

# **ACTON CE PRIMARY ACADEMY**



*To develop the learners of tomorrow and equip them with the skills to flourish and succeed for nothing is impossible with God-Luke 1:37*

## **First Aid policy**

**September 2021**

***Confirmation that the First Aid Policy at Acton has been discussed and approved by the Staff and Governors.***

**October 2021**

To be reviewed **October 2023**

### **First Aid Policy Statement**

#### **Rationale**

Children and adults in our care need good quality first aid provision. Clear and agreed systems should ensure that all children are given the same care and understanding in our Trust.

#### **Purpose**

This policy;

1. Gives clear structures and guidelines to all staff regarding all areas of first aid and medicines
2. Clearly defines the responsibilities of the staff
3. Enables staff to see where their responsibilities end
4. Ensures good first aid cover is available in the school and on visits

#### **Guidelines**

This policy is regularly reviewed and updated. This policy has safety as its priority: Safety for the children and adults receiving first aid or medicines and safety for the adults who administer first aid or medicines.

#### **Conclusion**

The administration and organisation of first aid and medicines (please see supporting children with medical needs policy) is taken very seriously at Acton. There are annual procedures that check on the safety and systems that are in place in this policy. The Trust takes part in the Health and Safety checks by Cheshire East Council. The school also discusses its first aid and medicines procedures with the school nurse when appropriate. Adjustments are made immediately if necessary.

## **First Aid Policy Guidelines**

### **First aid in school**

#### ***Training***

All staff are offered emergency first aid training. Retraining is scheduled to take place whenever necessary. At least 4 members of staff are fully trained first aiders. At least 3 members of staff are paediatric first aiders. A number of other staff are basic awareness in first aid qualified. Full first aiders attend retraining courses as required.

#### ***First aid kits***

Midday Assistants are issued with their own first aid kit and carry this with them at lunchtime.

First aid kits are stored in the school office and all classrooms. It is the responsibility of one member of staff (a full first aider) to check and update the contents regularly.

#### ***Cuts***

The nearest adult deals with small cuts. All open cuts should be covered after they have been treated with a medi wipe. Children should always be asked if they can wear plasters BEFORE one is applied. Children who are allergic to plasters will be given an alternative dressing.

Any first aider can treat more severe cuts, but a fully trained first aider must attend to the patient to give advice.

ANYONE TREATING AN OPEN CUT SHOULD USE RUBBER GLOVES. All blood waste is disposed of in the yellow bin, located in the disabled toilet. All accidents are recorded on an appropriate accident recording form and then recorded on the PRIME system.

#### ***Bumped heads***

Any bump to the head, no matter how minor is treated as serious. All bumped heads should be treated with an ice pack. Parents and guardians must be informed by telephone if serious and letter/text and stamp if not as bad. The child's teacher should be informed and keep a close eye on the progress of the child. ALL bumped head incidents are recorded onto PRIME.

#### ***Calling the emergency services***

In the case of major accidents, it is the decision of the fully trained first aider if the emergency services are to be called. Staff are expected to support and assist the trained first aider in their decision.

If a member of staff is asked to call the emergency services, they must,

1. State what has happened
2. The child's name
3. The age of the child
4. Whether the casualty is breathing and/or unconscious
5. The location of the school

In the event of the emergency services being called, a member of the Admin staff or another member of staff, should wait by the school gate on by the road and guide the emergency vehicle into the schools.

If the casualty is a child, their parents should be contacted immediately and given all the information required. If the casualty is an adult, their next of kin should be called immediately. All contact numbers for children and staff are clearly located in the school office.

### ***Medicines in School***

Please refer to the separate Supporting Children with Medical Needs Policy.

### ***Headlice***

Staff do not touch children and examine them for headlice. If we suspect a child has headlice we will inform the parents and request the child is checked. When we are informed of a case of headlice in school, we send a standard letter/text to the class where the case has been identified.

### ***Vomiting and diarrhoea***

If a child vomits or has diarrhoea in school, they will be sent home immediately. Children with these conditions will not be accepted back into school until 48 hours after the last symptom has elapsed.

### ***Chicken pox and other diseases, rashes***

If a child is suspected of having chicken pox etc, we will look at their arms or legs. To look at a child's back or chest would only be done if we were concerned about infection to other children. In this case another adult would be present and we would ask the child if it was alright.

If a child has any of these infections they will need to stay off school for a prescribed period of time. The Headteacher or school office will advise of timescales.

All other illnesses can be checked via the HSE Health advice to schools.

### ***Review***

This policy will be reviewed in October 2023

Signed:

Date: