

Wentworth Primary School

First Aid Policy

**Date of Policy:
September 2015**

**Date of Ratification by Governors:
September 2015**

Reviewed: April 2024

Next Review: April 2025



Achieving Happily

First Aid Policy

Health & Safety legislation places duties upon Governors as employers for the health and safety of their employees and anyone else on their premises. In practice, the day to day management of health and safety, including arrangements for first aid is delegated to the Headteacher.

Any employee can volunteer to be a first aider and the Governors are responsible for ensuring that there are sufficient trained persons to meet the statutory requirements and identified needs at all times. Any first aider must receive HSE approved training.

Those employees who hold a recognised first aid qualification and who have first aider responsibilities will be paid the first aider allowance in line with KCC policy. The Headteacher reserves the right to remove this allowance following a review of appointed persons/responsibilities.

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 (including off-site trips).

Aims

To provide effective first aid support for all pupils, staff and visitors that meets all legal requirements.

To ensure that all pupils, staff and visitors are aware of their roles and responsibilities in relation to first aid and the first aid systems in place in school.

To support awareness of H&S issues within school and on off-site activities, in order to reduce the risk of illness or injury.

Provision of First Aid cover in school

Emergency First Aid at Work 1 day	-	12 members of staff
Emergency First Aid at Work 3 day	-	5 members of staff
Paediatric	-	6 members of staff

All certificates are valid for three years and are displayed in the first aid room and are kept up to date to ensure continuity of certificates and any re-qualification required.

First Aid Facilities

- Suitably stocked first aid bags in all classes to deal with minor cuts and scrapes
- Designated first aid room near to the school office
- All MDS staff carry basic first aid equipment to support initial triaging of first aid cases on the playground
- 3 portable first aid kits located around the school to aid any first aider in the event of an incident:



1. Main office
2. Staff room
3. Ladies toilet near KS2 hall

- Portable first aid bags to accompany all school trips. All first aid portable kits are signposted around the school to advise any member of staff of their whereabouts.
- AED (Automated External Defibrillator) is kept in the school office for use during school hours only by trained personnel. Details of where AED is stored and times available is signposted around the school.

First Aid Procedure

If any injury cannot be dealt with at source, the injured person should be sent to the First Aid room where they will be treated and cared for by First Aiders. All accidents such as minor bruises, grazes, cuts etc. are recorded in the accident log in the office or First Aid room. If there are any significant injuries, parents are telephoned to advise them of the injury and/or to ask them to come and collect their child to seek further medical attention or observation. All accidents are recorded and any significant injury, such as serious fall or broken bones will result in an investigation into the accident which will be carried out by the Headteacher or an appropriate senior member of staff. An accident form will be completed in such cases.

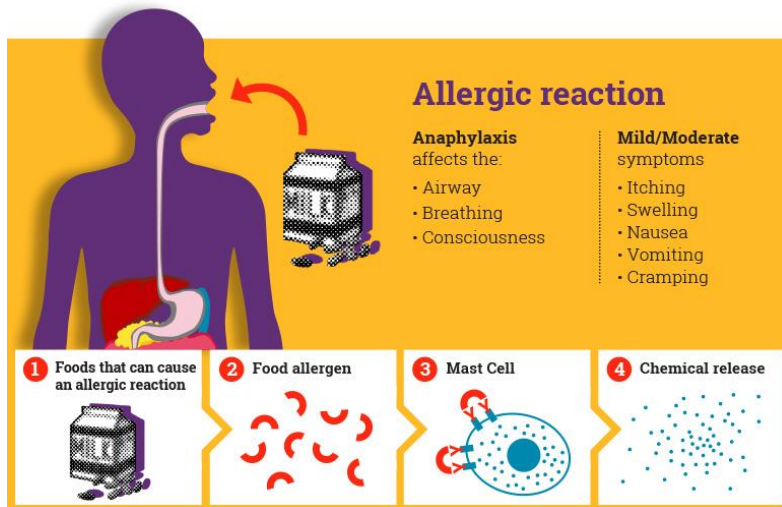
In the case of any head injury, parents will be notified by a class Dojo message or email, unless a telephone call is necessary. Any more serious cuts and bruises will be reported to parents by telephone and the class teacher advised.

In the event that an accident is serious, an ambulance will be called. Parents will be contacted immediately to advise them of the situation and ask for their presence at school. If a parent/family member cannot be contacted, then an appointed member of staff will accompany the injured person to hospital and await the attendance of the parent.

Treating an allergic reaction in school

Why does anaphylaxis occur?

An allergic reaction occurs because the body's immune system reacts to a substance that it wrongly perceives as a threat. The body produces an "allergy" antibody called Immunoglobulin E (IgE), which sticks to the substance ("allergen") and causes the release of chemicals such as histamine. In the skin, this results in an itchy rash, swelling and flushing.



Management in school

It is the parents or guardians responsibility to notify the school if their child has been diagnosed with a risk from anaphylaxis. Full details of the medical condition are required including the allergies and the medication prescribed.

Photographs of pupils diagnosed with allergies are displayed in key areas of the school, including the school kitchen. This is updated regularly.

Key staff with first aid responsibility and those deemed required to react in the event of an anaphylaxis emergency have been provided with the appropriate training. Mrs Flint, First Aid Officer maintains the record of first aid training (which incorporates allergic reaction training) and reviews this regularly.

The SENCO holds a video training session for all staff at the beginning of each academic year including those not first aid trained and has a dummy pen on site for them to practice with.

Staff are made aware when a pupil is diagnosed with anaphylaxis.

The SENCO will ensure the Class Teacher and support staff receive a copy of the ICP for those pupils at risk.

Medication for each pupil going on school trip should be taken at all times.

The school will administer the epipen (AAI) only in an emergency providing the pupil has been identified as being at risk, has medical authorisation and prior consent from the parent/carere.

The school retains one epipen in the classroom and one in the first aid room for each pupil.

We also have 2 pens that belong to the school, one 0.3mg and one 0.15mg in the first aid room. These are useful in case of an ambulance delay where a 3rd injection may be needed.

Emergency procedure for key staff

- Radio through using the “**Code Medical**” call sign to Mrs Flint in the first aid room, or Mrs Troke/office staff should the first aid room be closed.
- Mrs Flint/Mrs Troke/office staff will acknowledge the call and then instruct key staff receiving the call to switch radio channels to channel 5.
- Details of the emergency will be relayed ONLY via channel 5 (to avoid the rest of the school hearing).
- Mrs Flint/Mrs Troke/ office staff and/or key first aiders will collect the necessary medication and go to the location of the emergency.
- The parents/carers will be informed as soon as is possible of the emergency.
- All incidents to be recorded in the first aid record.

Mild/moderate allergic reaction:

- Swollen lips, face or eyes
- Itchy/tingling mouth
- Hives or itchy skin rash
- Abdominal pain or vomiting
- Sudden change in behaviour

Action:

- Stay with the child, call for help if necessary
- Locate adrenaline autoinjector(s)
- Give antihistamine:
- Phone parent/emergency contact
- If vomited, can repeat dose

Watch for signs of ANAPHYLAXIS (life-threatening allergic reaction)

Anaphylaxis may occur without skin symptoms: **ALWAYS** consider anaphylaxis in someone with known food allergy who has **SUDDEN BREATHING DIFFICULTY**

AIRWAY

Persistent cough, hoarse voice, difficulty swallowing, swollen tongue

BREATHING

Difficult or noisy breathing, wheeze or persistent cough

CONSCIOUSNESS

Persistent dizziness, pale or floppy, suddenly sleepy, collapse, unconscious

IF ANY ONE (OR MORE) OF THESE SIGNS ABOVE ARE PRESENT:

1. Lie child flat with legs raised (if breathing is difficult, allow child to sit)



2. Use Adrenaline autoinjector without delay

3. Dial 999 for ambulance and say ANAPHYLAXIS ("ANA-FIL-AX-IS")

***** IF IN DOUBT, GIVE ADRENALINE *****

AFTER GIVING ADRENALINE:

1. Stay with child until ambulance arrives, **do NOT stand child up**
2. Commence CPR if there are no signs of life
3. Phone parent/emergency contact
4. If no improvement **after 5 minutes**, give a 2nd adrenaline dose using a second autoinjector device, if available.

You can dial 999 from any phone, even if there is no credit left on a mobile.
Medical observation in hospital is recommended after anaphylaxis.

L Pollock
Headteacher
April 2024

