

# **BENWICK PRIMARY SCHOOL**



## **First aid, medicines and medical need policy**

School Name: Benwick Primary School

Date Agreed at FGB:

Next Review: May 2025

Date shared with staff:

Published on website:

## **First-Aid in School**

At Benwick Primary School we ensure that there is at least one emergency and one paediatric first-aid trained member of staff in school at all times during the school day. In addition a trained first-aider will accompany classes on all offsite school trips and residential visits. First Aid staff are listed in the school kitchen, offices, communal areas and information given to staff.

For each break-time and lunch time the school has nominated first-aiders.

## **Training**

- Several school staff including Mid-day supervisors are first aid trained.
- Several members of staff are also trained in paediatric first aid.
- The School Business Manager keeps records of first aid training in staff personnel files.

## **Roles and Responsibilities**

The main duties of a first-aider in school are:

- To complete a training course approved by the Health and Safety Executive, as required.
- To give immediate help to casualties with common injuries and those arising from specific hazards at school.
- When necessary, ensure that an ambulance or other professional medical help is called.

## **First Aid Facilities**

- The staff kitchen is the main/designated medical room where the majority of first aid is carried out if it cannot be carried out outside.
- All contaminated equipment, for example gloves, tissues and dressing should be disposed of carefully in the yellow clinical waste bin and area should be cleaned thoroughly using approved disinfectant.
- The school has three first-aid medical cupboards which can be found in the staff kitchen. These cabinets contain sufficient first-aid materials to administer first-aid as recommended by the HSE, one of which is lockable. Medications not requiring refrigeration are stored the locked cabinet.
- The school has two travelling first-aid containers used for off-site visits. These are stored in the lower cabinet in the staff kitchen and contain supplies recommended by the HSE.
- Small first aid kits are accessible throughout the school.
- An annual check of all first-aid supplies must be completed and stock replaced as needed.

## **Accident and Injury Reporting**

- All first-aid incidents should be recorded on Medical Tracker.
- Staff will record child's name, class and date and time of injury, along with a brief description of the injury and treatment given.
- Minor injuries or where a child has not needed treatment are recorded on Medical Tracker.
- Major injuries are recorded on Medical Tracker.
- First aid notifications are sent to parents/ carers via email from Medical Tracker. Wherever possible first-aid staff should speak to the teacher of the child concerned.

A member of SLT should be informed of any major injury and will decide if the child is to go home.

- Where a child has an injury to the head, the staff member should inform a member of the Senior Leadership Team who will decide if parents should be contacted immediately.
- In addition all children with a head injury will be given a red wrist band which will be worn for the rest of the school day and wear home. Date, time and brief description of injury will be written on the band. This ensures all staff recognise that the child has had a head injury that day.
- All serious injuries and or where a child or adult attends the hospital as a result of an injury at school is reported to the Head teacher or senior leader and should be recorded on-line on HSE reporting. This is completed by a member of SLT.

## Emergency Procedures

The Head teacher is the appointed person within the school to take charge when someone is injured or becomes ill and call the emergency services if required. In the absence of the Head teacher a member of SLT will carry out this role.

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

- State what has happened.
- The casualties name.
- The age of the casualty.
- Whether the casualty is breathing and/or conscious.
- The location of the school.

In the event of the emergency services being called, a member of the staff, should wait by the school gate and guide the emergency vehicle.

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.**

- All staff know how to call the emergency services.
- All staff know who is responsible for carrying out emergency procedures.
- A member of staff will always accompany a child to hospital by ambulance and will stay until the parent arrives. Health professionals are responsible for any decisions when the parent is not available.
- Staff must never take children to hospital in their car, an ambulance should be called. However, if a parent requests a lift to the Doddington Minor Injuries unit (because they do not have a car) this is acceptable
- Individual health care plans include instructions as to how to manage a child in an emergency and identify who has overall responsibility during that emergency.
- Each room has access to a walkie-talkie to call for assistance.

## Procedures for managing prescribed medicines which need to be taken during the school day

- We will accept medicines that have been prescribed by a doctor, dentist, nurse or pharmacist
- Medicines must always be provided in the original container as dispensed by the pharmacist and include the instructions for administration
- For children with ongoing serious medical conditions, who require regular administration of medication, named trained staff will administer prescribed medication prepared by themselves in line with medical guidance.
- **We will not accept medicines that have been taken out of the container nor make changes to dosages on parental instructions**
- A medicines administration sheet must be completed and signed by the parent.
- It is helpful, where clinically appropriate, if medicines are prescribed in dose frequencies which enable it to be taken outside school hours. Parents should be encouraged to ask the prescriber about this. It should be noted that medicines that need to be taken 3 times a day could be taken in the morning, after school and at bedtime

## Procedures for Managing Prescription Medicines on Trips and Outings

- Children with medical needs are encouraged to participate in safely managed visits. Reasonable adjustments should be made to enable children with medical needs to participate fully and safely on visits.
- Additional safety measures may need to be taken for outside visits, for example, additional adults to supervise. Arrangements for taking any necessary medicines should be made and staff supervising excursions must be made aware of any medical needs, and relevant emergency procedures.
- If staff are concerned, they should seek parental advice and medical advice from the school health service

## Administering Medicines

- Parents and Carers whose children require medication to be given during the school day must complete a signed permission form these can be found in the office foyer, this will then need to be handed into the school office along with the medication.
- The office will then notify the appropriate member of staff who will ensure that the medication is given at the appropriate time.
- Staff should ensure that this information is the same as that provided by the instructions on the bottle/packet
- Any member of staff giving medicines to a child should check: the child's name; name of the medicine; prescribed dose; method of administration; time/frequency of administration; any side effects; and the expiry date.
- **No child under 16 will be given medicines without their parent's written consent**
- **If in doubt staff will not administer the medication but check with parents or a health professional before taking further action**
- In the administration of rectal diazepam, it is good practice to have the dosage and administration witnessed by a second adult
- Staff must complete the medical section on Medical Tracker each time they administer medicine to a child. This is not a legal requirement but good records help demonstrate that staff have exercised a duty of care.
- All staff are aware of the likelihood of an emergency arising and what action to take if one occurs. Back up cover is available for when a member of staff is absent.

Teacher's conditions of employment do not include giving or supervising a pupil taking medicines. Any teacher who decides to do this will be doing so voluntarily. We have sufficient members of support staff who are employed and appropriately trained to manage medicines as part of their duties

- Any member of staff who agrees to accept responsibility for administering prescribed medicines must have appropriate training and guidance. They must also be aware of possible side effects of the medicines and what to do should they occur.

### **Non-Prescription Medicines**

- The school will generally not administer any medicines that are not prescribed by a doctor, dentist, nurse or pharmacist unless it is part of an Individual Health Care Plan. Requests will be considered on an individual basis.
- Cough /throat sweets should not normally be brought into school. If deemed necessary they should go through the school office as per all medication requests.

### **Long Term Medical Needs**

- It is important to have sufficient information about the medical condition of any child with long-term medical needs. If a child's medical needs are inadequately supported this may have a significant impact on their experiences and the way they function in or out of school. The impact may be direct in that the condition may affect cognitive or physical abilities, behaviour or emotional state. Some medicines may also affect learning leading to poor concentration or difficulties in remembering. The impact could also be indirect; perhaps disrupting access to education through unwanted effects of treatments or through the psychological effects that serious or chronic illness or disability may have on a child and their family.
- Schools need to know about a particular need before a child is admitted, or when a need first develops. For children who attend hospital appointments on a regular basis, special arrangements may also be necessary. A written health care plan for such children is created, involving the parent and relevant health care professionals. Individual Healthcare Plans help to ensure that schools effectively support pupils with medical conditions and provide clarity about what needs to be done, when and by whom. It should be drawn up by school, parents and relevant healthcare professional and pupil as appropriate.

### **Self-Management**

- Children are supported and encouraged to take responsibility to manage their own medicines, for example asthma inhalers from a relatively early age.
- If children can take their medicine themselves, staff may only need to supervise. Each class will have an area, known to the children, where their medicine is kept (e.g. inhalers or epi-pens). The medicines should always be taken into PE lessons, to the swimming pool and on all visits outside of school.

### **Storing Medicines**

- Large volumes of medicines are not stored. Staff only store, supervise and administer medicine that has been provided for an individual child.
- Medicines are stored according to product instructions.
- Children know where their medicines are stored. The Head is responsible for making sure that all medicines are stored safely.
- All emergency medicines such as asthma inhalers and epi-pens are readily available and not locked away.
- Other non-emergency medicines are kept in a secure place not accessible to children.
- Some medicines need to be refrigerated. They can be kept in a fridge containing food but should be in a zip lock bag along with the medication form and should be clearly labelled. Children should take home medicines at the end of every term so that parents can check use by dates.

### **Mental Health:**

The Mental Health Lead at Benwick Primary is: Clare Talbot – Headteacher.

Mental Health is taken seriously by all staff and mental health week is promoted each year. We have a trained ELSA (Emotional Literacy Support Assistant) in school who works with children with identified needs. The mental Health Lead and SENDCo (Mrs Nicholson-Smith) work in partnership

with outside agencies to provide education and support for families with mental health needs. Our dedicated school Wellbeing website page signposts where additional support can be found.

This policy is to be read in conjunction with the schools:  
Asthma and Health, Safety and Wellbeing Policies.

## Benwick Primary School First Aiders May 2024

Name	Emergency First Aid at work	Paediatric	Date	Expires
Rachael Barton	✓		16/03/2022	15/03/2025
Jan Fogarty	✓		08/05/2024	07/05/2027
Siana Hay	✓		11/10/2023	09/10/2026
Tina Hinde	✓	✓	22/04/2022	21/04/2025
Deborah Kelso	✓		22/06/2022	21/06/2025
Sally Newton	✓	✓	26/03/2024	25/03/2027
Karl Pedder	✓	✓	12/11/2021	11/11/2024
Sally Parker	✓		10/01/2022	09/01/2025
Kelly Petriello	✓	✓	20/10/2022	19/10/2025