

# MEADOW LANE INFANT SCHOOL

## FIRST AID PROCEDURES



<b>Last reviewed</b>	<b>March 2016</b>
<b>Review Cycle</b>	<b>1 Year</b>

### **First Aiders**

There are currently ten members of staff trained in Paediatric first aid. These are Mrs Allcoat, Mrs Atkinson, Mrs Moore, Miss Weller, Miss Somerfield, Mrs Ireland, Miss James, Miss Andrews, Mrs Green and Ms Ashmore. There will be some opportunity for more training to be undertaken in the near future. There are also many members of staff trained in Emergency First Aid (see list in staff room). Please refer any first aid concerns to these members of staff. For any minor injuries or accidents please follow the procedures outlined in this booklet.

Please check that the office has a copy of your First Aid Certificate, and notify Mrs Revill or Elaine when it is due to expire (two terms notice will be needed).

A list of Paediatric First Aiders is on display in the staff room.

Please ensure that people giving First Aid are rotated so that everyone is given equal opportunity to practise skills & procedures.

### **First Aid Boxes/Equipment**

First Aid boxes are stored in the medical room and at the Playleader first aid station. There are also baskets of general equipment including gloves, swabs, bump notes and record sheets stored in each classroom. The boxes are checked on a half termly basis by a Teaching assistant. Please let Elaine Allcoat know if stock is running low. Spare supplies are kept in the medical room. Ice packs are kept in the locked fridge in the medical room. (Locked because medicines are also stored there). Key is hanging on the red cupboard in the medical room. (Elaine has a spare) Ice pops for mouth injuries are in the fridge in the house.

Space blankets are also stored in the medical room along with any more specialised items.

Hand gel is also provided in each classroom for adult use.

GEL PACKS ARE NOW KEPT IN THE FRIDGE NOT THE FREEZER AS WE DO NOT WANT TO LOWER THE CHILDREN'S TEMPERATURE TOO FAR. Two will be kept in the freezer for any more serious injuries.

### **Medicines**

We can only give children medicines that have been prescribed by a doctor or trained person (dentist, nurse, pharmacist) and a member of staff must have seen proof of this (e.g. label on bottle, etc). It is important only to give the prescribed dose. We cannot administer non-prescribed medicine – Calpol, Piriton, etc in case of an allergic reaction. Parents/carers will fill in a consent form and this will be kept in the file in the medical room/staff room. Only a trained first aider or HT (see above) may administer medicine. Medicines will be stored in the fridge in the staffroom/medical room. Please check the dosage/consent form before administering medicine. The preferred option is always that the children have their medicine at home before or after school.

### **Procedures for minor accidents/incidents**

The main recommendations are as follows:

- No cotton wool is to be used to treat any injury because of the fibres entering the wound. It can be used with discretion if there is a large amount of blood.
- Always wear gloves when dealing with any bodily fluids.
- Treatment for nosebleeds – lean the casualty slightly forward, pinch the soft part of the nose (right at the tip) for 10 minutes/check degree of bleeding/repeat again. A damp cloth or towel on the back of the neck may lessen blood flow. If the bleeding will not stop a cold compress or ice pack on the back of the neck and wrists may help. Ring parents/999 if bleeding is severe or does not stop.
- Treatment of bites – animal or human – wash affected area with soap and water.
- Head bumps – apply cold compress/gel pack and monitor at regular intervals for any sleepy behaviour, sickness. Alert First aider if it is a serious bump.
- If the casualty is lying on the floor, place a coat or blanket underneath them before placing one over them to insulate them from the cold of the ground.
- Fractures – support the affected area with a cushion or sling. Inform First aider of Head teacher, contact parents.
- Sprains/strains – R est the injury

I ce – apply ice pack  
C ompression – apply firm bandage  
E levate the injury

- Asthma – in case there is difficulty in breathing, face the child to a wall leaning on it with arms outstretched to help open the chest. Keep the child calm and encourage calm even breathing. Inhalers are named and stored in the medical room. Follow the prescription from the doctor but the child should be able to administer the inhaler themselves. In an emergency give 1 puff per minute for 5 minutes. Then ring 999 or contact parents.
- Hyperventilation –cup hands over the nose and mouth. Take 10-15 breaths, then 10-15 normal breaths – repeat for 2-3 minutes.
- Infectious diseases – see sheets for symptoms.
- If a child loses a tooth contact parents or the emergency dentist. Put in milk to preserve the tooth.
- If a child is sick, give them a sick bucket and sit them on the blue bench. Contact parents immediately for the child to be taken home. The child should not return to school until at least 24 hours after the last time they were ill. Procedures for clearing up any mess can be found in the office and caretakers cupboard.
- If a member of staff has to transport a child to hospital the following must be observed.
  - The member of staff must be insured in their car – HT and DHT are currently insured.
  - Another member of staff should accompany the child.
  - Booster seat should be used if possible (one is kept in the medical room)
  - Contact with parents should be maintained.
  - This is a last resort – if in doubt we will ring 999.

Paediatric first aid handbook is kept in the medical room for information

### **Accident Recording and Reporting**

The yellow accident file is kept in the medical room. Please ensure that all accident sheets are kept in here and filled in correctly. Record any accident that needs any treatment at all.

- ALWAYS FILL IN WITH PEN.
- Record date, time, child's full name and a brief description of where and how the incident occurred. Also record any treatment administered.
- Mark on the class list at the front so that we can monitor frequency easily.
- For 'head bumps' give more detail if possible.
- Ensure that the child is given a 'bump note'. Give this to the teacher if necessary.
- Ensure that a full story is investigated, particularly for head bumps or if there is any suspicion that the child may have fainted.
- At lunchtime the play leaders will inform the class teachers of any incidents and hand over any 'bump notes'.
- If a parent is informed before the end of school they must sign the accident book and any action taken recorded – taken home, doctors, left at school, etc. Ensure that other children's names are covered up.
- A termly audit of accidents is carried out to monitor frequency of accidents for the children and any particular areas of risk.

### **Collection of Child due to Injury**

- If a child is to be collected due to injury please ensure that the office staff are fully aware of what/how the injury was sustained& the first aid procedures given.
- If a child is collected from school due to an injury whoever collects the child must be given the 'Bump' note and also asked to sign the medical book. If we have advised the parents to take the child to the doctor or hospital please make sure that is also recorded in the medical book alongside the parent signature.
- Cover the names above and below the child being collected to ensure confidentiality.
- If at any point you are concerned about an injury to any child please refer to Mrs Revill, Miss Hodkin or Mrs Allcoat.

### **SEN children**

Any specific medical needs for these children will be dealt with by the named staff. Training for these staff will be ongoing and the children will have a specific health care plan.