First Aid, Healthcare and Medical Policy

"Worship the Lord your God, and his blessing will be on your food and water. I will take away sickness from among you."

Exodus 23:25



'Feeding Hearts and Minds'

The peace, joy and love of Christ is at the heart of all that we do in our school. Through religious education, school policy and, primarily, our culture of prayerfulness, charity and joy, we seek to share the Gospel with our families, our parish, our community and the wider world.

Using the example of Jesus Christ, we cultivate the skills of heart and mind that allow us to develop our talents and take a shared responsibility for ourselves, each other and the world He gave us. We profess our faith proudly and recognise that we are called to a loving relationship with God through the sacraments, scripture and prayer.

Our school is animated by love and our shared faith and clear values drive our behaviour and our relationships; we are tolerant and respectful of the unique value of each person. Our individual needs and talents are recognised and nurtured in a warm, inclusive environment where we are able to use our gifts for the glory of God and in loving service of others.

We have excellent role models who empower us to believe in ourselves and provide us with an outstanding education and a wide range of opportunities – our aspirations for the future are high and we believe that through God's grace we can grow, learn and realise our full potential.

The health and safety of all members of the school community and visitors to the school is of utmost importance. This first aid, healthcare and medical policy is created with the aim of ensuring that all staff members, visitors to the school, pupils and parents are aware of standard procedures that will be followed in the event of any major or minor illness, accident or injury, and how they can contribute to the effective resolution of such incidents.

In addition to this the school recognises that under Section 100 of the Children and Families Act 2014 it has an additional duty to make arrangements for supporting pupils at their school with medical conditions. This is done through the creation of individual healthcare plans (Medical Record Form). These will be drawn up by school in consultation with health and social care professionals, pupils and parents to ensure the needs of children with medical conditions are effectively supported and that no pupil will be excluded from full access to education, including school trips and physical education on the grounds of their medical condition.

This policy is approved by the school governing body and created by the Medical coordinator in consultation with the School Nurse and is put into practice in conjunction with the school's health and safety policy. The school expects all staff and pupils to be familiar with this policy, as with all school policies. The governors will ensure that this policy and all individual healthcare plans will be reviewed regularly and be readily accessible to parents and school staff.

Staff should always dial 999 for emergency services in the event of a serious emergency, medical or otherwise, before implementing the terms of this policy.

ROLES AND RESPONSIBILITY

The Governing Body holds the overall responsibility for ensuring that the school has an up-to-date first aid policy, and effective first aid provision, personnel, and equipment in place.

The Governing Body must further ensure that arrangements are in place to support pupils with medical conditions and in doing so they should ensure that such children can access and enjoy the same opportunities at school as any other child. Governing bodies should ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions. However, it is the school Head teacher and senior leadership team that are in the best position to monitor the first aid provision in the school on a day-to-day basis. Class teachers have day to day responsibility for ensuring that children with medical conditions in their class are given any appropriate medication when needed and that records are kept and appropriate information shared with parents and the senior leadership team via CPOMS and the First Aid record books.

THE HEADTEACHER

The **Medical co-ordinator** is responsible for ensuring that first aid provision is up to standard on a dayto-day basis. If this task is delegated to another member of staff, the Medical co-ordinator is responsible for ensuring that the member of staff is adequately equipped, qualified and willing to carry out this role, and that first aid risk assessments are carried out regularly.

The Medical co-ordinator will ensure that all individual healthcare plans (Medical Record Forms) are regularly reviewed and remain relevant and up to date. The plans will be reviewed at least annually or earlier if evidence is presented that the child's needs have changed. They will be developed with the child's best interests in mind and ensure that the school assesses and manages risks to the child's education, health and social wellbeing and minimises disruption. The Medical co-ordinator is responsible for ensuring that all staff are aware of the policy for supporting pupils with medical conditions and understand their role in its implementation. The Head teacher should ensure that all staff who need to know, are aware of the child's condition. They should also ensure that sufficient trained numbers of staff are available to implement the policy and deliver against all individual healthcare plans, including in contingency and emergency situations.

FIRST AIDERS

First aiders are members of staff who have completed a Health and Safety Executive (HSE) approved first aid course and hold a valid certification of competence in First Aid at Work, Emergency First Aid at school or Paediatric First Aid. First aiders receive updated training every 3 years and first aiders must make sure that their certificates are kept up to date through liaison with the school Medical co-ordinator. First aiders are required to give immediate first aid to staff, pupils and visitors to the school when it is needed and ensure that emergency services are called when necessary. First aiders are not paramedics.

There will be at least one first aider on the school site when children are present. Pupils will be made aware of which members of staff are designated first aiders, and will be notified of any changes to who holds these positions when they occur.

SCHOOL STAFF

School staff who are not designated first aiders still have responsibility for basic first aid provision (ie minor bumps/ grazes) throughout school. All staff should be aware of this policy, the school's health and safety policy, and basic first aid. All staff should:

• ensure that they are familiar and up to date with the school's first aid policy and standard procedures

• keep their managers informed of any developments or changes that may impact on the school's first aid provision, including any incidents that have already occurred

• ensure that all the correct provisions are assessed and in place before the start of any activity

• ensure that activities in school that they are supervising or organising are risk assessed, and in line with the school's health and safety policy, to reduce the risk of accident or injury

• co-operate fully with the employer to enable them to fulfil their legal obligations. Examples of this would be ensuring that items provided for health and safety purposes are never abused and that equipment is only used in line with manufacturers' guidance

• ensure that any equipment used is properly cared for and in the proper working order, including first aid boxes around the school. Any defects should be immediately reported to a senior manager and that piece of equipment should not be used.

• be aware of the needs of pupils with medical conditions that they teach

• know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help

• where appropriate to the needs of the pupil, teachers and other school staff may be asked to provide support, including the administering of medicines for pupils with individual healthcare plans. Where this is the case, staff should receive sufficient and suitable training to achieve the necessary level of competency before taking on responsibility to support children with medical conditions

• staff will not be asked to administer prescription medicines (Such as Epipens, insulin) or undertake specific healthcare procedures without appropriate training (updated to reflect any individual

healthcare plans). The school recognises that a first aid certificate is not appropriate training in this instance

• Staff responsible for induction of new staff will ensure that the medical register is brought to their attention. Staff members are then responsible for becoming familiar the medical needs of the children in their class.

• Phase leaders/Head/Deputy will ensure that supply staff are made aware of any medical needs of children within any class that they are working in.

• Volunteers have the same responsibilities for health and safety as any other staff, and will be expected to be familiar with the school's health and safety policy and procedures. Volunteers at the school need to be aware of the first aiders in their phase and call for assistance if needed

• All staff are given up to date and regular training as required.

• A record of all pupils who have access to asthma inhalers, EpiPens, injections, or similar medical equipment is kept up to date and is available to all staff; this type of medication will be kept safely in classrooms, suitably labelled and easily accessible in case of an emergency. Staff will be made aware of each individual's circumstances however, under no circumstances will a pupil be prevented from accessing their inhalers and medication and administering their medication when and where necessary.

• All staff will ensure that pupils will always be permitted to drink, eat or take toilet or other breaks whenever they require in order to manage their medical condition effectively.

• A database will be kept on the central school system that details pupils at risk of certain conditions, such as anaphylactic shock. The Medical co-ordinator is responsible for reviewing this on a regular basis and ensuring that it is up to date. It will be made clear to staff that they have a responsibility to regularly remind themselves which students are on this list, and what they should do in the case of an emergency.

• In the case of a medical emergency, a first aider should be called for whether the pupil carries their own medication or not. Emergency services should be contacted where they are needed, or thought to be needed.

• If a pupil becomes unwell (eg has an asthma attack, suffers a hypo etc) during the course of the school day the parents will be informed as soon as possible so that this may be monitored for any ongoing effects. A record should be made of all such incidents.

• If a pupil needs to be taken to hospital, a member of staff will stay with the child until the parent arrives, or accompany a child taken to hospital by ambulance.

PUPILS

Pupils with medical conditions will often be best placed to provide information about how their condition affects them. They should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of, and comply with, their individual healthcare plan. Other pupils will often be sensitive to the needs of those with medical conditions.

PARENTS

Parents/carers must provide written consent for the administration of first aid and medical treatment by school staff to their child before their child is admitted to the school. The school takes pupil privacy and confidentiality very seriously. The Medical co-ordinator and class teacher will be responsible for sharing medical information to other staff on a need-to-know basis – for example, ensuring that information regarding pupil allergies is shared with staff taking a class on an off-site trip. Pupil medical records are recorded on the Arbor system. All staff will be made aware of which pupils have access to asthma inhalers, EpiPens, injections, or similar medical equipment and for whom individual healthcare plans have been created. This is important in order that all staff are prepared to deal with medical emergencies relating to these conditions no matter where in school the child is. Personal evacuation plans will be written for those children who require support in case of a whole school evacuation. Parents and staff will be consulted and required to sign the plan once they are in agreement with it.

STAFF

When staff start at school, they are required to fill in a form that asks them to state any medical conditions that they have. It is the responsibility of staff to inform school that they have a medical need. Should a member of staff have a medical need that impacts on their daily working life, the medical needs coordinator will discuss appropriate support plans and what to do in an emergency with them on an individual basis.

MANAGING SHORT TERM MEDICAL INJURY IN SCHOOL

Some children have ongoing medical conditions or injuries that will require additional support on a short term basis e.g. a fracture. Prior to the child returning to school, parents/carers should complete a risk assessment with members of staff in school to ensure that the care the child requires is documented and school is aware of what the child can/cannot do until their injury is healed.

MANAGING MEDICINES ON SCHOOL PREMISES

The school is only responsible for administering prescribed medicines when not to do so would be detrimental to the pupil's health or school attendance. The school requires that parents should always notify the school of any side effects of any medication to be administered at school. The following key points guide the school's policy on managing medicines in accordance with the statutory guidelines for Supporting Pupils at School with Medical Conditions.

• A record of all medication administered will be kept with dosages and times logged in each instance. This will also show who administered the dose and to whom.

• Wherever clinically possible, the school requests that medicines should be prescribed in dose frequencies which enable them to be taken outside school hours

• The school will only accept prescribed medicines that are in-date, labelled, provided in the original container as dispensed by a pharmacist. They must include instructions for administration, dosage and storage. It is accepted that insulin will be provided in pen/pump form.

• Medicines will be stored safely at all times but pupils will have immediate access to their own medication at all times and will be given the name of the key holder so that these can be accessed swiftly. Items such as inhalers, blood glucose meters and adrenaline pens should be always readily available and will not be locked away.

• Where a child has been prescribed a controlled drug, this will be administered by a member of staff in accordance with the prescriber's instructions. Staff administering medicines should do so in accordance with the prescriber's instructions.

• Any medication which is no longer required will be returned to the parent to arrange for safe disposal.

• Sharps boxes will always be used for the disposal of needles and other sharps.

• The school will keep a record of any controlled drugs that have been prescribed for pupils and these will be stored in a locked, non-portable, container. This will be accessible only to nominated staff, but will be easily accessible in an emergency. A record will be kept of all dosages administered and the amount held in school.

• An emergency blue inhaler with spacer is kept in the First Aid Cupboard in the dining room and can be used for emergencies. The inhaler must be cleaned and return after use. A record of use must be kept and parents informed as soon as possible by the class teacher.

PROCEDURE IN THE EVENT OF AN ILLNESS

If a pupil falls ill while in a school lesson they should immediately tell the member of staff in charge, who will assess the situation and decide the best course of action. Pupils who are clearly in pain, are distressed, or are injured will never be required to go to the school office unaccompanied. An available first aider will administer the appropriate first aid and a member of SLT will be informed. A member of SLT will make the decision to call parents to pick up if they are too unwell to complete the rest of the school day. If a parent or carer is unable to get to the school to pick up the child, the child will remain in class or with a member of staff until they are able to get there at the end of the school day or arrange for another family member or carer to collect them. If a child who is sent home early is still too unwell to attend school the next day, parents should follow the procedure outlined under the subheading below. The school aims to reduce the risk of a spread of infection or illness and asks parents to keep their child at home where there is risk.

REPORTING CONTINUED ABSENCE DUE TO ILLNESS

Most cases of absence due to illness are short term, but parents will need to make a phone call to alert the school on the first day/each day of an absence. When the child returns to school they should bring a note from their parent/carer explaining the absence – this is for the school records. For prolonged absence due to illness, parents may be asked to provide the school with medical evidence such as a note from the child's doctor, an appointment card, or a prescription paper.

PROCEDURE IN THE EVENT OF AN ACCIDENT OR INJURY

In the case of an accident or injury, the member of staff in charge should be informed immediately. They will assess the situation and determine whether or not emergency services need to be called. All serious accidents or injuries should be reported to the Head teacher/ Medical co-ordinator. First aiders should be called to assist with accidents/injuries.

An ambulance should always be called by staff in the following circumstances:

- a significant head injury
- fitting, unconsciousness, or concussion
- difficulty in breathing and/or chest pains
- a severe allergic reaction
- a severe loss of blood
- severe burns or scalds
- the possibility of a serious fracture

• in the event that the first aider does not consider that they can adequately deal with the presenting condition by the administration of first aid, or if they are unsure of the correct treatment.

If an ambulance is called, the member of staff in charge should ensure that access to the school site is unrestricted and that the pupil can be easily accessed by emergency services when they arrive. Pupils who are taken to hospital in an ambulance will be accompanied by a member of staff unless parents are able to reach the school site in time to go with their child themselves. Ambulances will not be delayed for waiting for parents to arrive at the school. Parents will be informed immediately of any medical emergency and told which hospital to go to.

PROCEDURE IN THE EVENT OF CONTACT WITH BLOOD OR OTHER BODILY FLUID

The school understands the importance of ensuring that the risk of cross-contamination is reduced as far as is reasonably practicable, and the training that staff and first aiders undertake outlines the best practice for this. It is important that the first aider at the scene of an accident or injury takes the following precautions to avoid risk of infection to both them and other pupils and staff:

- cover any cuts and grazes on their own skin with a waterproof dressing
- wear suitable disposable gloves when dealing with blood or other bodily fluids

• wash hands after every procedure. If the first aider suspects that they or any other person may have been contaminated with blood and/or other bodily fluids that are not their own, the following actions should be taken without delay:

- wash splashes off skin with soap and running water
- wash splashes out of eyes with tap water or an eye wash bottle
- wash splashes out of nose or mouth with tap water, taking care not to swallow the water
- record details of the contamination
- report the incident to the senior manager in charge and take medical advice if appropriate.

FIRST AID IN PE LESSONS AND OFF-SITE PROVISION

The risk of injury is increased during increased physical activity. All staff should be aware of where first aid boxes are stored are stored, what should be in them, and appropriate use. For off-site activities and away fixtures, first aid bags will be taken and returned back to the same place. These will be taken on any off-site activity. It is good practice for staff who are in charge of away fixtures and off-site activities to check with the host school that there is adequate first aid provision in place. Risk assessments should be carried out. If an accident or injury does occur, first aid should be sought from the host school's first aiders. If a pupil needs first aid treatment elsewhere, a member of staff from our school should be with them at all times. Where necessary in an emergency situation, pupils should be taken to the nearest Accident and Emergency Department. Injuries that occur off-site should be reported to the Headteacher/ Medical Co coordinator as soon as possible, who will arrange first aid follow-up care where necessary.

Staff responsible for off-site activities will inform parents of any injuries/accidents. Where pupils have individual healthcare plans or who are on the SEND Register for a physical disability, sufficient active support will be provided to permit them to take part within sporting and off-site activities as fully as possible. Pupils will be encouraged to participate according to their own abilities and reasonable adjustments will be made ensure that this is practicable. A separate risk assessment will be carried out as appropriate prior to off-site activities and consultation will take place with appropriate parties (pupils, parents, health specialists) during this process.

REPORTING ACCIDENTS, EMERGENCIES, AND FIRST AID ADMINISTRATION

Any first aider who has administered first aid or medication should fill out a first aid record. More serious incidents /injuries/accidents are recorded via Oracle.

All members of staff supervising at the time of the incident should make a separate report. The date, time and place, what happened, actions taken, injuries or a brief outline of the illness, and first aid administered should be recorded. Accidents that fall under health and safety issues should also be reported in line with procedures outlined in the school health and safety policy. All injuries that have occurred, and first aid that has been carried out both on and off-site should be reported to the class teacher no matter how minor the injury. A written record should also be kept of all medicines that are administered to children, including those prescribed for pupils with individual healthcare plans. (See Medicines in Schools file kept in the main office) The Medical co-ordinator in consultation with class teachers is also responsible for ensuring that parents are kept up to date as is appropriate regarding

the health of their child in school, injuries that they have sustained, and medical treatment that they are receiving. In an emergency situation or in the case of a serious injury, parents will be informed as soon as is practicably possible. The Medical co-ordinator should report to the Headteacher on the effectiveness of the first aid provision, to ensure that the school is continuously on top of first aid best practice and incidents and accidents can be avoided as far as is reasonably practicable.

SERIOUS INCIDENTS

Serious incidents will also be recorded, and reviewed by senior leaders. The Governing Body will review cases of serious incidents and determine what, if any, steps could be taken in order to ensure that the same accident does not happen in the future. The types of minor accidents reported (no personal details discussed) will be reviewed at senior leadership team meetings to determine whether there are any accident trends that could be avoided. Reporting to HSE - The school is legally required to report certain injuries, diseases and dangerous occurrences to the HSE. Where there is a death or major injury this should be reported by calling the Incident Contact Centre (ICC) on 0845 300 9923 (opening hours Monday to Friday 8.30am to 5pm). All other reportable injuries should be reported online [http://www.hse.gov.uk/riddor/report.htm]. It is important to ensure that the contact details above are kept up to date at all times. It is the responsibility of the Headteacher to report to the HSE when necessary.

Incidents that need to be reported include but are not limited to: Involving staff

• work related accidents resulting in death or major injury (including as a result of physical violence) must be reported immediately (major injury examples: dislocation of hip, knee or shoulder; amputation; loss of sight; fracture other than to fingers, toes or thumbs)

• work related accidents that prevent the injured person from continuing with his/her normal work for more than seven days. which must be reported within 15 days (note that even though over-three-day injuries do not need to be reported, a record must still be retained)

• cases of work related diseases that a doctor notifies the school of (for example: certain poisonings; lung diseases; infections such as tuberculosis or hepatitis; occupational cancer)

• certain dangerous occurrences (near misses – reportable examples: bursting of closed pipes; electrical short circuit causing fire; accidental release of any substances that may cause injury to health). Involving pupils, parents, or school visitors

• accidents which result in the death of a person that arose out of or in connection with the school's activities

• accidents which result in an injury that arose out of or in connection with the school's activities and where the person is taken from the scene of the accident to hospital. Incident investigations

• after major accidents, incidents and near misses that have first aid implications

• after any significant changes to workplace, working practices or staffing. An investigation may be launched by external authorities in the case of accidents or incidents that fall under Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR). Accident reports will be reviewed and witnesses may be interviewed. Senior managers or governing bodies may decide to conduct internal investigations into less serious incidents to ensure that policy and procedure are being used correctly and effectively, and that future incidents of a similar nature can be avoided.



First Aid, Healthcare and Medical Policy

March 2024

The First Aid, Healthcare and Medical Policy is based on best practice advice from Lancashire County Council.

The implementation of this policy will be monitored by the Headteacher in consultation with the Senior Leadership Team

This policy will be reviewed as appropriate by the Faith, Community and Curriculum committee on behalf of The Governing Body.

Intended Policy Review Date – January 2024

Approved by:	(Headteacher)
Date:	
Approved by:	(Governor)
Date:	