St John's Gosport C of E Primary School

First Aid Policy

Publication Date:	**April 2021**	**Headteacher:** **Chair of Governors:**	**Carolyn Wilkinson** **Jean Watson**
Reviewed:	**May 2026**	**School reviewed**	**Carolyn Wilkinson**

School Vision:
St John's Gosport C of E Primary School endeavours to provide a happy, safe, caring community rooted in Christian values; where everyone is valued and grows to their full potential.

John 10:10 – I came so that they may have life – life in all its fullness

Mission Statement:
At St John's Gosport C of E Primary School we aim to achieve our vision by providing a broad balanced curriculum and learning experiences that develop our children in body, mind and spirit; setting high standards for all, confident that we can achieve success. Thus ensuring that when our children leave us they are independent learners, who are well equipped to be responsible citizens of the future and reach their potential.

Safeguarding at St John's C of E Primary School is carried out in line with the statutory guidance in 'Keeping Children Safe in Education' published by the Department for Education.

First Aid at St John's Primary School

St John's Primary School will undertake to ensure compliance with relevant legislation with regard to the provision of first aid and all employees and to ensure best practice by extending the arrangements as far as is reasonably practicable to children and others who may also be affected by our activities.

Responsibility for first aid at St John's Primary School is held by Carolyn Wilkinson who is the responsible manager. All first aid provision is arranged and managed in accordance with Children's Services Safety Guidance Procedure for Schools SGP 08-07 (First Aid). All staff have a statutory obligation to follow and co- operate with the requirements of this policy.

This policy is to be used in conjunction with the 'Supporting Children with Medical Needs' policy.

AIMS & OBJECTIVES

Our first aid policy requirements will be achieved by:

- Carrying out a First Aid Assessment to determine the first aid provision requirements for our premises. It is our policy to ensure that the first aid needs assessment will be reviewed periodically or following any significant changes that affect first aid provision.
  The Children's Services First Aid Needs Assessment form (CSAF-002) will be used to produce the first aid assessment for the site.
- Ensuring that there are sufficient number of trained first aiders on duty and available for the number and risk on the premises in accordance with the First Aid Needs Assessment. This included emergency first aiders, qualified first aiders and paediatric first aiders.
- Ensuring that there are suitable and sufficient facilities and equipment available to administer first aid in accordance with the First Aid Needs Assessment.
- Ensuring the above provisions are clear and shared with all who may require them – children, staff and visitors.

FIRST AID TRAINING

The responsible manager will ensure that appropriate number of appointed persons, school first aid trained staff, emergency first aiders, qualified first aider and paediatric first aid trained staff are nominated, as identified by completion of the First Aid Needs Assessment, and that they are adequately trained to meet their statutory duties

Qualified First Aiders (Those completing the HSE approved 3 day first aid course)

At St John's Primary School there are 6 Qualified First Aiders in 'First Aid at Work' They will be responsible for administering first aid, in accordance with their training, to those that become injured or fall ill whilst at work or on the premises. There may also be other duties and responsibilities which are identified and delegated to the first aider (eg. First aid kit inspections)

Name	**Qualified First Aiders** First Aid at work	**Paediatric First Aid**	**Emergency First Aid**
Jennifer Taylor – EYFS	✓	✓	
Sharon Roberts	✓	✓	
Sharon White	✓	✓	
Kirsty Hiseman - EYFS	✓	✓	
Hannah Bonwick	✓	✓	
Jane Hudson	✓		
Nadine Smith		✓	
Nicki Shaw		✓	
Amber Whittingham		✓	
Fran Dickinson – EYFS		✓	
Angela Newton - EYFS		✓	
Jenna Roberts - EYFS		✓	
Gillian Ackerman - EYFS		✓	✓
Anna Gilbert - EYFS		✓	✓
Anthony Rowland – EYFS		✓	✓
Rachael Bartlett			✓
Elizabeth Blanksby			✓
Amanda Brooks			✓
Lucy Brown			✓
Karolina Kodrowska			✓
Shannan Pankhurst			✓
Hannah Voyzey			✓
Devin Wakefield			✓
Lisa Walters			✓
Rebecca Withers			✓
Sharon Knott			✓

All lunchtime assistants have emergency first aid training.

Paediatric First aid trained staff

At St John's Primary School there are 14 paediatric first aid trained persons.

All adults working in the EYFS unit are paediatric first aid trained to meet the Early Years Foundation Stage (EYFS) statutory obligations for provision of first aid to those children 5 years old and under.

Person overseeing first aid in St John's Primary School

Mrs Jennifer Taylor oversees the first aid provision in school. This entails providing cover for daily first aid, reordering first aid stock, making provision for children with medical conditions, recording daily accidents and incidents on the computer and checking all first aid bags.

FIRST AID PROVISION

Our first aid needs Assessment identified the following first aid kit requirements ;

Each class has a small first aid bag and vomit bowls usually kept under the sink. Year R and Year 1 have medicine cabinets on the wall in the centre area.

There is a medical room designated for first aid located in the junior corridor which has a fobbed door for safety. In there is:

- A locked drugs cupboard on the wall for tablets and liquid medication.
- A locked fridge for ice packs and medication, emergency
- Information files and pictures of individual children's care plans.
- Stock cupboard with provisions for first aid.
- Letters, stickers and recording material for accidents.

There are 6 first aid bags containing first aid requirement for using off site. These are green and found in the staff room or in the medical room under the sink.

Year R has also got a stock of plasters and other first aid provision for accidents.

In the fridge in the medical room are ice packs which are also in the fridge in the staff room

Each classroom has a grab asthma bag with individual children's asthma inhalers.

Emergency asthma inhalers and disposable spacers in the treatment room.

EPI- PENS

Children that require Epi pens have their pens located in a designated area within their classroom. A picture of the child and where the pen is kept is displayed on the wall and the cupboard where the epi pen is kept in their classroom. A photo and information is also display outside the classroom, in the dining room, main office and medical room.

Each child has an individual care plan signed by their parents on the treatment to be given.

Yearly epi pen training is given to staff .

All staff receive printed out instructions on all medical cases needing emergency first aid.

Asthma inhalers

Children have their inhaler in a designated area within their classrooms. Each classroom has a grab asthma bag with individual children's asthma inhalers.

Each classroom has a red folder with the inhaler containing the individual child's care plan. A yellow folder containing information on all children in school with asthma is kept in the medical room.

All staff have had information on how to care for a child with asthma. Stickers are given for the use of an emergency inhaler or for when a child has used their own inhaler.

Emergency inhalers are available for children whose parents have given permission .

These inhalers are kept in the cupboard above the files in the medical room.

Each child has an individual care plan signed by their parents on the treatment to be given

Communicable Diseases

The school office should be informed immediately by parents if a child has been diagnosed with a communicable disease such as Chicken Pox or Measles.
The school will then inform any Parents of children who may have been in contact with this child.
The school follows government guidelines to protect children and staff against viruses such as Covid 19

Return to school after Illness

If a child is ill/unwell he/she should remain away from school until able to fully participate in the school day. In particular if he/she has had diarrhoea or vomiting within the last 24 hour period or if the child has had a higher than normal temperature, they should remain away from school until they have had 48 hours symptom free. (see Appendix 1. Parent Grid)

Emergency arrangements

Upon being summoned in the event of an accident, the first aider is to take charge of the first aid administration/emergency treatment commensurate with their training. Following their assessment of the injured person, they are to administer appropriate first aid and make a balanced judgement as to whether there is a requirement to call an ambulance.

The first aider is to always call an ambulance on the following occasions:

- In the event of a serious injury
- In the event of any significant head injury
- In the event of a period of unconsciousness
- Whenever there is the possibility of a fracture or where this is suspected
- Whenever the first aider is unsure of the severity of the injuries
- Whenever the first aider is unsure of the correct treatment

In the event of an accident involving a child, where appropriate, it is our policy to always notify parents of their child's accident if it:

- is considered to be a serious (or more than minor) injury
- requires first aid treatment
- requires attendance at hospital
- may warrant a visit to a GP

Contacting Parents

Our procedure for notifying parents will be to use all telephone numbers available to contact them and leave a message should the parents not be contactable.

In the event that parents or their named contacts cannot be contacted and a message has been left, our policy will be to continue to attempt to make contact with the parents every hour. A text will also be sent asking them to contact the school immediately. In the interim, we will ensure that the qualified first aider or another member of staff remains with the child until the parents can be contacted and arrive (as required).

In the event that the child requires hospital treatment and the parents cannot be contacted prior to attendance, the qualified first aider or another member of staff will accompany the child to hospital and remain with them until the parents can be contacted and arrive at the hospital.

Minor injuries, bumps or grazes

Incidents where children with a minor injury who only require a plaster/ antiseptic wipe to be administered, will on logged in the Medical Book in the Medical Room. Comprehensive accident forms will only be completed for incidents where considerable first aid has been administered, head bumps or for an injury that cannot be treated with just a plaster or antiseptic wipe.

Bumps to the head

During the school day **all** bumps to the head will automatically be directed to a first aider and/or Mrs Jennifer Taylor. Children with visible trauma to the head will immediately receive an ice pack and the first aider will assess the child. The school will send a text message to any and all children who receive a bumped head during the school day. If a child has a secondary symptom, such as dizziness, sickness, a large bruise/cut, parents will be called and asked to collect the child. All children who bump their head will be given a wristband to indicate they have had a head injury that day. This is so all staff know this child has had an injury.

Records

All accidents requiring significant first aid treatment or bumps to the head are to be recorded with (at least) the following information:

- Name of injured person
- Name of the qualified/emergency/school/paediatric first aider or appointed person
- Date of the accident
- Type of accident (eg. bump on head etc)
- Treatment provided and action taken

These forms must be copied and sent home. The class teacher will be made aware. Information will be kept electronically for data protection and legal requirements

Emergency Health Arrangements for Staff

It is the responsibility of individual staff members to inform a senior member of staff that they have a medical condition, which may or may not require emergency arrangements to be put in place.

It is recommended that all staff notify the Headteacher of any medical condition so that a risk assessment can be made and appropriate support put in place.

Should emergency arrangements need to be carried out for an identified member of staff, the procedure that will be followed will be stated in the most recent risk assessment for that member of staff.

Once a risk assessment is completed and emergency procedures/plans are documented the following members of staff will be sent a copy of the risk assessment so they are aware of the procedures to follow:

- Members of the SLT

- The designated trained member of the Management and Administration of Medicines in Schools. This school has 2 trained staff, Hannah Bonwick and Donna Muston
    - The members of staff who are Qualified First Aiders (those who have completed the HSE First Aid at Work 3 day course)
    - Any other staff member named in the risk assessment that minimises the risk associated with health condition.

All health and medical conditions will remain private and confidential to the individual. Staff members that are privy to private and confidential health information must ensure the information remains private and confidential and that they abide by Section 7 – Confidentiality and Disclosure of Information in the staff Code of Conduct

Sudden Illness

Should a member of staff be taken ill suddenly or injured, a first aider will be summoned and should follow the 'Emergency Arrangements' procedure.

Should the member of staff require significant treatment (i.e. an ambulance is required) every attempt will be made to reach someone listed on the emergency contact list.

Chicken Pox	Rash begins as small, red, flat spots that develop into itchy fluid-filled blisters		Pharmacy	Back to school 5 days after on-set of the rash
Common Cold	Runny nose, sneezing, sore throat		Pharmacy	Ensure good hand hygiene
Conjunctivitis	Teary, red, itchy, painful eye(s)		Pharmacy	Try not to touch eye to avoid spreading
Flu	Fever, cough, sneezing, runny nose, headache body aches and pain, exhaustion, sore throat		Pharmacy	Ensure good hand hygiene
German measles	Fever, tiredness. Raised, red, rash that starts on the face and spreads downwards.		G.P.	Back to school 6 days from on-set of rash
Glandular fever	high temperature, sore throat; usually more painful than any before and swollen glands		G.P.	Child needs to be physically able to concentrate
Hand, foot & mouth disease	Fever, sore throat, headache, small painful blisters inside the mouth on tongue and gums (may appear on hands and feet)		G.P.	Only need to stay off if feeling too ill for school
Head lice	Itchy scalp (may be worse at night)		Pharmacy	
Impetigo	Clusters of red bumps or blisters surrounded by area of redness		G.P.	Back to school when lesions crust or 48 hours after start of antibiotics
Measles	Fever, cough, runny nose, and watery inflamed eyes. Small red spots with white or bluish white centres in the mouth, red, blotchy rash		G.P.	Back to school 4 days from on-set of rash
Ringworm	Red ring shaped rash, may be itchy rash may be dry and scaly or wet and crusty		G.P.	
Scabies	Intense itching, pimple – like rash Itching and rash may be all over the body but commonly between the fingers, wrists, elbows, arm		G.P.	Back to school after first treatment
Shingles	Pain, itching, or tingling along the affected nerve pathway. Blister-type rash		G.P.	Only stay off school if rash is weeping and cannot be covered
Sickness bug/ diarrhoea	Stomach cramps, nausea, vomiting and diarrhoea		Pharmacy	See GP if symptoms persist after 48 hours
Threadworms	Intense itchiness around anus		Pharmacy	Ensure good hand hygiene
Tonsilitis	Intense Sore throat		Pharmacy	See GP if temperature lasts more than 48 hours or cannot swallow
Whooping cough	Violent coughing, over and over, until child inhales with "whooping" sound to get air into lungs		G.P.	Back to school after 5 days of antibiotics or 21 days from onset of illness