



FIRST AID AND MEDICATION POLICY

AUTHOR	REVIEWED	NEXT REVIEW
R. HORTON	June 2024	June 2026

First Aid and Medication Policy

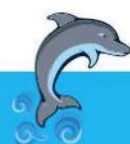
The appointed person for first aid is the Headteacher who will be responsible for taking charge of the situation in the event of serious illness or injury, for checking that emergency aid is summoned and for ensuring that relatives/parents are contacted. In his absence this responsibility falls to the Deputy Headteacher and then SLT members. The appointed person will also ensure that reporting procedures are carried out. Trained first aiders available in School are also expected to assist in these responsibilities. Several members of staff have an emergency first aid qualification and further training will be arranged on a periodic basis. First aid requisites are kept in the Office and in each area of school and the kitchen. The appointed person is responsible for the upkeep of first aid equipment. No other requisites or medication are to be used. For routine first aid, year group staff will attend to casualties.

Extreme care must be exercised when dealing with injuries involving blood and body fluids; disposable gloves should always be worn. Where a child has a dressing which is seeping they should be referred for attention to the first aider.

Where a serious injury or illness occurs emergency medical aid must be summoned immediately. Great care should be exercised if that patient has to be moved; if any doubt exists over the severity of injuries then it is better not to move the patient. In such cases help should be summoned immediately.

Where a child is taken from School by ambulance it is highly desirable that a responsible adult accompanies the patient. Parents should be contacted at the earliest opportunity but on no account should provision of urgently needed medical treatment be delayed pending the arrival at School of parents. When parents are unable to get to School in time to accompany the ambulance, then a member of staff will be asked to accompany the child.

Where a child suffers a blow to the head or jaw the class teacher needs to be informed. It is important that such cases are monitored carefully for any subsequent deterioration. Parents are to be informed of significant injuries/blows to the head



before the child leaves School. This is normally done by telephone or in person before dismissal time.

First Aider Duties

First aiders must have completed training and hold a valid certificate of competence approved by the Health and Safety Executive (HSE).

First aiders should give immediate help to casualties with common injuries or illness and those arising from specific hazards.

When necessary, first aiders should ensure that an ambulance or other professional medical help is called.

First aiders must keep a record of all incidents where first aid has been administered for injury or illness. Class teacher, or person in charge of the class, **MUST** be informed of EVERY accident or incident, straight after break or lunch time.

First aiders should stock first aid areas, monitor use by dates on equipment and place orders for new stock when necessary, under the instruction of the Head Teacher/ Office manager.

Pupil medical information will be stored within the main office of the school.

Copies of this information will also be stored in each classroom. A record of all injuries/illness requiring first aid will be logged and kept in an incident/accident book.

The information will be logged under the following headings:

- Name of injured or ill person
- Year group or class
- Date/Time of injury or illness
- Injury or illness occurred
- Where injury or illness took place
- What happened prior to injury or illness
- Treatment



- Name of treatment provider
- Reported to
- Any further action taken

First aid records contain personal information and should be kept out of plain sight when not in use.

Allergies in school

Where a child has a condition (eg diabetes, epilepsy, asthma) it is important that staff who come into contact in a supervisory role have knowledge of this and are aware of relevant precautions and treatments. Such information will be conveyed through medical alert sheets in the register and verbally by the class teacher to supply staff, but is to be regarded as confidential.

It is extremely important that staff are aware of cases where anaphylactic shock may result e.g. sting or peanut allergies.

For children who have such allergies and who are likely to require urgent treatment e.g. through use of an auto-injector (e.g. epi-pen) clear instructions on procedures will be agreed with staff and parents. All members of staff who are prepared to administer these medicines will be provided with guidance from the School Health Service. Epi-pens should be kept in an easily accessible but secure place for the children and staff who need it.

Where there are long-term or complex needs, it is our policy to support children and families wherever possible, provided that this does not have a negative effect on the comfort or well-being of staff or other pupils. In such cases we expect proper training and support to be made available through the appropriate authorities (usually the LA) as a pre-requisite of admission to the school.



Medication in school

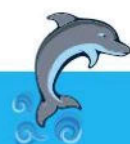
Where children need to bring prescribed medicines to School these are to be stored securely in the staff room. Medicines should be clearly marked with the child's name, the required dosage and storage instructions. They may be administered by a child's own parents, self-administered with supervision or, after consultations with the Headteacher, by members of support staff. Please note that it is the School policy to discourage the bringing of medicines to school except where absolutely necessary. Where prescribed medicines that require refrigeration are brought in to school these will be kept in the staff room fridge.

Routine non-prescribed medicines such as cough syrup, Calpol/ibuprofen and creams and lozenges will be administered to help promote good attendance at school. Parents are welcome to administer these during the day by coming to the school office.

Suncream may be brought in by individual children but must be named to ensure that allergic reactions are avoided. Children in EYFS can be helped to apply their own cream, as can a child with complex needs who may struggle to do this.

There is no legal duty that requires staff to administer medicines; this is a voluntary decision. The headteacher will accept responsibility in principle where staff volunteer to administer or supervise the taking of prescribed medicine during the school day. Inhalers for children suffering from asthma are kept in the child's base area; children should be encouraged to use these responsibly. Training will be provided for any staff who volunteer to deal with pupils' medical needs.

Before any member of staff administers medicine, s/he must check: the pupil's name, the written instructions provided by parent or doctor, the prescribed dose and the medicine's expiry date. Medication should not be given if there are any doubts concerning these. These checks will be done alongside another adult and cross checked against the form signed by parents.



Pupils may not carry or take their own medication except in the case of asthma inhalers or after written instructions from the headteacher, countersigned by parents, have been issued.

A Consent Form should be complete by parents/carers, if their child's inhaler is not available or is unusable, authorization to use Salbutamol from an emergency inhaler held by school. Please see Appendix 1.

Appropriate records will be kept on each occasion that medication is administered to a pupil. Medicine must always be administered by two people and both should check that the right medicine and dosage are administered to the right child, at the right time.

A pupil's named parent/contact on SIMs must complete the medication information form. Forms are kept in the office and parents must visit the office to fill one in. If a form has not been fully completed, medicine will not be administered.



Appendix 1

OULTON PRIMARY SCHOOL

CONSENT FORM USE OF EMERGENCY SALBUTAMOL INHALER

Child showing symptoms of asthma/having asthma attack

1. I can confirm that my child has been diagnosed with asthma/has been prescribed an inhaler (delete as appropriate)
2. My Child has a working, in-date inhaler, clearly labelled with their name, which they will bring with them to school every day/that will be left at school (delete as appropriate)
3. In the event of my child displaying symptoms of asthma, and if their inhaler is not available or is unusable, I consent for my child to receive salbutamol from an emergency inhaler held by the school for such emergencies

Signed..... Date.....

Name (print).....

Relationship to child.....

Child's Name.....

Class.....

Parent's address and contact details:

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Telephone.....

Email.....

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