



First Aid Policy

Date written: March 2016
Date agreed: 16th March 2016
Date for review: March 2018
Name: Mrs Ann Pope
Date: 23rd March 2016
Signed:

At Trinity Partnership we provide the very best possible care for pupils and staff.

1. The appointed person for First Aid

The appointed people for First Aid are:

- a. Duchy of Lancaster: Mrs. S. Williams, Mrs. C. Bailey
- b. The Norman: Mrs. S. Berry, Ms. J. Ireland
- c. Weeting: Mrs J Powell, Ms E Duke

They are responsible for:

- a. ensuring training needs of staff are met,
- b. checking first aid equipment and supplies,
- c. ordering first aid equipment and supplies,
- d. ensuring Health & Safety procedures are followed,
- e. ensuring accident reporting procedures are followed.

2. Staff with First Aid Training

- a. All Teaching Staff
- b. All Teaching Assistants
- c. All Midday Assistants
- d. School Secretary

3. Location of First Aid equipment

First Aid boxes and accident record files are kept in the following locations:

- a. Duchy:
 - i. School Office
 - ii. Reception Class
 - iii. Disabled toilet
- b. Norman:
 - i. School Office
 - ii. Above sink near back door
- c. Weeting
 - i. Classroom
 - ii. Owl Room
 - iii. Pupil accident report sheets are in kept in the pupils files

4. Procedures
 - a. Plastic gloves are to be worn when dealing with all incidents.
 - b. Bloods/soiled dressing and used gloves should be disposed of in the sanitary boxes in the staff toilet.
 - c. Wounds should be cleaned with water and antiseptic wipes and the wound dressed with an appropriate sterile dressing and pressure pad, if needed, to prevent infection.
 - d. Cotton Wool should not be used in cleaning wounds since it is not sterile and could cause infection.

5. Minor accidents/incidents

The class teacher should be informed and the child given a 'Minor Accident Form' to take home.

6. Head injuries
 - a. Parents to be informed by sticker and completed form or by telephone depending upon severity.
 - b. The accident should be recorded in the accident book and the child given a 'Head Injury Form'.
 - c. In severe cases, parents are encouraged to collect their child from school. If the injury is severe, a Health & Safety Official Accident form should be completed. The original form should be forwarded to Debbie Hills and a copy is to be kept on file.
 - d. The class teacher should always be informed.

7. Major accidents/incidents
 - a. More serious accidents should be recorded in the First Aid Record book and a Health & Safety Official Accident form completed.
 - b. The original form should be forwarded to Debbie Hills and a copy is to be kept on file.
 - c. Parents/Carers are to be informed immediately.

8. Educational visits and Offsite Activities
 - a. Classes leaving the school premises take a First Aid box, a sick bucket containing essential cleaning aids, pupils' water bottles and personal medication as required.
 - b. The school mobile phone should also be included in your kit.
 - c. A person trained in First Aid should accompany the children on the visit.

9. Dealing with Emergencies
 - a. In an emergency, a person trained in First Aid will attend to the casualty and an ambulance will be called for without delay.
 - b. The parent will then be contacted.
 - c. If a child needs hospital treatment in a non-urgent situation, the parent/carer will be contacted to accompany the child to hospital.
 - d. If the parent/carer cannot be contacted, then a member of staff will drive the child to hospital. The child should be strapped into the back seat, using

a booster seat if required, and another member of staff should sit in the back with the child.

- e. Every attempt to contact the parents/carers will be made by the school.

10. Hygiene Control Guidelines

The following Hygiene Control Guidelines should be followed:

- a. Toothbrushes or other implements which could become contaminated with blood must not be shared
- b. Minor cuts, open or weeping skin lesions and abrasions should be covered with a suitable dressing.
- c. Seek medical advice in the event of splashes of blood from one person to another
- d. Splashes of blood on the skin should be washed off immediately with soap and water.
- e. Splashes of blood into the eyes or mouth should be washed out immediately with copious amounts of water.
- f. After accidents resulting in bleeding, contaminated surfaces, e.g. tables, or furniture should be disinfected.
- g. If staff giving care to infected children have cuts and abrasions, these should be covered with waterproof or other suitable dressings.

11. Waste Disposal

- a. Urine and faeces should be eliminated or discarded into the toilet in the normal manner.
- b. Soiled waste and bloods should be disposed of in the sanitary bins. These are collected regularly and the contents disposed of by an outside contractor.

12. Administration of Medicines

Refer to the school's policy on Administration of medication which is added onto the end of this policy.

13. Health and Safety Responsibilities

- a. The Health and Safety Executive take the view that provided the school management and staff act in accordance with the health and safety policy and guidelines issued by DEMAT or H&S advice consultants, asking advice when in doubt, then there should be no difficulty in meeting Health and Safety obligations.
- b. This approach will also ensure that the Head teacher, Governors and staff remain within the protection of the school's insurance policies.

14. Children with Special Medical Conditions

- a. An up-to-date list of children with special medical conditions, asthma etc is kept.
- b. A health care plan is in place for each child
- c. A master copy is kept in the school office.
- d. A copy of the health care plan is also kept in the class folder.
- e. The Lunchtime staff also have a copy of the health care plan in their private area.



Administration of Medication Policy

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AIMS OF THIS POLICY

- to support regular attendance of all pupils
- to ensure staff understand their roles and responsibilities in administering medicines
- to ensure parents understand their responsibilities in respect of their children's medical needs
- to ensure medicines are stored and administered safely

Where children are unwell and not fit to be in school, and where they are still suffering from an infection which may be passed to others, children should remain at home to be cared for and looked after. Even if they have improved, children may not return to school for at least 48 hours into a course of antibiotics, or after their last bout of vomiting and diarrhoea.

The partnership schools are committed to ensuring that children may return to school as soon as possible after an illness (subject to the health and safety of the school community) and that children with chronic health needs are supported at school. This policy statement sets out clearly a sound basis for ensuring that children with medical needs receive proper care and support in school.

PRESCRIPTION MEDICINES

- Medicines should only be brought to school when essential (where it would be detrimental to the child's health if the medicine were not administered during the school day);
- All medicines should be taken (and collected) directly to the school office by a responsible adult;
- Medicines will only be accepted in the original container as dispensed by a pharmacist and with the prescriber's instructions for administration;
- The medicine should be clearly marked with the child's name and class;
- The appropriate dosage spoon should be included with all medicines sent to school;
- Any medicine administered will be recorded by the staff member.

Medicines will only be accepted for administration in school on completion of the appropriate form by a parent or carer.

NON-PRESCRIPTION MEDICINES

- We will also administer non-prescription medicines if necessary. They must also be handed in at the office by a responsible adult and they will not be given to children without prior written permission from parents as above;
- They should be clearly marked with the child's name and class;
- Children must not carry medicines themselves for self-administration during the day. The medicine must be collected from the office and taken under the supervision of an adult;
- Any non-prescription medicine administered will also be recorded in the relevant paperwork in the school office;
- We will not give paracetamol or ibuprofen routinely as their primary use is to control raised temperature for which a child should be at home.
- We do not allow cough and throat sweets in school.

ROLES AND RESPONSIBILITIES OF SCHOOL STAFF

- Staff at Trinity Partnership are expected to do what is responsible and practical to support the inclusion of all pupils. This will include administering medicines or supervising children in self administration. However, as they have no legal or contractual duty, staff may be asked, but cannot be directed, to do so;
- All medicines are stored securely in the office with access only for staff;
- Asthma inhalers are kept in containers within each classroom with each pupil's inhalers named and notebook included for record of medication taken;
- Epi-pens will be stored in a separate container for each child requiring the precaution within their classroom, out of reach of other pupils;
- Staff must complete the 'medication records' each time medicine is administered within school time;
- Relevant staff will be trained on how to administer Epi-pens.

PARENTS RESPONSIBILITY

- Parents are responsible for informing the school of any medical conditions their child is receiving treatment for e.g. asthma, allergies, and speech or hearing defects.
- In most cases, parents will administer medicines to their children themselves out of school hours, but where this is not possible, parents of children in need of medication must ensure that the school is accurately advised about the medication, its usage and administration. Parents must complete the parental agreement form kept in the office before a medicine can be administered by staff;
- KS2 children may be able to manage their own medication, under adult supervision but again, only with parental agreement given through the appropriate paperwork above;
- Parents are responsible for ensuring that all medication kept in school e.g. asthma pumps, Epi-pens are kept up to date;

- Medications should be collected at the end of each school year with forms to complete thus enabling the review of each pupils needs annually.
- Parents are responsible for notifying the school if there is a change in circumstances e.g. if a child is deemed to be no longer asthmatic.

LONG TERM AND COMPLEX NEEDS

Where a child has significant or complex health needs, parents should give full details on entry to school or as the child first develops a medical need. Where appropriate, a health care plan may be put in place involving the parents and relevant health care professionals.

SAFE STORAGE OF MEDICINES

The school is responsible for ensuring that all medicines are stored safely:

- Medicines should be stored in the supplied container, clearly marked with the child's name, class, dose and frequency of administration;
- Medicines are stored in the school office under adult supervision or in the classroom in the case of asthma inhalers and epi-pens;
- No medicine is kept in a locked cupboard to ensure swift and easy access;
- Where medicines need to be refrigerated, they will be kept in the assigned fridge.

MANAGING MEDICINES ON SCHOOL TRIPS

On school visits, the teacher is responsible for taking the relevant medicines for each pupil. They may agree to take temporary responsibility for administering medicine e.g. antibiotics or travel sickness pills, following the above procedure. PARENTAL/HEADTEACHER AGREEMENT FOR SCHOOL SETTING TO ADMINISTER MEDICINE

The school will not give your child medicine unless you complete and sign this form.

MEDICINES MUST BE IN THE ORIGINAL CONTAINER AS DISPENSED BY THE PHARMACY

Name of School _____

Date: _____

Child's Name: _____

Class: _____

Name of Medicine:
(and strength) _____

Expiry Date: _____

How much to give:
(dose to be given) _____

When to be given: _____

Any other instructions: _____

Are there any side effects that the school needs to know about, e.g. will the medication make the child sleepy, loss of appetite?

Daytime phone number of parent/carer: _____

Name and phone number of GP: _____

Agreed review date to be initiated by: _____
(school secretary or end of each school year)

The information given is, to the best of my knowledge, accurate at the time of writing and I give consent to school staff administering medicine in accordance with the school policy. I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Parents Signature: _____

Print Name: _____

Date: _____

Confirmation of Head teacher's agreement to administer medicine

It is agreed that _____ (name of child) will receive the above aforementioned medication as stipulated.

_____ (name of child) will be given/supervised whilst he/she takes their medication by a designated member of staff.

This arrangement will continue until either the end date of medication course or until instructed by parent/carers.

Date: _____

Signed: _____

Mrs Carole Reich, Executive Head teacher
Mrs Lisa Heath, Head of School, Duchy of Lancaster School
Mrs. Sue White, Head of School, Norman School
Mr. Mark King, Head of School, Weeting School

RECORD OF MEDICINE ADMINISTERED TO AN INDIVIDUAL CHILD

Name of School: _____

Name of Child: _____

Name of Class: _____

Date medicine provided by parent: _____

Name of Medicine: (and strength) _____

Expiry Date: _____

Dose and Frequency of medicine: _____

Any side effects/or reactions the school needs to know about? _____

Date			
Time Given			
Dose Given			
Any Reactions			
Staff Initials			

Date			
Time Given			
Dose Given			
Any Reactions			
Staff Initials			



Duchy of Lancaster CE School – Hythe Road, Methwold, Thetford, IP26 4PP
 Norman CE School – School Lane, Northwold, Thetford, IP26 5NB
 Weeting School – Main Road, Weeting, Suffolk IP27 0QQ

Academy Members of The Diocese of Ely Multi-Academy Trust (DEMAT)

Executive Headteacher – Carole Reich - head@trinitypartnership.norfolk.sch.uk

Health Care Plan

Name of School/Setting	
Child's Name	
Class/Year Group	
Date of Birth	
Child's Address	
Medical Diagnosis or Condition	
Medication in School	
Date Plan Agreed	
Review Date	

Contact Information

Family Contact 1		Family Contact 2	
Name		Name	
Phone No. (work)		Phone No. (work)	
(home)		(home)	
(mobile)		(mobile)	
Clinic/Hospital Contact		GP	
Name		Name	
Phone No.		Phone No.	

Medical Information

Describe medical needs and give details of child's symptoms:

Daily care requirements: (e.g. before sport/at lunchtime)

Describe what constitutes an emergency for the child and the action to take if this occurs:

Follow up care:

Who is responsible in an Emergency: (State if different for off-site activities)

Health Care Professional Signature:

Health Care Professional Name: Not applicable

Head of School Signature:

Head of School Name:

Parent/Guardian Signature:

Parent/Guardian Name: