



## *Kilnhurst St Thomas' C of E Primary Academy*

### FIRST AID POLICY

Date of Policy: September 2023  
Date of Policy Review: September 2024  
(or sooner if required)



#### **Statement of intent**

Kilnhurst St Thomas' Primary Academy. is committed to providing emergency first aid provision in order to deal with accidents and incidents affecting staff, pupils and visitors. The arrangements within this policy are based on the results of a suitable and sufficient risk assessment carried out by the school in regard to all staff, pupils and visitors.

The school will take every reasonable precaution to ensure the safety and wellbeing of all staff, pupils and visitors. This policy also includes information about Allergens and Asthma. Details of such precautions are noted in the following policies:

- Health and Safety Policy
- Behavioural Policy
- Child Protection and Safeguarding Policy
- Supporting Pupils with Medical Conditions Policy
- Educational Visits Policy

The school's administrative team has overall responsibility for ensuring that the school has adequate and appropriate first aid equipment, facilities and personnel, and for ensuring that the correct first aid procedures are followed.

#### **Legal framework**

This policy has due regard to legislation and statutory guidance, including, but not limited to, the following:

- Health and Safety at Work etc. Act 1974
- The Health and Safety (First Aid) Regulations 1981
- The Management of Health and Safety at Work Regulations 1999
- DfE (2015) 'Supporting pupils at school with medical conditions'
- DfE (2000) 'Guidance on First Aid for Schools'
- DfE (2018) 'Automated external defibrillators (AEDs)'

#### **Aims**

All staff will read and be aware of this policy, know who to contact in the event of any illness, accident or injury, and ensure that this policy is followed.

Staff will always use their best endeavours to secure the welfare of pupils. Anyone on the school premises is expected to take reasonable care for their own and other's safety.

The aims of this policy are to:

- Ensure that the school has adequate, safe and effective first aid provision for every pupil, member of staff and visitor to be well looked after in the event of any illness, accident or injury, no matter how major or minor.
- Ensure that staff and pupils are aware of the procedures in the event of any illness, accident or injury.
- Ensure that medicines are only administered at the school when express permission has been granted for this.
- Ensure that all medicines are appropriately stored.
- Promote effective infection control.

Nothing in this policy will affect the ability of any person to contact the emergency services in the event of a medical emergency. For the avoidance of doubt, staff should dial 999 in the event of a medical emergency before implementing the terms of this policy and make clear arrangements for liaison with ambulance services on the school site.

To achieve the aims of this policy, the school will have suitably stocked first aid boxes in line with the assessment of needs. Where there is no special risk identified, a minimum provision of first aid items is provided in each class and in key areas around school.

The lead first aider is responsible for examining the contents of first aid boxes, including any mobile first aid boxes for offsite use – these will be frequently checked and restocked as soon as possible after use. Items will be safely discarded after the expiry date has passed.

First aid boxes are in the following areas:

- The school office
- In every classroom

### **First aiders**

The main duties of first aiders will be to administer immediate first aid to pupils, staff or visitors, and to ensure that an ambulance or other professional medical help is called, when necessary.

First aiders will ensure that their first aid certificates are kept up-to-date through liaison with the SBM.

Each classroom's first aiders will be responsible for ensuring all first aid kits are properly stocked and maintained. The first aid appointed person(s) will be responsible for maintaining supplies.

School staff are expected to attend First Aid training every 3 years. Records of this is kept on the SCR.

### **Emergency procedures**

If an accident, illness or injury occurs, the member of staff in charge will assess the situation and decide on the appropriate course of action, which may involve calling for an ambulance immediately or calling for a first aider.

If called, a first aider will assess the situation and take charge of first aider administration.

If the first aider does not consider that they can adequately deal with the presenting condition by the administration of first aid, then they will arrange for the injured person to access appropriate medical treatment without delay.

Where an initial assessment by the first aider indicates a moderate to serious injury has been sustained, one or more of the following actions will be taken:

- Administer emergency help and first aid to all injured persons. The purpose of this is to keep the victim(s) alive and, if possible, comfortable, before professional medical help can be called. In some situations, immediate action can prevent the accident from becoming increasingly serious, or from involving more victims.
- Call an ambulance or a doctor, if this is appropriate – after receiving a parent's clear instruction, take the victim(s) to a doctor or to a hospital. Moving the victim(s) to medical help is only advisable if the person doing the moving has sufficient knowledge and skill to move the victim(s) without making the injury worse.
- Ensure that no further injury can result from the accident, either by making the scene of the accident safe, or (if they are fit to be moved) by removing injured persons from the scene.
- See to any pupils who may have witnessed the accident or its aftermath and who may be worried, or traumatised, despite not being directly involved. They will need to be escorted from the scene of the accident and comforted. Younger or more vulnerable pupils may need parental support to be called immediately.

Once the above action has been taken, the incident will be reported promptly to:

- The headteacher or assistant headteacher (if headteacher is absent.)
- The victim(s)'s parents.

### **Reporting to parents**

In the event of incident or injury to a pupil, at least one of the pupil's parents will be informed as soon as practicable.

Parents will be informed in writing of any injury to the head, whether minor or major, and be given guidance on the action to take if symptoms develop.

In the event of a serious injury or an incident requiring emergency medical treatment, the pupil's class teacher will telephone the pupil's parents as soon as possible.

A list of emergency contacts will be kept at the school office.

### **Offsite visits and events**

Before undertaking any offsite visits or events, the teacher organising the trip or event will assess the level of first aid provision required by undertaking a suitable and sufficient risk assessment of the visit or event and the persons involved. For more information about the school's educational visits requirements, please see the Educational Visits Policy.

### **Storage of medication**

Medicines will always be stored securely and appropriately in accordance with individual product instructions, save where individual pupils have been given responsibility for keeping such equipment with them.

All medicines will be stored in the original contained in which they were dispensed, together with the prescriber's instructions for administration, and properly labelled, showing the name of the patient, the date of prescription and the date of expiry of the medicine.

All medicines will be returned to the parent for safe disposal when they are no longer required or have expired.

An emergency supply of medication will be available for pupils with medical conditions that require regular medication or potentially lifesaving equipment, e.g. an EpiPen (when available).

Parents will advise the school when a child has a chronic medical condition or severe allergy so that an IHP can be implemented and staff can be trained to deal with any emergency in an appropriate way. Examples of this include epilepsy, diabetes and anaphylaxis. A disclaimer will be signed by the parents in this regard.

### **Illnesses**

When a pupil becomes ill during the school day, the parents will be contacted and asked to pick their child up as soon as possible.

A quiet area will be set aside for withdrawal and for pupils to rest while they wait for their parents to pick them up. Pupils will be monitored during this time.

### **Consent**

Parents will be asked to complete and sign a medical consent form when their child is admitted to the school, which includes emergency numbers, details of allergies and chronic conditions, and consent for the administration of emergency first aid – these forms will be updated periodically.

Staff do not act 'in loco parentis' in making medical decisions as this has no basis in law – staff will always aim to act and respond to accidents and illnesses based on what is reasonable under the circumstances and will always act in good faith while having the best interests of the pupil in mind – guidelines will be issued to staff in this regard.

### **Allergens**

#### **Definitions**

For the purpose of this policy:

- Allergy – is a condition in which the body has an exaggerated response to a substance. This is also known as hypersensitivity.
- Allergen – is a normally harmless substance that triggers an allergic reaction for a susceptible person.

Allergic reaction – is the body's reaction to an allergen and can be identified by, but not limited to, the following symptoms:

- Hives
- Generalised flushing of the skin
- Itching and tingling of the skin
- Tingling in and around the mouth
- Burning sensation in the mouth
- Swelling of the throat, mouth or face
- Feeling wheezy
- Abdominal pain
- Rising anxiety
- Nausea and vomiting
- Alterations in heart rate
- Feeling of weakness
- Anaphylaxis – is also referred to as anaphylactic shock, which is a sudden, severe and potentially life-threatening allergic reaction. This kind of reaction may include the following symptoms:
  - Difficulty breathing
  - Feeling faint
  - Reduced level of consciousness
  - Lips turning blue
  - Collapsing
  - Becoming unresponsive

### **Roles and responsibilities**

The headteacher is responsible for:

- Ensuring that some designated first aiders are trained in the use of adrenaline auto-injectors (AAIs) and the management of anaphylaxis.
- Ensuring that all staff members are provided with information regarding anaphylaxis, as well as the necessary precautions and action to take.
- Ensuring that catering staff are aware of, and act in accordance with, the school's policies regarding food and hygiene.
- Ensuring that catering staff are aware of any pupils' allergies which may affect the school meals provided.
- Ensuring that there are effective processes in place for medical information to be regularly updated and disseminated to relevant staff members, including supply and temporary staff.
- Seeking up-to-date medical information about each pupil via a medical form sent to parents on an annual basis, including information regarding any allergies.
- Contacting parents for required medical documentation regarding a child's allergy.
- Ensuring that the necessary staff members are informed about pupils' allergies.

- Understanding the action to take and processes to follow in the event of a pupil going into anaphylactic shock, and ensuring that this information is passed onto staff members.

All staff members are responsible for:

- Acting in accordance with the school's policies and procedures at all times.
- Attending relevant training regarding allergens and anaphylaxis.
- Being familiar with and implementing pupils' individual healthcare plans (IHPs) as appropriate.
- Responding immediately and appropriately in the event of a medical emergency.
- Reinforcing effective hygiene practices, including those in relation to the management of food.
- Promoting hand washing before and after eating.
- Monitoring all food supplied to pupils by both the school and parents, including snacks, ensuring food containing known allergens is not provided.
- Ensuring that pupils do not share food and drink in order to prevent accidental contact with an allergen.
- Ensuring that any necessary medication are out of the reach of pupils but still easily accessible to staff members.

All parents are responsible for:

Notifying the school of the following information:

- Their child's allergens
- The nature of the allergic reaction
- What medication to administer
- Specified control measures and what can be done to prevent the occurrence of an allergic reaction
- Keeping the school up-to-date with their child's medical information.
- Providing written consent for the use of a spare AAI.
- Providing the school with up-to-date emergency contact information.
- Providing the school with written medical documentation, including instructions for administering medication as directed by the child's doctor.
- Providing the school with any necessary medication, in line with the procedures outlined in the Supporting Pupils with Medical Conditions Policy.
- Communicating to the school any specific control measures which can be implemented in order to prevent the child from coming into contact with the allergen.
- Providing the school, in writing, any details regarding the child's allergies.
- Working alongside the school to develop an IHP to accommodate the child's needs, as well as undertaking the necessary risk assessments.
- Signing their child's IHP, where required.
- Acting in accordance with any allergy-related requests made by the school, such as not providing nut-containing items in their child's packed lunch.
- Ensuring their child is aware of allergy self-management, including being able to identify their allergy triggers and how to react.
- Providing a supply of 'safe' snacks for any individual attending school events.
- Raising any concerns they may have about the management of their child's allergies with the classroom teacher.

- Ensuring that any food their child brings to school is safe for them to consume.
- Liaising with staff members, including those running breakfast and afterschool clubs, regarding the appropriateness of any food or drink provided.

All pupils are responsible for:

- Ensuring that they do not exchange food with other pupils.
- Avoiding food which they know they are allergic to, as well as any food with unknown ingredients.
- Being proactive in the care and management of their allergies.
- Notifying a member of staff immediately in the event they believe they are having an allergic reaction, even if the cause is unknown.
- Notifying a member of staff when they believe they may have come into contact with something containing an allergen.
- Learning to recognise personal symptoms of an allergic reaction.
- Keeping necessary medications in an agreed location which members of staff are aware of.
- Developing greater independence in keeping themselves safe from allergens.
- Notifying a staff member if they are being bullied or harassed as a result of their allergies.

### **Food allergies**

Parents will provide the school with a written list of any foods that their child may have an adverse reaction to, as well as the necessary action to be taken in the event of an allergic reaction, such as any medication required.

Information regarding all pupils' food allergies will be collated, indicating whether they consume a school dinner or a packed lunch, and this will be passed on to the school's catering service.

Where a pupil who attends the school has a nut allergy, the school's catering service will be requested to eliminate nuts, and food items with nuts as ingredients, from meals as far as possible, not including foods which are labelled 'may contain traces of nuts'.

All food tables will be disinfected before and after being used.

Anti-bacterial wipes and cleaning fluid will be used.

Boards and knives used for fruit and vegetables will be a different colour to the rest of the kitchen knives in order to remind kitchen staff to keep them separate.

There will be a set of kitchen utensils that are only for use with the food and drink of the pupils at risk.

There will also be a set of kitchen utensils with a designated colour. These utensils will be used only for food items that contain bread and wheat related products.

Food items containing bread and wheat will be stored separately.

Food items containing nuts will not be served at, or be bought onto, school premises.

The chosen catering service of the school is responsible for ensuring that the school's policies are adhered to at all times, including those in relation to the preparation of food, taking into account any allergens.

Learning activities which involve the use of food, such as food technology lessons, will be planned in accordance with pupils' IHPs, taking into account any known allergies of the pupils involved.

### **Animal allergies**

Pupils with known allergies to specific animals will have restricted access to those that may trigger a response.

In the event of an animal on the school site, staff members will be made aware of any pupils who this may pose a risk to and will be responsible for ensuring that the pupil does not come into contact with the specified allergen.

### **Seasonal allergies**

The term 'seasonal allergies' refers to common outdoor allergies, including hay fever and insect bites.

Precautions regarding the prevention of seasonal allergies include ensuring that the school field is not mown whilst pupils are outside.

Pupils with severe seasonal allergies will be provided with an indoor supervised space to spend their break and lunchtimes in, avoiding contact with outside allergens.

Staff members will monitor pollen counts, making a professional judgement as to whether the pupil should stay indoors.

Pupils will be encouraged to wash their hands after playing outside.

Pupils with known seasonal allergies are encouraged to bring an additional set of clothing to school to change in to after playing outside, with the aim of reducing contact with outdoor allergens, such as pollen.

Staff members will be diligent in the management of wasp, bee and ant nests on school grounds and in the school's nearby proximity, reporting any concerns to the site manager.

The site manager is responsible for ensuring the appropriate removal of wasp, bee and ant nests on and around the school premises.

Where a pupil with a known allergy is stung or bitten by an insect, medical attention will be given immediately.

### **Adrenaline auto-injectors (AAIs)**

Pupils who suffer from severe allergic reactions may be prescribed an AAI for use in the event of an emergency.



Under The Human Medicines (Amendment) Regulations 2017 the schools is able to purchase AAI devices without a prescription, for emergency use on pupils who are at risk of anaphylaxis, but whose device is not available or is not working.

The school will purchase spare AAIs from a pharmaceutical supplier, such as the local pharmacy.

Spare AAIs are stored as part of an emergency anaphylaxis kit, in the school office.

Pupils who have prescribed AAI devices, and are over the age of seven, are able to keep their device in their possession.

For pupils under the age of seven who have prescribed AAI devices, these are stored in a suitably safe and central location: the school office or child's classroom.

Spare AAIs are not located more than five minutes away from where they may be required. The emergency anaphylaxis kit(s) can be found at the following locations:

- The school office

All staff have access to AAI devices, but these are out of reach and inaccessible to pupils – AAI devices are not locked away where access is restricted.

All spare AAI devices will be clearly labelled to avoid confusion with any device prescribed to a named pupil.

In line with manufacturer's guidelines, all AAI devices are stored at room temperature in line with manufacturer's guidelines, protected from direct sunlight and extreme temperature.

Where any AAIs are used, the following information will be recorded:

- Where and when the reaction took place
- How much medication was given and by whom

### **Access to spare AAIs**

- A spare AAI can be administered as a substitute for a pupil's own prescribed AAI, if this cannot be administered correctly, without delay.
- Spare AAIs are only accessible to pupils for whom medical authorisation and written parental consent has been provided – this includes pupils at risk of anaphylaxis who have been provided with a medical plan confirming their risk, but who have not been prescribed an AAI.
- Consent will be obtained as part of the introduction or development of a pupil's IHP.
- If consent has been given to administer a spare AAI to a pupil, this will be recorded in their IHP.

The school uses a register/ Individual care plan of pupils to whom spare AAIs can be administered – this includes the following:

- Name of pupil
- Class
- Known allergens
- Risk factors for anaphylaxis
- Whether medical authorisation has been received
- Whether written parental consent has been received

- Dosage requirements

Parents are required to provide consent on an biannual basis to ensure the register remains up-to-date.

Parents can withdraw their consent at any time. To do so, they must write to the headteacher.

### **Medical attention and required support**

Once a pupil's allergies have been identified, a meeting will be set up between the pupil's parents, the relevant classroom teacher or any other relevant staff members, in which the pupil's allergies will be discussed and a plan of appropriate action/support will be developed.

All medical attention, including that in relation to administering medication, will be conducted in accordance with the Supporting Pupils with Medical Conditions Policy. Parents will provide the school with any necessary medication, ensuring that this is clearly labelled with the pupil's name, class, expiration date and instructions for administering it.

Pupils will not be able to attend school or educational visits without any life-saving medication that they may have, such as AAIs.

All members of staff involved with a pupil with a known allergy are aware of the location of emergency medication and the necessary action to take in the event of an allergic reaction.

Any specified support which the pupil may require is outlined in their IHP.

All staff members providing support to a pupil with a known medical condition, including those in relation to allergens, will be familiar with the pupil's IHP.

The SENDCO is responsible for working alongside relevant staff members and parents in order to develop IHPs for pupils with allergies, ensuring that any necessary support is provided and the required documentation is completed, including risk assessments being undertaken.

### **Staff training**

Designated staff members will be trained in how to administer an AAI, and the sequence of events to follow when doing so.

Designated staff members will be taught to:

- Recognise the range of signs and symptoms of severe allergic reactions.
- Respond appropriately to a request for help from another member of staff.
- Recognise when emergency action is necessary.
- Administer AAIs according to the manufacturer's instructions.
- Make appropriate records of allergic reactions.

The pupil's parents will be contacted immediately if a pupil suffers a mild-moderate allergic reaction, and if an AAI has been administered.

In the event that a pupil without a prescribed AAI, or who has not been medically diagnosed as being at risk of anaphylaxis, suffers an allergic reaction, a designated staff member will contact the emergency services and seek advice as to whether an AAI should be administered. An AAI will not be administered in these situations without contacting the emergency services.

For mild-moderate allergy symptoms, the AAI will usually be sufficient for the reaction; however, the pupil will be monitored closely to ensure the reaction does not progress into anaphylaxis.

Any used AAIs will be given to paramedics.

## **Asthma**

- Pupils with asthma are encouraged to carry their reliever inhaler as soon as their parent/carer and the school nurse agree they are mature enough.
- Reliever inhalers kept in the school's charge are held in the pupil's classroom in a designated storage area.
- Parents/carers must label their child's inhaler.
- Parents/carers must ensure that the school is provided with a labelled spare reliever inhaler, in case their child's inhaler runs out, is lost or forgotten.
- Members of school staff are not required to administer medicines to pupils (except in emergencies).
- Staff members will let pupils take their own medicines when they need to.

This policy is predominantly for the use of reliever inhalers. Preventer inhalers are very rarely required at school. However, if they are needed, staff members may need to remind pupils to bring them in if they consistently forget.

### **Emergency inhaler**

St Thomas' Primary Academy keeps a supply of salbutamol inhalers for use in emergencies when a pupil's own inhaler is not available. These are kept in the school office.

The emergency inhaler should only be used by pupils, for whom written parental consent has been received and who have been either diagnosed with asthma or prescribed an inhaler as reliever medication.

Parental consent for the use of an emergency inhaler should form part of any pupil with asthma's individual healthcare plan.

Emergency inhalers may be reused, provided that they have been properly cleaned after use.

In line with the school's Supporting Pupils with Medical Conditions Policy, appropriate support and training will be provided for relevant staff on the use of the emergency inhaler and administering the emergency inhaler.

Whenever the emergency inhaler is used, the incident must be recorded in the corresponding record of administration.

Whenever the emergency inhaler is used, the incident must also be recorded on the school's records, indicating where the attack took place, how much medication was given, and by whom, and the pupil's parents will be informed in writing.

### **Symptoms of an asthma attack**

- Members of school staff will look for the following symptoms of asthma attacks in pupils:
- Persistent coughing (when at rest)
- Shortness of breath (breathing fast and with effort)
- Wheezing
- Nasal flaring
- Complaints of tightness in the chest
- Being unusually quiet
- Difficulty speaking in full sentences
- Younger pupils may express feeling tight in the chest as a 'tummy ache'.

### **What to do when a child has an asthma attack**

In the event of an asthma attack, staff will follow the procedure outlined below: Keep calm and encourage pupils to do the same.

- Encourage the child to sit up and slightly forwards – **do not hug them or lie them down.**
- If necessary, call another member of staff to retrieve the emergency inhaler – do not leave the affected pupil unattended.
- If necessary, summon the assistance of a designated member of staff, to help administer an emergency inhaler.
- Ensure the child takes two puffs of their reliever inhaler (or the emergency inhaler) immediately, preferably through a spacer.
- Ensure tight clothing is loosened.
- Reassure the child.
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If there is no immediate improvement:

- Continue to ensure the child takes two puffs of their reliever inhaler every two minutes, until their systems improve, but only up to a **maximum of 10 puffs.**
- If there is no improvement before you have reached 10 puffs:
- Call 999 for an ambulance.
- If an ambulance does not arrive in 10 minutes, administer another 10 puffs of the reliever inhaler

Call 999 immediately if:

- The child is too breathless or exhausted to talk.
- The child is going blue.
- The child's lips have a blue/white tinge.

- The child has collapsed.
- You are in any doubt.

### **Important points to remember**

- Never leave a pupil having an asthma attack unattended.
- If the pupil does not have their inhaler, send another teacher or pupil to retrieve their spare inhaler.
- In an emergency situation, members of school staff are required to act like a 'prudent parent' – known as having a 'duty of care'.
- Reliever medicine is very safe. Do not be overly concerned a pupil may overdose.
- Send another pupil to get a teacher/adult if an ambulance needs to be called.
- Contact the pupil's parents/carers immediately after calling an ambulance.
- A member of staff should always accompany a pupil taken to hospital by ambulance and stay with them until their parent/carer arrives.
- Generally, staff will not take pupils to hospital in their own car. However, in some extreme situations St Thomas' Primary Academy. understands that it may be the best course of action.
- If a situation warrants a staff member taking a pupil to hospital in their car, another adult must accompany them.

### **Record keeping**

- At the beginning of each school year, or when a child joins St Thomas' Primary Academy., parents/carers are asked to inform the school if their child has any medical conditions, including asthma, on their enrolment form.
- The school keeps a record of all pupils with asthma, complete with medication requirement.
- Parents must inform the school of any changes to their child's condition or medication during the school year.

### **Exercise and physical activity**

Games, activities and sports are an essential part of school life for our pupils. All teachers know which children in their class have asthma and are aware of any safety requirements.

Outside suppliers of sports clubs and activities are provided with information about pupils with asthma taking part in the activity.

Pupils with asthma are encouraged to participate fully in PE lessons when they are able to do so. Pupils whose asthma is triggered by exercise will be allowed ample time to thoroughly warm up and cool down before and after the session.

During sports, activities and games, each pupil's labelled inhaler will be kept at the site of the activity.

Classroom teachers will follow the same guidelines as above during physical activities in the classroom.

### **Out-of-hours sport**

St Thomas' Primary Academy believes sport to be of great importance and utilises out-of-hours sports clubs to benefit pupils and increase the number of pupils involved in sport and exercise.

Pupils with asthma are encouraged to become involved in out-of-hours sport as much as possible and will never be excluded from participation.

Members of school staff or contracted suppliers will be aware of the needs of pupils with asthma during these activities and adhere to the guidelines outlined in this policy.

### **Pupils falling behind**

- If a pupil is falling behind in lessons because of their asthma, the class teacher will talk to the parents/carers to discuss how to prevent the child falling further behind and possible ways for the child to catch-up.
- If appropriate, the teacher will then talk to the school nurse and SENCO about the pupil's needs and possible interventions.
- The school recognises that it is possible for pupils with asthma to have special educational needs due to their asthma.