

MANSTON PRIMARY SCHOOL



FIRST AID AND ADMINISTERING MEDICATION POLICY

Manston Primary is committed to safeguarding and promoting the well-being of all children and expects our staff and volunteers to share this commitment.

Policy reviewed by: James Clay and Kirsty Thorpe

Approved by: Staffing and Resources Committee

Date: January 2024 Review Date: January 2026



General Statement

The Education and Inspection Act 2006 places a duty on schools to promote the well-being of pupils, which encompasses health needs. Every school governing body and headteacher are responsible for developing and reviewing their local medicine and medical support policy and ensuring its implementation. The school staffing structure should include health care personnel or draw on health professionals in the community. The school must ensure that all staff are aware of medical issues, policy, procedures and how to respond in an emergency and that training is provided. School policy should be clear on the role of particular groups of staff. All staff should be aware of a pupil's right to dignity and privacy and the school's confidentiality rules. Children and young people that need medical support may be vulnerable to bullying. Staff should be watchful and report any signs of abuse in accordance with the behaviour policy.

The Governing Body and the Head Teacher accept their delegated responsibilities under the Health and Safety (First Aid) Regulations 1981 and acknowledge the importance of providing first aid for employees, pupils and visitors within the school.

The Governing Body will provide support, advice and guidance on matters of first aid to the school based on the principles of best practice and governance, so far as is reasonably practicable. The Head Teacher will implement procedures for the reporting of accidents and recognise the school's statutory duty to comply with the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR).

The provision of first aid in the school will be in accordance with local authority procedures and standards for Accidents and Incidents (Adverse Events).

The aim of first aid is to reduce the effects of injury or illness suffered at work. Sufficient first aid personnel and facilities will be available to:

- Give immediate assistance to casualties with both common injuries or illness which are likely to arise from specific hazards at work;
- Call for an ambulance or other professional help.

The minimum first aid provision in school will be:

- Suitability stocked first aid containers placed in various locations across the School;
- An appointed person(s) to take charge of first aid arrangements;
- Information for employees on first aid arrangements;
- A procedure for managing accidents.

Additional first aid provision will be determined as appropriate by relevant staff members including the head teacher, safeguarding and welfare officer and/or SENDCo.

This policy will be reviewed bi-annually and relevant agencies and professionals may be contacted for advice on any recommendations for improvement.

Equality Impact Assessment: At all stages within this policy and procedure and in accordance with the Equality Act 2010, provision will be made for any reasonable adjustments to accommodate the needs of individuals.

1. Statement of first aid organisation

Health and safety legislation places duties on employers for the health and safety of their employees and anyone else on their premises. At Manston Primary School, this includes responsibility for the Head Teacher and all staff, pupils and visitors (including contractors).

The governing body is responsible under the Health and Safety at Work Act 1974 (HSWA) for making sure that the school has a health and safety policy. This includes arrangements for first aid at the school, based on a risk assessment. It covers the following areas:

- Number of First Aiders/appointed persons;
- Numbers and locations of first aid containers;
- Arrangements for off-site activities/trips;
- Out of School and community use arrangements e.g. School sports matches, parents' evenings and other School events.

2. Duties

2.1.The Head Teacher

The Head Teacher is responsible for ensuring that, so far as is reasonably practicable:

- All accidents are reported, recorded and, where appropriate, investigated
- All occasions when first aid is administered to employees, pupils and visitors are recorded
- Each School's premises and vehicles are equipped with apparatus and materials to carry out first aid treatment.
- Arrangements are made to provide training to employees and records are maintained of that training and reviewed bi-annually.
- A procedure for managing accidents in each School which require first aid treatment is established.
- Employees are provided with information regarding the arrangements for first aid

2.2.The Governing Body

The Governing Body will, provide support, advice and guidance on matters relating to this policy based on the principles of good governance, so far as is reasonably practicable.

They will approve a First Aid Policy:

- Review the policy bi-annually;
- Ensure that the Head Teacher has the resources to implement the policy;
- Monitor the implementation of the policy.

2.3.Employees

All employees are required to do the following, so far as is reasonably practicable:

- Comply with their employer's arrangements for first aid;

- Report any adverse events which could give rise to (or have resulted in) an accident.

Teachers' conditions of employment do not include giving first aid, although any member of staff may volunteer to undertake these tasks. Teachers and other staff in charge of pupils are expected to use their best endeavours at all times, particularly in emergencies, to secure the welfare of pupils at the School, in the same way that parents might be expected to act towards their children. In general, the consequences of taking no action are likely to be more serious than those of trying to assist in an emergency.

2.4.Designated First Aid Leads

The first aid lead as designated by the Head Teacher is responsible for line managing/ supporting those staff members who may be the agreed school's agreed qualified First Aiders.

In addition, the First Aid Lead will, so far as is reasonably practicable:

- Ensure that arrangements are in place for staffing any agreed designated medical rooms along with site specific medical provisions to cover the School day;
- Ensure that all staff members are complying with the requirements of the First Aid Policy and carrying out their duties and responsibilities effectively;
- Keep records in relation to training in First Aid (including copies of certificates) and rearrange training as required.

2.5.Qualified First Aiders

The Qualified First Aiders' responsibilities are to ensure, so far as is reasonably practicable, that first aid provision is available throughout the School day.

Their main duties include:

- Administering initial first aid to pupils as required and refer them to hospital where necessary.
- Arrange transport for pupils and liaise with parents as appropriate.
- Liaise with appropriate staff with regard to medical care plans for pupils.
- Monitor and maintain supplies of medical resources and ensure that first aid boxes are compliant with health and safety regulations.
- Complete statutory documentation regarding Health and Safety/accident forms/medical returns as appropriate.

3. Arrangements for First Aid

3.1.Materials, equipment & facilities

The School will provide materials, equipment and facilities as set out below.

First Aid Boxes/Kits

There are currently 4 first aid boxes placed at various locations around the School site.

First aid boxes/kits contain the following items:

ITEM (Guidance)	FIRST AID BOXES (Guidance)	TRAVELLING FIRST AID KITS (Guidance)
Guidance card/leaflet on first aid	1	1
Individually wrapped sterile adhesive dressings (assorted sizes)	20	6
Sterile eye pads, with attachment	2	
Individually wrapped triangular bandages	6	2
Safety Pins	6	2
Medium sized individually wrapped sterile un-medicated wound dressings (approx. 12cm x 12cm)	6	
Large sterile individually wrapped un-medicated wound dressings (approx. 18cm x 18cm)	2	1
Individually wrapped moist cleaning wipes	Small packet	Small packet
Disposable gloves for wear by any personnel handling blood, vomit, excreta, etc.	1 pack	2 pairs

First aid containers will be:

- Maintained in a good condition;
- Suitable for the purpose contents in good condition;
- Readily available for use
- Prominently marked as a first aid container.

In addition, the following items will be provided in the medical room, or other agreed room / area of each School:

- Disposable drying materials.
- Plastic bowls – one for cleaning wounds and one for cleaning vomit, etc.
- Disinfectant/household bleach or similarly effective solution – one part to ten parts water for cleaning sinks and bowls and soiled surfaces.
- Yellow biohazard bags for disposing of clinical waste.
- A small supply of paracetamol is recommended for dysmenorrhoea (period pains) and will be securely kept and issued to pupils as appropriate and necessary by a person designated by the (Head Teacher). Records will be kept of all paracetamol issued (how many tablets, to whom, when and why).

First Aid Room

Medical stock is rotated and replenished regularly by a duly appointed member of staff. A file containing medical conditions and allergies of all children in school is located within the first aid room. Staff to refer to this before commencing treatment. This is kept up-to-date by the Safeguarding and Welfare Officer.

The availability and contents of the first aid boxes and other medical supplies will be checked on a regular basis by An Joul and Kelly Turnbull. They will also be responsible for all record-keeping including:

- Keeping first aid signage up to date;
- Maintaining an inventory of the location of first aid boxes/supplies;
- Recording when first aid boxes were checked for sufficient and in-date supplies.

The Head Teacher will ensure that first aiders are qualified to carry out their duties and that certificates are in-date. Further training will be arranged as and when required

In compliance with The Education (School Premises) Regulations 1996, the Head Teacher will ensure that a room is made available for medical treatment. This facility contains the following and should be readily available for use:

- A means of communication, e.g. telephone
- Sink with running hot and cold water;
- Drinking water (if not available on mains tap) and disposable cups;
- Paper towels;
- Smooth-topped working surfaces;
- A range of first aid equipment (to the standard required in first aid boxes) and proper storage;
- A chair;
- A couch or bed (with waterproof cover), clean pillow and blankets;
- Soap;
- Clean protective garments for first aiders;
- Suitable refuse container (foot operated), lined with a clinical waste bag;
- An appropriate record-keeping facility;

The first aider must wash/gel hands and wear disposable gloves (as appropriate) before attending to any injury. Treatment given should be recorded on the first aid slips and a tear off copy is given to children or staff in the child's class (dependent on choice of staff member administering first aid) and are to go home to parents and carers. The carbon copy is then stored for 3 years in line with RIDDOR regulations.

In the case of more serious injuries, parents must be immediately informed and any follow up treatment given out of school will be logged on CPOMS.

Each morning, ice-packs will be placed in the designated cool bag in the first aid room for staff use during the day. Back up ice-packs will be kept in the designated refrigerator next to the Milk and Fruit refrigerator in the KS1 corridor. If supplies are running out after morning/lunch break, staff will replenish from the back up refrigerator. The member of staff should ensure their hands are washed or gelled before opening the fridge to avoid cross infection.

After use, ice-packs must be dropped into the red collection box in the first aid room. Children can take responsibility to return them to the collection box. These will then be sterilised every night, ready to be re-stocked into the freezer and re-used.

Staff finding any ice-packs lying around school should drop them into the collection box and follow the infection control procedure above. Each morning the used ice-packs will be collected from the first aid room by An Joul and the cool box will be replenished from the designated refrigerator and placed into the first aid room.

Ice packs will be regularly sterilised by An Joul.

When to use an ice-pack:

Bumped Head - First aider should question/assess the child as follows:

- Did they fall and hit their head on a hard surface? (grass vs playground)
- Was their head hit with an object such as a bat?
- Did they clash with another child?
- Did they hit their head by running into an object? (goalposts/wall/fence)
- Do they have any visual complaints, headache – have they vomited? In this circumstance, staff need to contact parents and emergency services.

When examining the child, it is most important to ascertain if there is a lump and if it is forming and visible – protruding outward, or denting inwards. Any bleeding from a wound must be stemmed before making an accurate judgement.

- Apply ice-pack to protruding lump
- Doctor/ambulance services to be contacted immediately if denting inwards. DO NOT APPLY AN ICE-PACK. Child could have a skull fracture or a bleed below the skull and icepack will be detrimental to treatment.
- In the event of a head injury with no further repercussions or concerns, school will send a text message to inform parents and carers of this
- If an injury causes staff great concern, parents/carers need to be contacted. If an ambulance has been called and parent/carer unobtainable, school will use the text messaging service. Head teacher or other nominated member of staff will accompany child in ambulance, if parent does not arrive in time.

Ice-pack for other injuries to body and limbs:-

- If injury swelling and visible, apply ice-pack
- If skin broken and swelling, clean and protect with a dressing and then apply ice-pack
- If no swelling visible – do not apply ice-pack
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3.2.Appointment of First Aid Personnel

First Aiders

At Manston Primary School the following staff members are paediatric first aiders are as follows:

Name	
Claire Broadley	Emma Fallon
An Joul	Danielle Roberts
Tifa Hall	Chloe Smith

All other staff members have had appropriate First Aid Training, and this is refreshed every 3 years.

Unless first aid cover is part of a staff member's contract of employment, those who agree to become first aiders do so on a voluntary basis.

In determining who should be trained in first aid, the Head Teacher will consider each individual against the following criteria:

- Importantly – having the right staff members in the right places at the right time. I.e. an even spread across the full School day to cover all curricular and extra-curricular activities.
- Communication skills;
- Aptitude and ability to absorb new knowledge and learn new skills;
- Ability to cope with stressful and physically demanding emergency procedures;
- Availability to leave normal duties to go immediately to an emergency;

Appointed Persons

The appointed person/s will hold a first aid certificate.

The Head Teacher will appoint a member of staff to be the appointed person. The duties of the appointed person are to:

- Take charge when someone is injured or becomes ill;
- Look after the first aid equipment e.g. restocking the first aid container;
- Ensure that an ambulance or other professional medical help is summoned when appropriate;

First Aid at Work Certificate

This qualification is obtained through a 2-day course approved by the Health and Safety. The main duties of a first aider are to:

- Give immediate help to casualties with common injuries or illness and those arising from specific hazards at the School;
- Ensure that an ambulance or other professional medical help is called if it is deemed necessary.

The role of the qualified First Aider includes the treatment of any person on the School site/premises whether or not they are an employee, pupil, contractor or member of the public.

Emergency First Aid at Work

Emergency First Aid at Work is a HSE approved one-day course which provides basic lifesaving first aid and guidance on workplace health and safety regulations. The course is ideal for smaller workplaces which present few health and safety risks.

The Head Teacher will ensure that first aiders are qualified to carry out their duties and that certificates are in-date. Further training will be arranged as and when required. There are other HSE recognised first aid qualifications which are specialised for particular circumstances. Many of these are designed for use where access to medical emergency services is limited and where the welfare of the injured may depend on immediate treatment.

These are particularly useful for off-site visits and most outdoor activity qualifications are only valid with up to date specific first aid qualifications. They are normally gained through intensive 2 or 3 day practical courses and tend to be renewable on a 3 yearly basis.

- A First Aid at Work certificate is only valid for three years. The Head Teacher will arrange refresher training and re-testing of competence before certificates expire. If a certificate expires, the individual will have to undertake the full course of training to become a First Aider.
- Records of First Aiders' certification dates and dates of additional specific or refresher training should be maintained electronically at the School site.

[3.3.Information on First Aid Arrangements](#)

The Head Teacher will inform all employees at the School of the following:

- The arrangements for recording and reporting accidents;
- The arrangements for first aid;
- Those employees with qualifications in first aid;
- The location of first aid boxes.

In addition, the Head Teacher will ensure that signs are displayed throughout the School providing the following information:

- The location of first aid boxes.
- Names of employees with first aid qualifications

All members of staff will be made aware of the First Aid and Administering Policy and Asthma Policy.

[3.4.Record keeping and reporting](#)

The School sources providers for first aid training through relevant approved organisations. The Head Teacher will maintain records of staff who are qualified, the date when their certificates expire and when re-training is due to take place.

In the case of more serious injuries, parents must be immediately informed and any follow up treatment given out of school will be logged on CPOMS.

The Head Teacher will implement first aid procedures for reporting:

- All accidents to employees and pupils
- All incidents of violence and aggression

The Governing Body is aware of the statutory duty under The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR) in respect of reporting the following to the Health and Safety as it applies to employees, as well as the updated RIDDOR 2013 legislation.

4. Transport to Hospital or Home

The Head Teacher or designated person will determine reasonable and sensible action to take in each case.

Where the injury is an emergency an ambulance will be called, after which the parent/carer will be called.

Where hospital treatment is required but it is not an emergency, the Head Teacher or designated person will contact parents /carers for them to take over the responsibility for the child.

If the parents/guardians cannot be contacted, then the Head Teacher or designated person may decide to transport the student to hospital.

Where the Head Teacher or designated person decides for transporting a child then the following points will be observed:

- Only staff cars insured to cover such transportation will be used;
- No individual member of staff should be alone with a pupil in a vehicle;
- The second member of staff will be present to provide supervision for the injured student;
- At least one member of staff will be the same gender as the student.
- Where reasonably practicable, efforts are made to obtain the appropriate car seat for the student's height/weight:

5. Administering Medication

Training for staff in the general administration of medication (antibiotics, pain relief, antihistamines for example) is undertaken as part of staff induction and reviewed annually.

Staff are taught the **5 Rights**: right drug, right dose, right time, right place, right child.

Right	Meaning	Application to Pupils
Right Drug	Ensuring the correct medication is given.	Double-check the medication label and the prescription details against the child's records to ensure the correct medication is being administered.
Right Dose	Administering the correct amount of medication.	Measure or calculate the dosage accurately, based on the child's weight, age, and doctor's instructions.
Right Time	Giving the medication at the correct time as prescribed.	Adhere to the prescribed schedule, including specific times of day and the appropriate interval between doses. Regularly check the medication schedule to prevent missed or duplicate doses.
Right Place	Administering the medication in the correct manner and location.	Ensure the medication is given in the manner intended (orally, topically, etc.) and in a safe and appropriate location within the school.
Right Child	Confirming the identity of the child receiving the medication.	Always verify the child's identity against the medication label and school records,

		especially in schools with multiple children with similar names.
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Parent/carers are welcome to come into school to administer medication, such as antibiotics to their children. However, there are occasions when this might not be possible. Any medication requiring **four** doses a day can be administered on a parent's behalf by appointed and trained members of staff, on completion of the Administration of Medication at School form [Appendix 1], which needs to be requested from the school office.

Any administration of medication is recorded on CPOMS and record keeping complies with the School Confidentiality Policy and GDPR Laws. Records include: the medication given, the dosage, who administered it and the time and date.

Note: CPOMS will add this for when the record is created and also record who has created this record - if the time, date, or member of staff is different to the author of this record, this will be made clear in the CPOMS incident entry.

Information shared with staff annually:

- If you administer medication in class (most likely inhalers), this all needs to be recorded. This can be done by one of the following:
 1. directly onto CPOMS via clicking the category 'medical issues/information' and then selecting sub-category 'administering medication'.
 2. Recording on a weekly sheet, and then scanning and submitting at the end of the week onto CPOMS.

Please ensure you record details of what was administered, and the dosage as well as the time and who administered it. See examples below:

2 x puffs of blue reliever inhaler at 14:45, administered by KThorpe.

2x puffs of blue reliever inhaler at 11:15, self-administered by XXXX, witnessed by KThorpe.

10ml of 6+ Calpol, administered by KThorpe at 12:30.

Administering medication to a child during the school day

Before any medication can be handed over for the school to administer, the parent/carer must first complete the Administration of Medication at School form. This form is then attached to the medication before storage. This form is only used for medication requiring four doses a day. Exceptions can be made by arrangement with the Headteacher for eg. travel sickness, pain relief, antihistamine medicine. Leeds City Council will not be held liable for any injury or death arising directly or indirectly from the administration of prescribed medication, other than through the council's negligence.

If a child brings medication into school, please ensure it is taken to the office for safe storage. The parent will be contacted and asked to come into school to complete the formal documentation, or send relevant communication [via email or text message].

All medication is stored securely according to the manufacturer's instructions either in the designated locked cabinet in the school office, or the receptacle in the Breakfast Club refrigerator in the school kitchen. Medicine coming into school is placed in an outer plastic bag (kept in the school office) to prevent cross infection of germs between child/home/school. Staff handling the medication must wash/gel their hands first.

The class teacher will be notified that a child requires medication and the dosage time/s. KS1 children will be brought round to the school reception area. KS2 children will be sent round to the school reception area.

The school will endeavour to administer the medicine at the times stated but will not be accountable for missing a dosage during a busy school day. The parent/carer will be informed if a dose was late or has been missed.

Before any medication is administered by staff they must first:-

- Wash/gel hands or wear plastic gloves. You are handling a spoon that will go in the child's mouth and you are putting yourself and the child at risk of cross infection (you from them, them from you). Both these items are kept above the lockable medicine cabinet in the office.
- Remove medication from medicine cabinet or plastic container in dedicated refrigerator. Read the name and dosage instructions carefully and ask the child to repeat their name if they are not known to you by sight.
- Ensure you use plastic measuring spoon provided with medication. Spares to be kept in the cabinet for this purpose. For children who require more complex medication the correct measuring spoon is vital.
- If a child is safe-administering medication, this should always be administered with a staff witness present.

Children with asthma:

Parent/carer to complete the medication administration form in school also, indicating if their child can self-medicate or would require assistance from a member of staff with their inhaler. It is the parent/carer's responsibility to ensure all inhaler medication is in date and replaced regularly. Inhalers should be clearly marked with the child's name and the dosage. Inhalers will be kept securely but easily accessible in classrooms, and used in and around school and during PE and swimming lessons. Inhalers will be taken on school trips, along with healthcare plans.

The School have a separate policy for pupils with asthma. This will deal with specific response to emergencies such as asthma attack. All healthcare plans for asthma or allergies are shared with relevant staff, and detail what actions need to be taken dependent on individual pupils needs.

Children with special medical needs:

There are children in mainstream schools and special schools who may have particular medical conditions where the administering of first aid may require variation. Such children

should be subject to an individual health care plan and may require special procedures in the event of an accident.

The school nurse and other health professionals will advise and co-ordinate with the school and arrange specialist training where necessary. Please refer to **Managing Medicines in Schools and Early Years Settings** – Department for Education and Skills/Department of Health.

Guidance that staff at Manston Primary School will follow:

DO

- ✓ Remember that any member of school staff may be asked to provide support to pupils with medical conditions, but they're not obliged to do so
 - ✓ Check the maximum dosage and when the previous dosage was taken before administering medicine
 - ✓ Keep a record of all medicines administered. The record should state the type of medicine, the dosage, how and when it was administered, and the member of staff who administered it
 - ✓ Inform parents if their child has received medicine or been unwell at school
 - ✓ Store medicine safely
 - ✓ Make sure the child knows where their medicine is kept, and can access it immediately
-

DON'T

- ✗ Give prescription medicines or undertake healthcare procedures without appropriate training
- ✗ Accept medicines unless they are in-date, labelled, in the original container and accompanied by instructions
- ✗ Give prescription or non-prescription medicine to a child under 16 without written parental consent, unless in exceptional circumstances
- ✗ Give medicine containing aspirin to a child under 16 unless it has been prescribed by a doctor
- ✗ Lock away emergency medicine or devices such as adrenaline pens or asthma inhalers
- ✗ Force a child to take their medicine. If the child refuses to take it, follow the procedure in their individual healthcare plan and inform their parents

6. First Aid Provision After School

The provision of first aid will be available to members of the public using the School's facilities after normal School hours. First aid will be provided by those School staff members who have access to first aid boxes throughout the School. These School staff members should have all attended an appropriate course in first aid and are therefore qualified to give first aid treatment

Equality Impact Statement

The Equality Act 2010 requires public bodies, in carrying out their functions, to have due regard to the need to:

- eliminate discrimination and other conduct that is prohibited by the Act
- advance equality of opportunity between people who share a protected characteristic and people who do not share it
- foster good relations across all characteristics - between people who share a protected characteristic and people who do not share it.

In the development of this policy due regard has been given to achieving these objectives.

7. Associated Advice

Emergency Dental Care

Following trauma to the mouth it is important that the child is assessed by a dentist as soon as possible, even if there is no apparent damage to the teeth.

This treatment may be provided by the child's dentist, by the Community Dentist at the nearest Community Dental Clinic, or by any other dentist who can be contacted and is willing to provide immediate treatment.

When one or more of the permanent front teeth are completely knocked out immediate first aid is essential. The advice does not apply to teeth with broken roots or baby teeth, neither of which should be re-implanted.

- Pick the tooth up carefully by the crown – the shiny part which is usually visible in the mouth.
- If the tooth looks quite clean do not worry about further cleaning. If it has been badly contaminated with dirt or mud, gently wash it under warm tap water or milk. Do not scrub, or apply any form of disinfectant.
- Push the tooth gently back into the socket, holding only the crown. If this is done quickly it is not usually painful. Get the child to bite on a clean handkerchief to hold the tooth in place and accompany the child to the dentist immediately.
- Do not store the tooth in water, or disinfectants such as Savlon or Milton. Store the tooth in milk.
- Do not wrap the tooth in a wet or dry handkerchief.
- Get to the dentist as soon as possible.
- If the tooth has been stored in milk it may be possible to implant up to twelve hours after the accident. However, chances of success are greatest within thirty minutes.

After receiving dental treatment, the child will need to attend their family doctor if anti-tetanus protection is required.

Further information, can be obtained by via the Community Dental Service.

Blood Spillage and Bodily Fluids (including vomit)

A COSHH assessment should be obtained and displayed with the supplies for dealing with body fluids and clinical waste. The procedure for dealing with bodily fluids is:

- Put on plastic apron and latex gloves;
- Place paper towels over spillage;
- Gently pour disinfectant on to the paper towels;
- For carpets use soap and hot water as some disinfectants will bleach;
- Wash gloved hands and leave the solution as directed on the label;
- Pick up towels (with gloves) and place them in a plastic bag;
- Wash the area thoroughly with detergent and hot water, then dry;
- Place all used towels in a plastic bag, wash gloved hands, place gloves in bag and seal and ensure the bag is sent for incineration;
- Wash hands.

Clinical Waste Contaminated Injuries

Clinical waste is disposed of in yellow bags as this colour identifies the contents as bodily fluids or waste. The School's clinical waste and hygiene services which collect sanitary waste can be asked to provide larger bins as necessary.

If it is thought that biological pathogens have entered the body via a contaminated injury, the Trust's guidance for Contaminated Injuries should be referred to.

Contaminated injuries include:

- Human bites and scratches
- Injuries caused by an object contaminated with visible blood
- Needle stick injury/injury with a needle
- Exposure to blood-borne viruses (e.g. hepatitis B, hepatitis C, Human Immunodeficiency Virus (HIV)).

School Journeys

The provision of adequate first aid cover should form part of the essential risk assessment involved in organising any off-site activity.

Where the trip is extended or remote in nature, or the likelihood of injury is higher, a qualified First Aider should accompany the group.

Where journeys are close to populated areas, or the likelihood of injury is minimal, then an appointed person or someone with a working knowledge of first aid procedures should accompany trips and other School journeys and a travelling first aid kit should be provided.

The planning for such journeys should include what to do in case of accident and emergency.

Access for Ambulance

Unobstructed and adequate site access should be maintained for ambulances, their staff and equipment. Suitable signs should be displayed as deemed appropriate.

Hospital Consents Forms

It is unlikely that School staff accompanying pupils to hospital after accidents will be asked by the hospital to sign consent forms, but if asked they must decline.

The hospital will have procedures for obtaining consent from other sources if parents are not available.

Religious considerations

Due to religious convictions some families choose to decline certain medical procedures or treatments. If this is made known to the School, pupils' record cards should have an appropriate entry regarding this and this should be known to the First Aider or teacher taking the child to hospital in an emergency if the parent/carer is not available.

Reviewed: January 2024

Agreed with Governors January 2024

Review due September 2026

Appendix 1

Administration of Medication at School

Only for medication that requires four doses a day

Childs name: _____ (Year) _____

<u>NAME OF MEDICATION</u>	<u>DOSAGE (e.g. 1 x 5ml – 1 tablet etc) before or after food</u>
TIME TO BE GIVEN:	
<u>NAME OF MEDICATION</u>	<u>DOSAGE (e.g. 1 x 5ml – 1 tablet etc) before or after food</u>
TIME TO BE GIVEN:	

I give permission for authorised members of staff to administer the above medication for my child. I take full responsibility for any medication administered by staff on my behalf to the dosage and times I have listed above.

Name of parent/carer in capitals: _____

Signature (parent/carer): _____

Date(s): _____

Leeds City Council will not be held liable for any injury or death arising directly or indirectly from the administration of prescribed medication, other than through the council's negligence.