Statutory Policy

First Aid Policy

See also:

- Children with Health Needs who Cannot Attend School Policy
- Supporting Pupils in Schools with Medical Conditions Policy
- Allergy Safety Policy

The purpose of this policy is to ensure that:

- unwell, hurt or injured pupils are identified and cared for appropriately
- urgent medical treatment is sought in a timely way and professional expertise sought
- pupils and adults are protected from preventable infection
- the impact of illness on a pupil's education is minimised
- staff and parents are clear about requirements and procedures when students are unwell
- staff and parents are clear about requirements and procedures if pupils require medication

Absence from School

Absences need reporting each morning on the days off sick, before 09.00am, by either:

1. emailing *attendance@oakgreen.bucks.sch.uk*
2. calling the school office on 01296 423895

If a child is absent from school for a medical, dental, optician, hospital appointment etc., an appointment card or letter must be provided in order to authorise the absence; this can be by email. Copies are not retained and all data is handled in line with data protection requirements.

If the authenticity of illness is in doubt, schools can request parents to provide medical evidence to support illness. It should be noted that GPs do not provide sick notes for school children.

Most Commonly-Caught Childhood Illnesses

- **Coughs and colds** do not normally require a pupil to be absent from school although this depends on the severity and symptoms. Encourage your child to throw away any used tissues and to wash their hands regularly. It's fine to send your child to school with a minor cough or common cold. But if they have a fever, keep them off school until the fever goes. If a pupil is diagnosed with flu, then they should remain absent from school until medical advice has been sought and they are advised that they are safe to return.

- **Sore throat** - You can still send your child to school if they have a sore throat. But if they also have a high temperature, they should stay at home until it goes away. A sore throat and a high temperature can be symptoms of tonsillitis.

- **High temperature -** If your child has a high temperature, keep them off school until it goes away. Check this with a medical professional expert if at all concerned.
- A pupil who has **sickness or diarrhoea** whilst at school should be collected immediately and kept absent from school for 48 hours following the last bout of sickness or diarrhoea.

Advice about when pupils should be absent from school can be checked on the following websites:
http://www.nhs.uk/Livewell/Yourchildatschool/Pages/Illness.aspx
https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/chapter-9-managing-specific-infectious-diseases

Specific Illnesses and Conditions

We recommend that pupils do not attend school while suffering from a communicable/infectious disease (e.g. Impetigo, conjunctivitis, hand, foot and mouth, chicken pox, shingles) without first seeking medical advice. They should then remain absent for the minimum periods recommended by their GP/ surgery.

Although exposure of pupils to a communicable disease in itself is not sufficient reason to require their absence from school, any pupil who becomes a home contact of diphtheria, poliomyelitis, typhoid and paratyphoid fevers will be requested to remain absent from school for the recommended time. The school will take advice from the Health Protection Agency.

Chickenpox - If your child has chickenpox - keep them off school until all the spots have crusted over. This is usually about 5 days after the spots first appeared.

Cold sores - There's no need to keep your child off school if they have a cold sore. Encourage them not to touch the blister or kiss anyone while they have the cold sore, or to share things like cups and towels.

Conjunctivitis - You don't need to keep your child away from school if they have conjunctivitis. Do get advice from your pharmacist. Encourage your child not to rub their eyes and to wash their hands regularly.

Ear infection - an ear infection and a high temperature or severe earache, keep them off school until they're feeling better or their high temperature goes away.

Hand, foot and mouth disease - If your child has hand, foot and mouth disease but seems well enough to go to school, there's no need to keep them off.

Head lice and nits - There's no need to keep your child off school if they have head lice. You can treat head lice and nits without seeing a GP.

Impetigo - If your child has impetigo, they'll need treatment from a GP, often with antibiotics. Keep them off school until all the sores have crusted over and healed, or for 48 hours after they start antibiotic treatment. Encourage your child to wash their hands regularly and not to share things like towels and cups with other children at school.

Ringworm - If your child has ringworm, see your pharmacist unless it's on their scalp, in which case you should see a GP. It's fine for your child to go to school once they have started treatment.

Scarlet fever - If your child has scarlet fever, they'll need treatment with antibiotics from a GP. Otherwise they'll be infectious for 2 to 3 weeks. Your child can go back to school 24 hours after starting antibiotics.

Slapped cheek syndrome (fifth disease) - You don't need to keep your child off school if they have slapped cheek syndrome, because once the rash appears, they're no longer infectious. If you suspect your child has slapped cheek syndrome, take them to see a GP and let their school know if they're diagnosed with it.

Threadworms - You don't need to keep your child off school if they have threadworms. Speak to your pharmacist, who can recommend a treatment.

Other medical care

Children may be sent home from school if they present with a rash and they have no medical reason for the rash. Parents will also be advised to seek medical advice due to the conditions that are related to a rash (Meningitis etc.). This is a precautionary measure on behalf of the school.

Sometimes, a child can become sleepy within lessons and they can fall asleep during class. If they do fall asleep, we will wake them up after 20 minutes only, as a precaution. We will take their temperature and monitor or medical advice may be needed. In some circumstances, the parent / carer will be called to take the child home.

The medical team will, at times, be presented with a child who has digested non-food related items. To ensure the child gets medical advice quickly, the medical team will contact 111 / 999 for professional advice and then contact the parent or carer.

Any child who needs emergency help by means of an ambulance, will be escorted by a member of the medical team or D/DSL until a parent or carer is able to attend.

Illness/ injury at school

Our health and safety policies and practices aim to reduce incidences of any injury. All accidents are logged. Procedures in school are in place to minimise risk, e.g. requirement for children to remove socks/tights for indoor PE, have bare feet on all equipment or wear plimsolls for PE or outdoor games, remove or cover stud earrings (no other jewellery should be worn at school), wear fitting garments in case they catch their clothing on equipment or cause e.g. dislocations. Any child with fractures or injuries that prevent them from safely playing, or who have had guidance about outdoor playtimes or doing PE, are to remain supervised in the building with a friend.

If a pupil becomes ill or is injured in any way, he/she is (where appropriate) taken to the Medical Room. If the problem cannot be dealt with in school, the parents will be contacted and will need to collect their child from school in a prompt manner. Where parents/ carers are unable to collect their child, it is the parent / carer's responsibility to ensure their child is collected in a prompt manner (within the hour). Where further medical advice is needed 111 or 999 may be called.

On rare occasions, an ambulance may need to be requested by the school. Where a parent is not at school within the time the ambulance needs to take a child to hospital, a member of school staff will accompany the child to the hospital. The parent will meet the child at the hospital and take over care of the child. Care of the child from the first call from school back to the parent/carer is expected within an hour of the first call to the parent/ carer.

In the rare event of a parent/carer refusing to collect their child due to an illness or injury, social care will be contacted in the first instance. This is likely to result in a referral to social care using a Multi-Agency Referral Form (MARF). Should the child's condition deteriorate, medical advice will be sought on 111 or 999.

We are unable to offer any care other than initial first aid.
Three members of staff hold the First Aid at Work Qualification and the Administering Medication at School Qualification, selected members of staff have received Epipen/Jext training and other members of staff hold a certificate in Emergency First Aid. Additional training relating to asthma, epilepsy, allergies and diabetes is at times organised, where appropriate, by the School Nursing Service (Bucks PCT).

Medication in the school is administered by Helen Wilkins, Liz Greggory and Sally Cox.

Parents / guardians of pupils suffering from chronic or long-term illnesses will also need to complete a health care plan which can be obtained from the office. Parents are responsible for ensuring that the healthcare plan is updated regularly ensuring that it is in accordance with medical advice.

'All visits to the Medical Room are recorded on a secure online information management system 'Medical Tracker', with emails being sent to the 'priority 1 adult'. For some accidents, a call home will be made to a parent or carer. When recording accidents, the details recorded will include:

- date, time and place of incident
- name of injured or ill person
- details of what first aid was given
- what happened immediately after the incident (for example, went home, went back to class, went to hospital)
- name and signature of first aider or person dealing with the incident

Oak Green School uses this online Medical Tracker system where all accidents, illnesses and injuries are collated. Parents / Carers will receive an email detailing the reason for a visit to the medical room. For any adult or carer who has not submitted an email address to the school, an adult will contact them or complete a slip for the teacher to hand over at the end of the school day.

Administration of medicines in school

Although no member of school staff is obliged to administer medication, many schools have at least one person who can help children take their medicines. Whenever possible, children should be encouraged to administer their medication themselves, under adult supervision.

The administration of medicine is the responsibility of parents and carers. The school follows the policies as set out by Buckinghamshire Council.

In cases where the administration/storage of medicines are routine and straightforward, the school will consider requests made by Parents in respect of the administration of medicines when:

• A pupil suffers from chronic long-term illnesses/complaints such as allergies, asthma, diabetes or epilepsy
• A pupil is recovering from a short-term illness but requires a course of four times a day antibiotics. (A 3 times a day course does not usually warrant taking in school hours as these can be taken before and after school then before bedtime, but we are aware that there may be exceptions to this)
• A pupil has an injury requiring regular prescribed pain relief

Where an adult needs to make a judgement call regarding the level of pain for pain relief to be administered to a child, that adult must be the parent or carer of the child. Parents must complete an 'Administration of Medicines Request Form' available from the school office. This form must be

used whenever a Parent wishes medication to be administered and **must be resubmitted termly** for long-term complaints.

Where appropriate *a parent* may administer Calpol/paracetamol prior to school as this may provide 6 hours relief to assist them through the day. If a pupil suffers regularly from acute pain, such as migraine, severe period pain or pain from an injury, the pupil's doctor should prescribe appropriate pain killers for the pupil's use.

Please note that only medicines and treatments prescribed by a doctor and in the named original packaging with the dispensing label and instruction leaflet will be accepted and stored in the medical room for use by the authorised personnel only. The only exceptions to this are Calpol / paracetamol and Piriton which may be administered at the Co-Head teachers' discretion and only if accompanied with the Administration of Medicines Request Form (e.g. Calpol for period pains).

Administration of medicines on a school trip or residential

First Aid trained staff accompany all trips and visits. A first aid bag (green with a white cross) will be taken on all trips.
If a pupil requires the administration of medicine including travel sickness pills, then a form should be obtained from the office and completed.
Where a child has a sudden increase in temperature on a school trip and requires Calpol, parents will be immediately contacted by the school to request verbal consent.
Where a child falls ill on a school trip and would usually be sent home from school, parents/carers will be telephoned by the school and expected to collect the child from the visit site. All other medical procedures will follow the trip risk assessment protocol.

Head Injuries Policy

If a pupil suffers a head injury in the lesson then the office will be notified so that a member of the medical team can be called to attend for assessment and an appropriate incident form will be completed.
If a pupil reports a head injury which has happened during break/lunchtime then they should be sent to the medical room for assessment.
1. First Aider to assess the injury
2. An emailed will be sent, via Medical Tracker, to the parent or carer with the accident details.
3. First Aider to contact parents to recommend, where appropriate, that the parent needs to collect the pupil so that medical treatment can be sought.
4. In serious cases, the ambulance is called.
5. An accident form is filled in online and emailed to the parent or carer.

Reporting of Accidents

Accidents are reported as directed by both the Health and Safety Executive (HSE) and Buckinghamshire Council Schools' Health and Safety Handbook (section 4.1) this is in accordance with RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations).

At the moment all accidents need reporting to a Senior First Aider so that she may complete the relevant ANT online incident report to Buckinghamshire Council, in addition to contacting the HSE where appropriate, which is verified by the Head teacher/s.

Mental Health

Mrs Hayley Ellerby is our mental health lead. She supports the school to make the best use of existing resources and effort to help improve the wellbeing and mental health of pupils, students and staff.

Where pupils and students experience more serious mental health problems, we expect them and their families to be able to access support from sources which include professionals working in specialist Children and Young People's Mental Health Services (CYPMHS), voluntary organisations and local GP practices.

EYFS

The EYFS requires that at least one person who has a current paediatric first aid (PFA) certificate should be on the premises and available at all times when children are present and should accompany children on outings. The certificate must be for a full course consistent with the criteria set out in annex A in the EYFS.
All staff who obtained a level 2 or level 3 qualification on or after 30 June 2016 must also have either a full PFA or an emergency PFA certificate within 3 months of starting work in order to be included in the required staff to child ratios at level 2 or level 3 in an early years setting.