

ALDERMAN RICHARD HALLAM PRIMARY SCHOOL

ARH – Educating a community of life-long learners

First Aid Policy

Policy Reviewed: November 2024

ALDERMAN RICHARD HALLAM PRIMARY SCHOOL

First Aid Policy



Our School Ethos

At Alderman Richard Hallam Primary School, the happiness and safety of our children is paramount. We are an inclusive school, welcoming all children from the whole community to a caring and happy environment where they can achieve to the very best of their abilities.

At A.R.H, we believe that all children are unique and we encourage them to develop their strengths and creativity as individuals. We emphasise the development of the whole learner, physically, intellectually, emotionally and ethically.

First Aid Provision

First Aid provision will be in accordance with guidelines from the Leicester City Council Health and Safety Department. Further guidance is available to all staff on the Schools' Extranet. The Headteacher is responsible for ensuring adequate first aid provision is provided. A First Aid risk assessment is in place to determine numbers of staff required to be compliant. The school has in place the appropriate number of First Aid at Work, Paediatric and Emergency First Aid at Work trained staff. Lead First Aiders (Mr Holder and Mrs Ondhia) are responsible for ensuring this is up to date.

The First Aiders are displayed throughout the school on posters to inform staff, children and visitors to the school who to contact with regards to a First Aid issue. Training is reviewed annually, to ensure the school has the appropriate amount of First Aid trained staff available.

Additionally, the school has trained Mental Health First Aiders. In the first instance, support for children should be sought from the SENDCo and support for staff should be sought from a member of the Senior Leadership Team.

The Medical Room

A Medical Room is available and staffed by First Aiders during morning break time and throughout the lunchtime periods. KS1 break times are covered by First Aid trained KS1 staff. If it is wet play at lunch time, then the midday supervisor is to administer any First Aid within the classroom or find a First Aid trained staff member. The staff work on a rota system, with at least one First Aid trained staff member available at all times.

When a child is brought to the Medical Room, they are attended to by a First Aider. The incident is recorded on CPOMS, with the class teacher being informed of the incident. Staff will follow the First aid flow chart (appendix A) regarding injuries and follow the guidance and information set out. A note may then given to the child to give to their parent or carer; these may be placed in the children's bags by the pupil and it is the responsibility of the parent or carer to check their child's bag daily for notes and information. If the incident is a more serious injury, then the parent or carer is informed by a phone call home. For major incidents, an SO2 form is filled in - please see Mr W Holder for help with this.

First Aid boxes are stored in the staff room, medical room, KS1 kitchen, dining hall and in corridors around the school building. There is a box in Little Grasshoppers as well. The lead First Aiders are responsible for monitoring and restocking these First Aid boxes. TAs are responsible for ensuring that kits in the corridors near them are suitably stocked, informing the lead First Aiders if items are required or have been used. Staff taking children offsite should ensure they have a First Aid box with them and children who are asthmatic have access to their inhaler. The medical needs of children must to be taken into account when off-site trips are organised to maximise inclusion. Offsite visits require an appropriate risk assessment

There is an AED available to use within the school. This is situated near the Staff room, opposite the staff toilets. Instructions on its use are provided in the box it is kept in. This is tested monthly as outlined by the manufacturer.

If a child has an accident/incident or complains of being unwell, they should be brought to the attention of a First Aider. This will be logged on CPOMS. If necessary, the parents or carers of the child will be informed. If parents or carers cannot be contacted, the medical bed will be made up and a member of staff will stay with the child and oversee their care. All minor incidents involving a head injury will result in either a phone call home or an electronic notification, as well as a note accompanying the child home.

In Nursery, any incidents that require first aid to be administered are logged on CPOMS and reported to parents and carers at the end of the session. On certain occasions, parents and carers will be called during the Nursery session to be made aware of an incident and will be given the opportunity to come and decide whether they would like to take their child home. In more serious cases, the lead First Aider may be called and could administer first aid.

Staff **will not** normally be required to administer medicines. Parents and carers should keep children at home until they are fully recovered. In some situations where children routinely take medication, it may be administered in school so long as full training is offered to staff on the administration of medication by a medical expert. Please see the 'Medicines in School Policy' for further information.

At the start of a new academic year, or when they take up the post, the previous teacher, lead First Aiders or Headteacher will apprise staff of any medical conditions, special conditions or allergies that pupils in their class have. If any staff become aware of pupils with new conditions arising throughout the year, these need to be relayed to the lead First Aiders and then passed on to relevant staff.

Staff should be aware of the Leicester City Health Authority's guidance on infectious diseases (Infections Control Guidelines and precautions for dealing with bodily fluids for staff in Schools – a copy is inside the Health & Safety Guidance Manual) and need to encourage children to follow basic hygiene procedures. Disposable gloves and aprons are available to all staff when dealing with sick or injured children. PPE is available to be worn if there is a need for it.

If a staff member is involved in an accident during school hours, the incident will be recorded in the accident book. More serious incidents will be recorded on an SO2 form, which is filled in online and sent to the LCC Health & Safety Executive directly; please see Mr Holder for further advice and a link to the SO2 form.

If there is any doubt about the severity of an injury and staff believe it may require immediate medical attention, they should immediately phone an ambulance and attempt to contact the parents or carers of the child concerned.

Policy Links

This policy is to be read in conjunction with the following other policies and documents:

- Medicines in School Policy
- Mental Health and Emotional Wellbeing Policies

Date for review: Autumn 2025

FIRST AID / HEAD BUMP ASSESSMENT

INJURY (IWI) NCIDENT WITHOUT

or vomiting) and the then the incident will there is no bruising, headache, nausea child appears well, swelling, abrasion, asymptomatic (i.e. mark of any kind, If a child is dizziness,

MINOR INJURY

A head injury that presents with mild immediate risk to the child's health. symptoms but does not cause significant distress or pose an

Symptoms:

Symptoms:

- Nausea (without vomiting).
 - Mild headache.
- Tender bruising or mild swelling of the scalp.

Vomiting or persistent nausea.

wound.

Increasing headache severity.

awake

remains coherent and responsive. Mild dizziness, but the child

be treated as a

Ĭ Ĭ

MAJOR INJURY

A head injury that involves more

SEVERE INJURY

A severe head injury will usually be indicated by Unconsciousness briefly staying awake, Seizure, Balance problems, Loss or longer, Difficulty in Slurred speech, Visual problems, Difficulty in following symptoms: understanding what one or more of the people are saying, immediate attention but does not lead to unconsciousness or further complications. Behavioural changes or confusion, pronounced symptoms and requires Larger swelling or a significant

arms/legs/feet, Pins & needles. Amnesia, of power in

Leakage of clear fluid from nose or ears, **Bruising around** but the child remains conscious and

ASSESS AND TREAT

Paper first aid form completed and teachers informed. Assessed by first aider and cold compress applied POMS report completed

ACTION

continue to monitor.

asymptomatic, and

Assess the child to

ACTION

confirm they are

Parent / Carer informed via SIMS contacted with a phone call and injury symptoms parents will be If pupil begins to display major with 'Head Bump' information further actions taken where necessary

symptoms for minor

injury. follow appropriate

actions.

If from observation

child show

Inform teacher.

ACTION

If pupil begins to display severe injury symptoms Parent / Carer informed with a phone call with 'Head Injury' information. If there is no answer follow further actions for severe injury where this is followed up with a message on SIMS. parents will be contacted necessary

ACTIONS

eyes/behind ears

- Suspect there is a neck injury if unconscious and do not move the child
 - CALL 999 FOR **AMBULANCE**
- Complete accident form Notify parent by phone

CPOMS/SO2)