



CHIEVELEY PRIMARY SCHOOL

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FIRST AID PROCEDURES SEPTEMBER 2022

Date	Action	Approved by
October 2021	New document Created (to be read in conjunction with WB Policy 2016)	FGB
Nov 2021	Approval by governors	FGB
Sept 2022	Replaced Individual Class Folders with central whole-school folders for accident and medication reporting	FGB
Sept 2023	More detail about intimate care added Ongoing medicine log for long-term medicines added	FGB

AIMS OF THIS DOCUMENT

This document is designed to ensure consistency of approach when members of our staff deal with first aid matters. This may include incidental first aid (dealing with accidents), administering short-term medications, or administering held emergency medications such as inhalers or epipens. This also includes the overall management of first aid resources.

HOLDING OF MEDICAL INFORMATION

It is a key part of our duty to keep children safe and we can only do so if we are equipped with up-to-date and useful medical information that can help us support the first aid needs of our pupils.

This medical information is stored securely in four key places, as follows:

- In the front office
- In the first aid room (as a medical register for quick access)
- With any emergency medication such as inhalers or epipens
- On SIMS, our school information management system

Each year, the contents of these folders are archived and retained securely in case the school has any need to refer back to them.

INDIVIDUAL HEALTHCARE PLANS (IHPs)

For children who need support to manage their chronic medical conditions, we will hold any emergency medication safely on-site for the duration of the school year. These medications will also be taken to offsite activities in the class red bag.

The parents/carers of these children are required to fill out a yearly IHP, detailing their child's needs, medication and dosages, so staff are able to respond effectively in case of an emergency, and to provide appropriate support to children.

Each year, or if there is a change in their child's condition or treatment, they will also be required to update their IHP, so we have only up-to-date information on site. Past IHPs will be retained while the child remains at our school.

IHPs will be stored in 3 key locations:

- The front office
- The central First Aid cupboard
- With emergency medication such as inhalers or epipens (which are either in red class bags or in the emergency medicine cupboards)

STORAGE & ADMINISTERING OF EMERGENCY MEDICINES

Emergency medicine such as inhalers will be stored in a child's red first aid bag (there is one bag per class). However epipens will be stored in central locations - the first aid store and the emergency cupboard in the hall - so they are always within easy access, no matter where an incident happens. It is important that dosage details and instructions are stored safely with these medicines.

For offsite visits, a responsible adult from the class team must collect the emergency medicines for their class and ensure these are carried in the class red bag throughout the whole trip. At the end of the trip, the bag and all medicines are to be returned to the classroom in the red bag.

At Chieveley Primary School, staff receive regular emergency medicine training through the school nursing team. The school also holds its own emergency inhaler and spacers, and its own epipens, in case of emergency; staff should only use the school supply under instruction from 999 responders.

SHORT-TERM MEDICINE REQUESTS

In cases where children require medication to be administered throughout the school day (including skin creams, lip balms), parents are required to complete a “Request for School to Administer Medication” form, to include timings and dosages and submit to the office, with the medicine. Medications, as defined above, must not be brought into school in book bags, and must be named and still within their original packaging, so staff have as much information as possible.

When these medicines are administered, staff will complete an “Administering of Medication” form, keeping one copy for school records and sending a photocopy home via bookbags.

For the purpose of this policy, medication is defined as: any substance that the school may reasonably be requested to support children in administering to support children’s health. This also includes items such as lip balms and medicated creams as it is important that staff know which children have been exposed to which substances.

In some circumstances, it may be necessary for a parent to make a permanent medicine request using this form (eg medication to support children who suffer from migraines). These requests are stored in the same folder as IHPs for ease of access.

GENERAL MEDICATION & CONSENT

At Chieveley Primary School, we hold a small supply of ‘general medicines’, such as Piriton, in case of need.

Where this is the case, we will seek parental consent before giving the medicine - often over the phone and followed up with an email where possible. It is also acceptable for consent to be noted as being “Consent by Phone”, provided staff timestamp and initial this too. When these medicines are administered, the usual form for reporting to parents still applies. The school also holds a ‘medicine consent’ register, for quick reference to check if parents have given us consent to administer general medicines to their children. This is sent out with our offsite consent form each year.

DAILY MEDICATIONS FOR LONG-TERM CONDITIONS

Where it is necessary, school staff may administer daily medications to children with long-term conditions. In order for us to do this as safely as possible, children will require an IHP to be completed, and we may seek additional guidance from the School Nursing Team.

Given the regularity of these medications, children receiving long-term daily medicines will have their own daily medicine log, as opposed to our central medicine forms, which will record the time, administration and dosage of regular medicines. As the administration of this medicine is part of a child’s normal routine, parents should not expect a daily medical form to be sent home, however access to their child’s medication log can be requested at any time.

INCIDENTAL FIRST AID (EG BREAKTIMES)

At Chieveley Primary School, we want children to be safe, with quick access to first aid support in case of accidents.

Each class has their own first aid bumbag, containing resources including sterile wipes, plasters, bandages and single-use ice packs. These are to be taken outside by a responsible adult when the class goes out to play, or to learn outside. Each class team has at least one member of staff who is first aid trained, although the vast majority of staff are also trained so extra support can be provided.

The level of first aid that is required throughout the day can differ widely, from 'TLC' to emergency situations requiring ambulance support. Staff are given guidance on which types of injury may require certain responses, including the level of communication these incidents require.

The school has a central first aid store in the main teaching block. This is for ease of access for most staff. There is also a supply of first aid sundries in the admin block. A designated member of staff retains responsibility for ensuring the school has adequate stocks of first aid supplies, although it is the responsibility of the class teams to ensure that their bumbags are adequately stocked.

ACCIDENT REPORTING

At Chieveley School, we believe that working with parents is key to keeping children safe, and this includes careful communication after higher-level first aid incidents.

We use Google Chat as part of our everyday operations to ensure that first aid messages are delivered quickly from the office to all staff, and to ensure that the office is able to send out reports of accidents, so parents know to watch their children closely after they hurt themselves at school. This also allows us to provide additional support to staff in case of larger or more severe incidents that require a higher level of intervention.

On Google Chat, we also log all head bumps or more severe cuts, so that the office staff have a clear message to send home to parents. This also includes injuries sustained on apparatus such as the climbing frame, which can look fine at first but have the potential to bruise heavily later on.

Staff are to be given, in both hard-copy and digital form, a reminder of “injury levels and communication” to ensure consistency of approach. Throughout the year, and in response to any trends or changes in guidance or circumstance, this form may be updated and redistributed to staff.

In the main First Aid Cupboard (teaching block) there are four, whole-school folders for first aid issues to be logged in:

- Ongoing Accident Log (these sheets are filled in on-the-go by staff then placed into the folder)
- Medicine administration (both the school medicine log and parent reporting sheets)
- Individual Healthcare Plans (IHPs)
- Serious Incident (CREST) forms

Staff are required to complete the relevant forms for each incident they deal with, be it giving a dose from an inhaler, or cleaning up cuts and scrapes. At the start of each new academic year, the accident and medication logs are to be archived and retained in case of need.

Once medicines are administered, an advice sheet will be sent home to parents, filled out by the first-aider who administered the medication. A copy of this is also to be retained for the school's records; this will be held EITHER in the school office folder (if the medicine is administered by admin staff) OR in the class first aid folder (if medicines such as inhalers are given by members of the class team). There is also a medicine log, in each of these folders, that needs to be completed.

PROVIDING INTIMATE CARE

On some occasions, school staff may be required to provide intimate care to children, which may include assisting them with eating or with clearing themselves having been to the toilet.

Our typical approach to 'clean up' is to support the child by providing resources and supervising them while they clean themselves. However, in rare cases where staff need to clean a child (and likely make contact with their genitals or buttocks), this should always be supervised by a second adult to maintain a safe environment, and then logged on our intimate care chart.

For children whose needs mean that intimate care is a longer-term and regular issue, the school will work with parents to create an intimate care plan, so that the needs, safeguarding and dignity of the child are always held in mind when we provide intimate care. Our Appropriate Touch guidance contains more detail on this matter.