First Aid Policy

Approved by: Governing body	**Date: 01.11.2025**
Last reviewed on: November 2025	
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Wyborne Primary School
First Aid Policy

The health and safety of all children at Wyborne Primary School is of the highest importance to all staff. This policy explains the practices in place to address the health needs of the children, which may be as a result of accidents or medical conditions

The school has fully qualified first aiders, including paediatric first aiders, who are responsible for dealing with any first aid matters as well as staff trained in administering epipens and staff trained in epilepsy/the administration of Buccal Midazolam.

First aid training is carried out in line with current Health and Safety recommendations and all staff follow guidance stated in Medical Alert Handbook provided by Oxleas NHS School Health Team.

First aid equipment is located in the first aid cupboard in the Medical Room, Nursery, Reception Classroom, school kitchen and dining centre.

Cuts are cleaned using, where appropriate, running water and/or alcohol wipes, and if needed, plasters are available.

Gloves are worn by staff when dealing with any bodily fluids and these are located next to the plasters and wipes.

Ice packs are located in the fridges and can be used to reduce the swelling for bumps and suspected strains and sprains. If ice packs are used these are first wrapped in a paper towel to prevent contact with the skin.

All medical waste is disposed of in a medical disposal unit in the medical room.

Dealing with bodily fluids – blood etc

Aims

- To administer first aid, cleaning etc for the individual
- To protect the individual and others from further risk of infection
- To protect the individual administering first aid, cleaning etc

Procedure to adopt when dealing with blood, body fluids excreta, sputum and vomit:

- Isolate the area
- Always use disposable gloves and plastic apron (located in Medical Room_ NEVER TOUCH BODILY FLUIDS WITH YOUR BARE HANDS
- Clean spillage area with diluted bleach in ratio of 1:10
- Use red bucket and mop, (located in each building)
- Double bag all materials used and dispose of in outside medical container
- Blood loss – if possible use a wad of tissues to hold against the wound whilst you put on disposable gloves
- Always wash hands after taking disposable gloves off

Small first aid packs are available for off site visits. All teachers taking children out of school for a trip or residential visit are equipped with a first aid pack and will carry medication needed for individual children.

The first aid equipment is regularly checked and managed by Mrs Polly Shilton.

All accidents are recorded on the school's management information system. An injury slip is sent home for all injuries. In the event of a serious injury or health concern a telephone call will be made to the parent/ carer in accordance with internal procedures and if unavailable and necessary an ambulance will be called (in accordance with Medical Alert Handbook) and the child will then be escorted to hospital by a member of staff should the ambulance request this.
Any head injuries/ bumps are recorded and a 'head bump' slip is sent home. Text messages are sent to the first contact given on child's registration papers to inform them that the child has had a head bump. When

the bump/ injury causes concern, a telephone call is made immediately to the parent/ carer and if unavailable an ambulance will be called as above.

Medical Information about a child is gathered through the data collection sheets, which are issued annually, as well as through information provided by a parent or carer.

All relevant information regarding medical conditions are passed to the class teacher.

Records about those children with particular medical needs and/ or allergies are kept in the Staffroom, Medical Room and Dining Centre.

Food allergies are listed and located (as above). The school cook is notified with food allergies. Photographs are provided to help staff identify, and therefore provide, the appropriate care for specified children.

Wyborne Primary School will not discriminate against pupils with medical needs.

In certain circumstances, it may be necessary to have in place an individual Health Care Plan. This will help staff identify the necessary safety measures to help support young people with medical needs and ensure that they, and others, are not put at risk. These plans will be drawn up in consultation with parents/ carers and relevant health professionals.

They will include the following:

- Details of the young persons' condition
- Special requirements ie dietary needs
- Any side effects of the medicines
- What constitutes an emergency
- What action to take in an emergency (completion of card re: use of Epipen -
- Who to contact in an emergency
- The role staff can play

Administration of medicines

Ideally, it is preferable that parents/ carers, or their nominee, administer medicines to their children. However, this may not be appropriate. In such cases a request must be made for medicine to be administered to the young person at school using the appropriate green form (see Medication in School Policy). Clear written instructions for the administering of medication must be given. This form must immediately be conveyed to the class teacher. However, if the form is given directly to the class teacher this must also be given to the office for records. Class teachers must let their respective phase leader know that they have received a medication request. Phase leaders should sign the form prior to returning it to the office to be held centrally.

Only prescribed medication that needs to be taken 4 times a day will be administered.

Medicines that have been prescribed by a doctor, dentist or nurse should always be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions for administration. **We will not accept medicines that have been taken out of the container as originally dispensed nor make changes to dosage on parents' instructions.**

It is the parents/ carers responsibility to ensure asthma pumps, epipens and all other prescribed medication are replaced when necessary and medication is not out of date.

<u>Related Policies</u>

Health and Safety
Medication in School Policy
Intimate Care Policy
Education Visits Policy
Asthma Policy
Anaphylaxis Reaction (Epipen) Policy
Policy on How to Manage an Epileptic Fit

Appendix A NHS Advice for common illnesses – a quick reference

https://www.nhs.uk/live-well/healthy-body/is-my-child-too-ill-for-school/#:~:text=Vomiting%20and%20diarrhoea,after%20their%20symptoms%20have%20gone.

Is my child too ill for school?-Healthy body

Secondary navigation

- Body
- Head
- Seasonal health
- Self-help tips

It can be tricky deciding whether or not to keep your child off school, nursery or playgroup when they're unwell.

But there are government guidelines for schools and nurseries that say when children should be kept off school and when they shouldn't.

If you do keep your child at home, it's important to phone the school or nursery on the first day. Let them know that they won't be in and give them the reason.

If your child is well enough to go to school but has an infection that could be passed on, such as a cold sore or head lice, let their teacher know.

Coughs and colds

It's fine to send your child to school with a minor cough or cold. But if they have a fever, keep them off school until the fever goes.

Encourage your child to throw away any used tissues and to wash their hands regularly.

Coronavirus

A new, continuous cough could be coronavirus (COVID-19).

Get advice about coronavirus symptoms and what to do

Fever

If your child has a fever, keep them off school until the fever goes away.

Coronavirus

A high temperature, where your child feels hot to touch on their chest or back could be coronavirus (COVID-19).

Get advice about coronavirus symptoms and what to do

Chickenpox

If your child has chickenpox, keep them off school until all the spots have crusted over.

This is usually about 5 days after the spots first appeared.

Cold sores

There's no need to keep your child off school if they have a cold sore.

Encourage them not to touch the blister or kiss anyone while they have the cold sore, or to share things like cups and towels.

Conjunctivitis

You don't need to keep your child away from school if they have conjunctivitis.

Do get advice from your pharmacist. Encourage your child not to rub their eyes and to wash their hands regularly.

Ear infection

If your child has an ear infection and a fever or severe earache, keep them off school until they're feeling better or their fever goes away.

Hand, foot and mouth disease

If your child has hand, foot and mouth disease but seems well enough to go to school, there's no need to keep them off.

Encourage your child to throw away any used tissues straight away and to wash their hands regularly.

Head lice and nits

There's no need to keep your child off school if they have head lice.

See how to get rid of them.

Impetigo

If your child has impetigo, they'll need antibiotic treatment from the GP.

Keep them off school until all the sores have crusted over and healed, or for 48 hours after they start antibiotic treatment.

Encourage your child to wash their hands regularly and not to share towels, cups and so on with other children at school.

Ringworm

If your child has ringworm, see your pharmacist unless it's on their scalp, in which case you should see the GP.

It's fine for your child to go to school once they have started treatment.

Scarlet fever

If your child has scarlet fever, they'll need treatment with antibiotics from the GP. Otherwise they'll be infectious for 2 to 3 weeks.

Your child can go back to school 24 hours after starting antibiotics.

Slapped cheek syndrome (fifth disease)

You don't need to keep your child off school if they have slapped cheek syndrome because once the rash appears, they're no longer infectious.

If you suspect your child has slapped cheek syndrome, take them to the GP and let their school know if they're diagnosed with it.

Sore throat

You can still send your child to school if they have a sore throat. But if they also have a fever, they should stay at home until it goes away.

Threadworms

You don't need to keep your child off school if they have threadworms.

Speak to your pharmacist, who can recommend a treatment.

Vomiting and diarrhoea

Children with diarrhoea or vomiting should stay away from school for 2 days after their symptoms have gone.

Page last reviewed: 13 February 2018
Next review due: 13 February 2021

UK Health Security Agency

NHS

Should I keep my child off school?

Yes

	Until...
Chickenpox	at least 5 days from the onset of the rash and until all blisters have crusted over
Diarrhoea and Vomiting	48 hours after their last episode
Cold and Flu-like illness (including COVID-19)	they no longer have a high temperature and feel well enough to attend. Follow the national guidance if they've tested positive for COVID-19.
Impetigo	their sores have crusted and healed, or 48 hours after they started antibiotics
Measles	4 days after the rash first appeared
Mumps	5 days after the swelling started
Scabies	they've had their first treatment
Scarlet Fever	24 hours after they started taking antibiotics
Whooping Cough	48 hours after they started taking antibiotics

No

but make sure you let their school or nursery know about...

Hand, foot and mouth	Glandular fever
Head lice	Tonsillitis
Threadworms	Slapped cheek

SCAN ME

Advice and guidance

To find out more, **search for health protection in schools** or scan the QR code or visit https://qrco.de/minfec.