquid medications where transfer from the original bottle would result in the loss of some of the medication on the inside of the bottle. This does not apply to insulin, which can be stored in an insulin pen.

10. Storage of medication

- 10.1. Medicines will be stored securely and appropriately in accordance with individual product instructions, save where individual pupils have been given responsibility for keeping such equipment with them, for example an inhaler.
- 10.2. Medicines will be stored in the original container in which they were dispensed, together with the prescriber's instructions for administration, and properly labelled, showing the name of the patient, the date of prescription and the date of expiry of the medicine.
- 10.3. Medicine brought in by pupils will be returned to their parents for safe disposal when they are no longer required or have expired.
- 10.4. An emergency supply of medication will be available for pupils with medical conditions that require regular medication or potentially lifesaving equipment, e.g. insulin.
- 10.5. The school will not store surplus or out-of-date- medication. Any medication that fits this description should be returned to parents. Needles or other sharp waste will be disposed of safely and securely, e.g. using a sharps disposal box.
- 10.6. Parents will advise the school when a child has a chronic medical condition or severe allergy so that an Individual Care Plan can be implemented and staff can be trained to deal with any emergency in an appropriate way. Examples of this include epilepsy, diabetes and anaphylaxis. A disclaimer will be signed by the parents in this regard to confirm medication can be administered in an emergency situation.
- 10.7. Pupils will have any medication stored and, where appropriate administered, in accordance with their EHC plans and the school's Administering Medication Policy.

11. Illnesses and Allergies

- 11.1. When a pupil becomes ill during the school day, the parents will be contacted and asked to pick their child up as soon as possible.
- 11.2. A quiet area will be set aside for withdrawal and for pupils to rest while they wait for their parents to pick them up. Pupils will be monitored during this time.
- 11.3. Where a pupil has an allergy, this will be addressed via the individual's care plan, if appropriate alongside the Allergen and Anaphylaxis Policy.
- 11.4. The school will manage any emergencies relating to illnesses and allergies in accordance with the Emergency procedures section of this policy.

12. Consent

12.1. Parents will be asked to complete and sign a medical consent form when their child is admitted to the school, which includes emergency numbers, alongside details of

- allergies and chronic conditions these forms will be updated at the start of each school year.
- 12.2. Staff do not act 'in loco parentis' in making medical decisions as this has no basis in law. Staff will always aim to act and respond to accidents and illnesses based on what is reasonable under the circumstances and will always act in good faith while having the best interests of the pupil in mind.

13. Monitoring and review

- 13.1. This policy will be reviewed every two years by the governing body, and any changes communicated to all members of staff.
- 13.2. Staff will be required to familiarise themselves with this policy as part of their induction programme. Staff will be informed of the arrangements that have been made in connection with the provision of first aid, including the location of equipment, facilities and personnel.
- 13.3. The next scheduled review date for this policy is March 2026.