The Hills Academy

First Aid Policy

***Status**: statutory/expected/recommended (please highlight)*
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***Subject/Area Lead:** Mrs T Devine*
***Link Governor:** Ian Buck*

POLICY

Headteacher: Mrs. Moya Whitehead

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1. **Practice**

The Governors, Headteacher and staff of the The Hills Academy are committed to ensuring a safe and healthy environment and for providing safe equipment and procedures for all staff, pupils and visitors involved in school activities.

The Headteacher

The Headteacher is responsible for ensuring that all staff are aware of their responsibilities, have read this policy and understand their role with the children under their care. It is also their responsibility to ensure that there are sufficient staff competently trained to deliver the care of a child with an IHP (Individual Healthcare Plan) including in emergency situations. The Headteacher will make sure that training and information is available to staff as needed

Governors

The governing body are responsible for ensuring that this policy is implemented. They will ensure that all pupils with lifelong medical conditions are supported to enable them to receive a rounded education with access to all lessons and educational visits.

School Staff

All members of school staff should know what to do, or who to go to, to respond accordingly when a child with medical needs requires support. Staff must familiarise themselves with children that have medical needs of which they work with (care plans/class folder).

Training will be provided in connection with specific needs (where appropriate) and how to respond in an emergency situation.

Care plans are uploaded to the child's channel in the First Aid TEAMS.

Staff should familiarise themselves to these prior to working with the child

Parent/Carers

Parents have the prime responsibility for their child's health and should provide the school with information about their child's medical condition.

Upon admission to The Hills Academy, information regarding medical needs will be requested. A meeting will then be held, before the child begins at the school, to include parents and, where possible, health professionals to ensure transition is smooth. Parent/carers to be asked and expected to keep the school up to date with any changes to their child's condition.

2. **Training and Support**

In order to support children with medical needs, training will be identified and obtained for the relevant staff. This training will be sufficient to ensure staff are competent and confident in their role. Training will be refreshed as often as required by school needs and training plans. Staff will not give prescription medicines or undertake healthcare procedures

without the appropriate training.

A First Aider title does not constitute appropriate training in the support of children with medical conditions.

First aid certificates are usually valid for 3 years.

The school should arrange retraining before certificates expire and to then ensure training is refreshed. Training to be undertaken which is appropriate to the medical needs of the students at The Hills as needed.

In the school, the main duties of a first aider are to:

• Take charge when someone is injured or becomes ill.

• Give immediate help to casualties with common injuries or illnesses and those arising from injury at school.

• When necessary, ensure that an ambulance or other professional medical help is called.

• Enter details of injuries and treatment outcome on the appropriate record.

• Administer medication and keep factual records.

• Ensure the first aid equipment is kept to a full stock and within date.

The first aider/ appointed person should demonstrate:

• Reliability and good communication skills

• The ability to learn new skills depending on the needs of the school.

• Ability to remain calm amid potentially stressful and physically demanding emergency situations.

3. Provision

- Suitably stocked, up to date and labelled first-aid provisions are available in designated areas around the school. These include the First Aid Room and Key Stage 2 Staff toilet. Each year group also has a First Aid box for very minor injuries.
- A named person (Tracey Devine) who is trained as a designated First Aider to take charge of first-aid arrangements
- First Aid staff may be trained as a supportive measure and be confident to deputise in the absence of the main First Aider. This includes the covering of the Duty First Aider timetable which is available in the DFA calendar.
- Information for employees, detailing first-aid arrangements, the location of equipment, facilities and first aiders is available to staff, students, parents/carers.
- Risk assessment for activities and events are to be in place prior to these taking place. A first aid bag is available for all trips and events (this is kept in the residential cupboard) and a first aid trained member of staff to be sent (when not supplied by the event organizer) with the group.
- First-aid provision is available during the working day, while people are on school premises, and on off-site visits where a risk assessment has indicated this might be necessary (e.g., trips and sports activities)

Named First Aider Availability

• At all times during the school day there will be a **timetabled, named First Aider on duty**. This member of staff will be clearly identified on the Duty First Aid calendar

• Staff should first consider if they can manage something in class with the First Aid Box there (not head bumps) and when requiring urgent first aid support should **contact the Duty First Aider (DFA) immediately via Microsoft Teams**, who will attend the classroom or location without delay.

• This system ensures that a **qualified First Aider is always readily accessible across the school site** and enables rapid response to medical incidents without pupils needing to leave the classroom unnecessarily.

4. Procedure in case of illness, accident or injury.

• If a student seeks medical support, the member of staff will consider if it is a minor issue that can be managed with the class box. If not then the DFA will be called on TEAMs to come to the classroom. Where a situation is highly urgent the member of staff can open their door and call for help and/or send a red card to the school office

In case of an accident or injury at the school, the following procedures should be followed:

• The injured party should be seen by a qualified First Aider (it is a legal requirement that the accident is logged in the, class/mid-day supervisor/office, accident book).

• Parent/carers to be contacted as appropriate

• If the injuries cannot be treated at the school, arrangements should be made for transportation to hospital.

• All witnesses must make a statement as requested by appropriate staff to help clarify the cause of injury

- A First Aider will assess their condition. In the case of an injury, the appropriate symptomatic treatment may be offered until medical care by a qualified practitioner can be secured.
- All head bumps (however small) are to be seen by a second first aider and unless it is deemed to be very minor a phone call will be made to parents to inform them of the injury. All children who have head bumps will receive a bracelet to say that they have,

- The pupil will continue to be monitored by a staff member in an appropriate place. At this point parents would be advised if their child needs to be collected from school as soon as possible as they are too unwell to remain.
- For EYFS a comfortable, quiet space will be provided in a classroom where they can rest while being monitored by staff. At this point parents would be advised that their child needs to be collected from school as soon as possible as they are too unwell to remain.
- If the injury gives cause for concern then the parents will be advised to take the pupils to A&E or the walk in centre for further assessment and/or treatment. Once this advice has been given, the member of staff will hand over responsibility to the child's parent/carer who will then be responsible for liaising with hospital staff.
- In the event we cannot make contact with a parent or other carer, it may be necessary for the member of staff to stand in loco parentis and give permission for a medical procedure to be carried out. This would only happen in an emergency and as a last resort.
- The First Aider will keep a record of any first aid treatment given, to include
    - Date, time, and place of incident.
    - The name (and class) of the injured or ill person.
    - Details of the injury/ illness.
    - First aid administered
    - Actions after accident (example: went home, went back to class, went to hospital).
    - Name and signature of the first aider or person dealing with the incident.
    - A wrist band, along with the 'bump note' will be given to the child to show first aid has been given.

All records are kept for a minimum of 3 years. They may be analysed to look for trends and patterns, be used for reference in future first-aid needs assessments and be helpful for insurance and investigative purposes.

Each class shall have an accident book available within the room for immediate completion. The class teacher is responsible for replacing their book when complete. When the book is complete it needs to be taken to the school office for filing.

If the individual is under 16 and is to go to hospital, they must be accompanied by a member of staff who will remain with them until the parents or responsible adult arrives. Staff should inform parents/ carers of any accident or injury sustained by the child on the same day, or as soon as reasonably practicable, of any first aid treatment given.

If a member of staff or adult visitor feels unwell or sustains an injury

- A first aider will assess their condition. In the case of an injury, the appropriate symptomatic treatment may be offered until medical care by a qualified practitioner can be secured.

- Should the person be extremely unwell or requiring assistance their next of kin will be contacted (records held in school).
- If the injury gives cause for concern then transport arrangements will be made to the local A&E department for further assessment and/or treatment.

When dealing with blood injuries (or other bodily fluids), staff should:

- Put on gloves before contact.
- Pull off gloves so that they are inside out and the contaminated side is not exposed.
- Put gloves in a plastic bag and dispose of them in an offensive waste bin situated in the first aid room.
- Wash hands and other surfaces immediately after contact with blood or other body fluids.
- Contact the office/send a red card if blood or body fluids are spilt so that the area may be cleaned. The cleaning should be carried out with disposable cloths/towels and wearing rubber gloves.
- Immediately change blood stained clothes, handling them with rubber gloves.
- Take care to avoid accidental piercing of the skin when handling needles and other sharp equipment.
- Wash the exposed part immediately with soap and water if coming into direct contact with another person's blood or body fluids.
- Use clean, cold, tap water if the lips, tongue, eye or broken skin are involved and seek medical advice.

5. Storage and administration of medication

The Children and Families Act (2014) places a duty on the governing bodies of schools to ensure that pupils with medical conditions are properly supported and have access to a full education. As part of this duty schools must have arrangements in place to ensure that pupils who need medication during school hours can be supported to access and take this medication safely. The Governing Body has agreed that prescription medicines may be administered to children, at the specific request of the parent or guardian and in accordance with the procedures laid down in the Guidance.

Medicines will be administered by named members of staff. Medicines will be stored in a locked fridge in the staff room which is not accessible to children and in accordance with the guidance. Medicines brought in from home will only be

administered with consent from parent/carers and if it is in the original packing with prescription amount that was prescribed by a doctor. Paracetamol/ibuprofen will be administered by office staff/first aiders, only with consent from parent/carers, if a child becomes ill during the school day.

Students with asthma will need to have immediate access to their inhalers when they need them. Spare inhalers must be provided by parents and kept in an accessible safe space. Students with diabetes should be supported to manage their health needs. This should be discussed with child and parent as part of the individual health care plan. Students with epilepsy will need to be supported as part of the individual health care plan. Pre-loaded injection devices (EpiPen) should be provided by the parents in the correct container, labelled with their child's name and updated medicine, together with a signed, up-to-date care plan from the child's doctor. If the epipen is administered an ambulance should always be called.

The Hills Academy maintains additional emergency medical equipment to support rapid response to life-threatening incidents. This provision supplements individual healthcare plans and standard first aid procedures.

Emergency Adrenaline (Anaphylaxis)

The school maintains a KITT emergency adrenaline auto-injector kit in line with UK guidance on the use of spare adrenaline auto-injectors in schools (Human Medicines Regulations 2012 amendment 2017). The kit contains spare adrenaline auto-injectors for emergency use in the event of suspected anaphylaxis.

The emergency adrenaline kit may be used if a pupil is believed to be experiencing anaphylaxis and their prescribed device is not available, has malfunctioned, or a second dose is required before emergency services arrive. Staff trained in anaphylaxis response may administer the device and an ambulance will always be called immediately.

Anti-Choking Emergency Device

The school also maintains a LifeVac anti-choking device as an emergency intervention to be used if standard choking first aid procedures (back blows and abdominal thrusts) are unsuccessful. The device is intended as a last-resort measure and does not replace standard first aid practice.

Relevant staff receive training or familiarisation in the use of both the emergency adrenaline kit and the LifeVac device. These devices are stored in clearly identified locations and are included in the school's emergency response procedures.

The presence of this equipment forms part of the school's commitment to safeguarding pupils and ensuring a rapid response to medical emergencies.

Defibrilators

There are two Defibs on the premises (one per building). These should be ideally be used by a person trained to do so. In an emergency situation they can be used by following the recorded guidance on the machine.

6. Policy links

Health and Safety (First Aid) Regulations 1981
https://www.legislation.gov.uk/uksi/1981/917/regulation/3/made

Supporting pupils at school with medical conditions December 2015
https://publications.parliament.uk/pa/cm201415/cmselect/cmhealth/401/40106.htm

The Children and Families Act 2014 -
https://www.legislation.gov.uk/ukpga/2014/6/contents/enacted

Ensuring a good education for children who cannot attend school because of health needs -
https://assets.publishing.service.gov.uk/media/5fcf58458fa8f54d59e8b6ed/health_needs_guidance_accessible.pdf
The Children and Families Act 2014
https://www.legislation.gov.uk/ukpga/2014/6/contents/enacted

7. Amendments

Amendment Details	Made By	Date
Major rewrite	C Starr	Dec 23
Update	TDevine	March 26