



Goytre Fawr Primary School



First Aid Policy

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Associated documents
• MCC Health, Safety and Welfare Guidelines, Arrangement Guidelines (Education Department,) First Aid in Schools June 1999 • The Health and Safety (First Aid) Regulations 1981 HSE:2013 • First Aid at Work, Your Questions Answered HSE:2014 • Automated External Defibrillator, A guide for Schools DFE:2016 • www.gov.wales/coronavirus



1. Introduction

1.1 In accordance with the Health and Safety (First Aid) Regulations 1981, Goytre Fawr Primary School ensures that the provision of 'adequate and appropriate' first aid equipment, facilities and trained staff so that the school community can be given immediate help if a person is injured or taken ill at work.

1.2 Through implementation of effective procedures for the administration of first aid, we aim to safeguard, as far as reasonably practicable, the health, safety and welfare of our school community.

1.3 The purpose of this policy is to demonstrate a clear understanding of the duties imposed by the Health and Safety (First Aid) Regulations 1981 and MCC Health, Safety and Welfare Guidelines, First Aid in Schools June 1999 which subsequently informs the effective provision of first aid within the school.

2. Objectives

2.1 To ensure the appropriate provision of first aid to the school community throughout the school day.

2.2 To ensure the monitoring, evaluation and review of the school's first aid provision.

2.3 To establish systems that ensure

- A rolling programme of first aid training
- The accurate maintenance of training records
- The currency of training certification.

3. The Coronavirus (Covid-19)

In line with Welsh Government Guidance, the school has undertaken a risk assessment which should be read and adhered to in conjunction with this Policy. The assessment directly addresses risks associated with coronavirus (Covid-19) so that sensible measures can be put in place to control those risks for pupils and staff.

4. The First Aid Needs' Assessment

4.1 The school ensures an assessment of first aid needs appropriate to its circumstances i.e. numbers of staff and pupils, proximity of emergency facilities, degree of risk, layout of school.

4.2 Periodic reviews will be undertaken where there are substantial changes to the organisation of the school or in the light of new legislation and guidance.

5. The Provision of First Aid Training

5.1 The school will ensure that appropriate first aid training is carried out by a competent provider to FAW (First Aid at Work) and EFAW (Emergency First Aid at Work) levels. All staff listed as first aiders will have undertaken appropriate training and have been awarded a certificate of competence following an assessment that complies with Health and Safety (First Aid) Regulations 1981. The school will ensure initial training and a rolling programme of training to incorporate refresher training **every three years**.



Furthermore, the school will ensure any additional training as appropriate to the circumstances of the context.

5.2 The school will also ensure that selected staff receive training in a number of common conditions that can affect pupils, namely:

- Diabetes
- Asthma
- Epilepsy
- Anaphylactic Shock
- Fractures and dislocations.

5.3 When selecting staff to become first aiders, the school will take the following criteria into account:

- Preference will be given to those involved in aspects of school which carry a higher degree of risk e.g. forest schools, outdoor learning, science, PE and technology.
- Care will be given to select employees that are readily available during operational hours.
- Care will be given to ensure employees are physically capable of carrying out first aid.

5.4 The school follows MCC Health, Safety and Welfare Guidance, First Aid in Schools June 1999 which recommends that school should **have a minimum of one first aider plus one appointed person for every 300 people**. Sufficient deputies should be nominated and available to cover absence.

5.5 An appointed person is someone who can take charge of a situation in the absence of the first aider and summon medical assistance. Appointed persons are not first aiders, however they will have received basic training in emergency first aid that covers

- Resuscitation
- Control of bleeding
- Treatment of the unconscious casualty
- Communications, contents of the first aid box and treatment of the effects of particular hazards.

6. The School's First Aid Facility

6.1 The **Medical Room** will contain essential first aid equipment, be easily accessible and clearly signposted. The school's designated person for the day-to-day operation of the Medical Room is a Lower Phase staff member and an Upper Phase staff member.

6.2 The school will ensure that the Medical Room

- Is large enough to hold a medical couch.
- Will have washable surfaces and adequate heating, ventilation and lighting.
- Will be kept clean, tidy, accessible and available for use during school hours.
- Is positioned as near as possible to a point of access for transport to the hospital.



- Displays a notice on the door directing staff/pupils to the Office for medical attention.
The School Administrator will hold the names of first aiders who may be called if first aid attention is required.

6.3 The school will ensure that the Medical Room provides:

- A sink with hot and cold water.
- Soap and paper towels.
- A store for first aid materials.
- Foot operated refuse containers, lined with the required waste bags or a container suitable for the safe disposal of clinical waste.
- A medical couch with waterproof protection and a pillow.
- A supply of our standard 'bump notes' to record minor accidents.

7. Management of the School's First Aid Provision

7.1 The school's designated persons for the overall management of the first aid provision will be a Lower Phase lead first aid person, and an Upper Phase lead first aid person:

- An assessment of the school's first aid needs appropriate to its circumstances is carried out.
- The school complies with the Health and Safety (First Aid) Regulations 1981 and LA guidelines, by pupils and staff being given immediate help if they are injured or taken ill at work.
- Risk assessments are undertaken as appropriate (alongside the Headteacher).

7.2 The School's designated persons for the day-to-day operation of first aid arrangements are x1 specialist Lower Phase and x1 specialist Upper Phase TA, who will ensure that:

- First aid arrangements operate efficiently in an emergency and everyone in the school is aware of them, and staff are kept informed.
- First aid points are identified, and first aid kits are adequately stocked and replenished.
- Appropriate PPE is available for the administration of first aid, as required.
- A travel first aid kit is available for off-site activity.
- Staff and pupils are aware of the location of the Medical Room and how to contact a FAW.
- The Medical Room is maintained.
- Accurate records of treatment are kept and accident forms completed, where necessary.
- Adequate arrangements are in place to contact emergency services.
- Parents or carers are contacted when pupils present with illness that prevents them from remaining in school e.g. vomiting.
- Parents or carers are contacted if a pupil has an accident at school that they need to be aware of. All head bumps will be recorded using a standard school (paper copy) 'bump note' which will be followed up by a text home from the office to ensure that the information is shared on the day.
- Parents or carers are contacted when further medical attention may be required.
- Personal Emergency Evacuation Plans and arrangements are in place.



- The required levels of first aid training are maintained and that accurate training records are kept.

8. Storage of Medicines

8.1 This duty is set out in the Control of Substances Hazardous to Health Regulations 2002 (COSHH.) Large volumes of medicines should not be stored.

8.2 Prescription Medicines

- The school's designated persons in Upper Phase and Lower Phase will store, supervise and administer medicine that has been prescribed for an individual pupil. Medicines should be stored strictly in accordance with product instructions and in the original container in which it is dispensed.
- The school's designated persons in Upper Phase and Lower Phase will ensure that the supplied container is clearly labelled with the name of the pupil, the name and dose of the medicine and the frequency of administration.
- Medicines are only accepted in the original container as dispensed by a pharmacist in accordance with the prescriber's instructions.
- Where a pupil needs two or more prescribed medicines, each should be in a separate container.
- Parents who require their children to take prescription medicines during the school day must provide written permission (**Appendix 1.**)
- Asthmatic pupils and staff may carry inhalers and those with severe allergies may carry an appropriately stored 'EpiPen' in their bag. This does not preclude the storage of inhalers and 'EpiPens' by the school's designated persons in Upper Phase and Lower Phase.

8.3 Pharmacy Only and 'Over the Counter' Medicines

- **Parents/carers who want their children to take Pharmacy Only medicines and 'over the counter' medicines during the school day must either:**
 - Come to school at an agreed time and administer it themselves to their own child.
 - or
 - Administer them at home prior to, and after school.

Monitoring, Evaluation and Review

The school's first aid arrangements will be regularly reviewed to take into consideration new guidance, legislation, changes to the school environment or other developments, thus ensuring the level of first aid provision remains appropriate to the risks involved.

9. Use of an emergency Salbutamol Inhaler

Background:

- An amendment to the Human Medicines (Amendment) (No. 2) Regulations 20145 allows schools to buy salbutamol inhalers, without a prescription, for use in emergencies. This applies to maintained nurseries, primary, secondary and special schools, pupil referral units and independent schools in Wales.



- Schools are not required to hold an inhaler – this is a discretionary power enabling schools to do so if they wish.
- The **emergency inhaler** can be used if the child/young person or staff member's prescribed inhaler is not available, for example because it is broken or empty, and **should only be used by children or young people**:

- who have been diagnosed with asthma and prescribed a reliever inhaler.

- **OR** who have been prescribed a reliever inhaler **AND** for whom the written parent/carer consent for use of the emergency inhaler has been given.

10. Procedure for storage and use of the emergency inhaler

- The school's designated persons in Upper Phase and Lower Phase will store, supervise and administer the emergency inhaler. It should be stored in the Medical Room strictly in accordance with product instructions and in the original container in which it is dispensed. They will monitor the expiry date of the emergency inhaler and order a replacement inhaler when needed.
- To ensure that the emergency inhaler is only used by children or young people with written parental/carer consent and that this consent forms part of the child or young person's individual health care plan, parents/carers are required to complete Appendix 2 and return to the school. The school's asthma register will reflect where this consent has been given. A copy of the up-to-date asthma register will be kept with the emergency inhaler to allow the school's designated persons in Upper Phase and Lower Phase to check parental/carer consent in the event of an asthma attack.
- The school's designated persons in Upper Phase and Lower Phase will administer the inhaler where a prescribed inhaler is broken, or empty AND parental/carer consent has been given.
- Effective records of use of the emergency inhaler will be undertaken informing parents/carers that their child has used the emergency inhaler, in writing. (Appendix 3.)



Goytre Fawr Primary School

Consent for Prescribed Medication

In certain circumstances, a parent/carer or medical practitioner may recommend that a pupil attends school whilst receiving medication. We will arrange for a member of staff (the school's designated Lower Phase or Upper Phase First Aid Leader) to administer prescribed medication only, provided that the containers are clearly labelled with an official outline of what doses are needed and with full instructions from a recognised pharmacist.

You will need to complete this form.

This form must be signed and returned to the school Office.

NB: All medication must be in its original packaging and labelled with the pupil's name and form group.

Pupil's Name:

Address:

Date of Birth:

Class:

Name of medication:

Medical Condition:

Times to be taken (within school hours):

Dosage:

Duration of treatment:

Any additional Information:

.....

- The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school staff to administer the medicine, in accordance with this information.
- I understand that it is my responsibility to provide in-date medication that is correctly labelled, replenish the medication supply in the school, collect expired or unused medication.
- I understand that where correct medication is not readily available on a given day and places the child at risk, the Headteacher has the right to refuse to admit my child into the school until the medication is provided.
- I will inform school of any new information with regard to my child, for example, if there are any changes in dosage or frequency, or if it is stopped.
- I accept that the school may not be able to adhere precisely to the times of administration stated above.

Signed (Parent/Carer):

Print Name (Parent/Carer):

Date:

For Completion by School Staff

Member of staff receiving the medication: **Signature:**

Date:

Authorised by:



Appendix 2: Consent form template

You may wish to attach a photograph of your child for identification in an emergency

USE OF EMERGENCY SALBUTAMOL INHALER

Child or young person showing symptoms of asthma / having asthma attack

Child's full name (PRINT):.....

Class:

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

You may wish to discuss this form with your child.

Signed: Date:

Parent/carers full name (PRINT).....

Mobile telephone number:.....

Home/work telephone number:...../.....

Parent/carers address:

.....
.....
.....

E-mail address:.....

Child's Doctor's name:.....

Child's Doctor's telephone number:.....

Child's Doctor's address:.....



Appendix 3: Use of emergency inhaler letter template

TEMPLATE LETTER TO INFORM PARENTS/CARERS OF EMERGENCY SALBUTAMOL INHALER USE

Child's name:

Class:

Date:

Dear.....,

This letter is to notify you that.....has had problems with their breathing today. This happened when

.....

.....

[Please delete as appropriate]

1. A member of staff helped them to use their own asthma inhaler.

OR

2. They did not have their own asthma inhaler with them, so a member of staff helped them to use the school's emergency asthma inhaler containing salbutamol. They were given puffs at a.m./p.m.

OR

3. Their own asthma inhaler was not working, so a member of staff helped them to use the school's emergency asthma inhaler containing salbutamol. They were givenpuffs at a.m./p.m.

Please contact your doctor urgently to supply an inhaler for your child to use in school.

We strongly advise that you pass this information on to your doctor as soon as possible to see whether your child needs further medical assessment.

Yours sincerely