

Winchelsea



All Individuals Matter

WINCHELSEA PRIMARY SCHOOL
RUSKINGTON

FIRST AID POLICY AND PROCEDURES

Part 1: Introduction

First Aid forms part of our Health and Safety Policy. The policy takes account of current and local guidelines.

The school policy for First Aid reflects the consensus of opinion of the whole staff, Headteacher and has the support and agreement of the Governing Body.

Part 2: Implementation

2.1 Staff trained in emergency first aid is considered to be appropriate for the risks and numbers of persons present. All teaching and support staff have received training for dealing with first aid incidents. The following staff are paediatric trained:-

Mrs Karen Jones
Miss Alison Stewart
Mrs Julie Hilton
Mrs Fiona Cox
Mrs Rebecca Doran

- 2.2 All staff are aware of the First Aid Procedures in the event of an accident. (See Part 3 Procedures).
- 2.3 Staff should administer first aid treatment in accordance with their training and always on the side of caution by referring pupils for further medical attention as set out in the First Aid procedures.
- 2.4 First aid boxes are stocked with the recommended contents in all the classrooms with a spare one located in the Medical Room.
- 2.5 All staff are expected to familiarise themselves with the location and contents of the first aid boxes and are responsible for completing the accident book and standard letter home to parents for injuries sustained under their supervision.
- 2.6 Head injuries can be easily underrated. Any significant knock to the head which shows signs of swelling, grazing, crushing or which changes the behaviour of the pupil, should be referred to the emergency contact immediately for further medical attention. Slight knocks to pupils who have had previous head injuries could be serious and these also should be referred to the emergency contact immediately for further medical attention. The emergency contact should be contacted where further medical attention is necessary and informed via the standard letter of any non-significant head bumps which show no signs or slight reddening. If the first emergency contact does not answer the next responsible adult should be contacted to ensure the parent/guardian is made aware of the incident. Mrs Jones must be notified when any head injury occurs.
- 2.7 Other injuries like broken bones may sometimes not be obvious in children. Any injury which results in continued pain or changed mobility should be referred immediately for further medical attention.
- 2.8 Prescribed medication can be administered at school if necessary. Parents must complete a form in the office giving details of the medication – dosage, times etc. Antibiotics only need to be administered in school if they are prescribed for 4 times a day.

Part 3: Procedures

In the event of an accident:

- Assess the severity of the accident;
- Contact any of the staff trained in paediatric first aid should you require additional support;
- If outside help is needed make the necessary phone calls
 1. Ring parents;
 2. Ring the surgery/hospital;
 3. Ring for an ambulance in more severe cases.

If taking a child to the surgery the car driver must be fully covered for insurance purposes.

Head injuries

General bumps to the head should be treated with a cold compress (gel packs in the freezer part of the fridge in the staffroom).

Parents should be informed of ANY head injuries using the standard letter. For more serious head injuries contact one of the paediatric trained first aiders.

Asthma

All inhalers are kept in individual classrooms. These are accessible to all staff at all times.

Chicken pox and other diseases/rashes

If a child is suspected of having chicken pox, measles etc we will look at the child's arms or legs. Chest and back will only be looked at if we are further concerned. We should call a Paediatrics First Aider and two adults should be present. The child should always be asked if it is ok to look.

For the inspection of other rashes the same procedures should be followed. If we suspect the rash to be contagious (such as scabies, impetigo, conjunctivitis etc) we need to inform parents and request that children are treated before returning to school. In most cases once treatment has begun it is safe for children to return to school. If more than one child is suspected to have the same disease/rash in one class a letter should be sent home to all parents in that class, to inform and allow problems to be spotted early and treatment begun, thus avoiding the further spread of disease/rash.

All injuries requiring treatment

These MUST be recorded in the accident book and an accompanying accident slip sent to parents.

First aid boxes

Box contains:

Gloves, sterile bandages, plasters, triangular bandages, and other items recommended by the first aid authorities.

IMPORTANT NOTICE: alcohol free wipes and/or sterilised water should be used as a cleansing agent on a wound.

Lunchtime

Report incident to Mrs Julie Hilton, Midday Supervisor.

Accidents in the classroom

The class must not be left unattended. Send the Teaching Assistant to find a paediatric trained first aider during the morning sessions. During the afternoon if a Teaching Assistant is unavailable send a responsible child to find one.

Blood

Plastic gloves must always be worn when dealing with blood. Make sure that cuts on your own hands are covered at all times.

Cleaning up vomit etc

Staff will be responsible for cleaning up vomit. Gloves and emergency absorbent powder are available in the medical room. Staff should report any incidents to Mr Stephen Riley, Caretaker.

School Visits

Staff must take a travel first aid box with them – each class has their own. Also take a bucket and paper towels for travel sickness. A spare travel box is kept in the cupboard in the medical room. Staff must replenish items they use from the central store in the medical room at the next opportunity.

Signed: _____
Chair of Governors

Dated: _____