St Joseph's Catholic Primary Academy

Love, Learn and Live in Christ

First Aid Policy

Review Date	Changes Made	Amended By
November 2026	Changes to administration of medication	L.Paquim

School recognises that first aid provision is a statutory requirement and that this should cover all staff, pupils and visitors to school. The Academy Council is responsible for the implementation of this policy through the head teacher and leadership team. This policy should be considered alongside others relating to child welfare and safeguarding. There is a separate policy on Allergy Awareness, in line with Benedict's Law.

First aid intends to preserve life, limit the worsening of any condition and to promote recovery. School also encourages health and safety awareness from everyone using the site, in order to prevent first aid being necessary. Everyone is required to take some responsibility for their health and safety needs. Awareness of potential hazards and risks should be paramount in attempting to avoid accidents. Necessary risk assessments will be carried out in relevant areas.

Information is requested from parents at least annually to ensure all relevant medical and dietary details are correct. Equally it is vital that we have the latest contact information and school regularly reminds parents of the need to update school as necessary. Known important medical details and allergy information for pupils along with medicines to be administered are kept in the office. The school kitchen has known relevant food allergy information and meetings are held with the parents of these pupils.

Risk assessments for school visits need to refer as necessary to particular pupil needs and make provision for these needs. The parent consent form requires parents to indicate any revised or updated emergency or medical information.

All staff should administer to minor injuries that occur during normal school hours.

General basic first aid advice

- Be aware of other relevant pupil information.
- Wash hands before and after first aid is given.
- Ice packs are located in the freezer compartment of the staff room fridge. They are useful for bumps, bruises, strains, sprains and swelling.
- Always pre wrap ice packs in a cloth to prevent skin contact.
- Always use disposable gloves where blood/bodily fluids are involved
- Use water only to clean grazes and cuts
- If necessary cover with a plaster
- If there is doubt about the health/well-being of a pupil school will contact parent/s (ensure a member of the Senior Leadership Team is aware).

Qualified First Aiders:

In St Joseph's school, in the academic year 2026-2027, these are the qualified First Aiders:

Staff Name	Role in School	First Aid Course	Renewal date
Miss Y Sutcliffe	Administrator	Paediatric First Aid	September 2029
Mrs N Thompson	Business Manager	Paediatric First Aid	January 2027
Mrs M Midgely	ETA / LTS	Paediatric First Aid	January 2027
Mrs D Connolly	ETA/LTS/After School club	Paediatric First Aid	January 2027
Mrs P Esgate	EYFS ETA / LTS	Paediatric First Aid	January 2027
Mrs J Zaffino	EYFS Leader	Paediatric First Aid	January 2027
Mr D Poole	Caretaker	Paediatric First Aid	September 2029
Mrs S Stewart	Deputy Headteacher	Paediatric First Aid	January 2027
Miss J Crossland	ETA	Paediatric First Aid	January 2027
Mrs R Acheson	Nursery Nurse	Paediatric First Aid	September 2028
Mrs E Gabbitass	HLTA / ETA	Paediatric First Aid	September 2028
Mrs J Tolan	ETA	Paediatric First Aid	October 2028
Miss G Howgate	ETA	Paediatric First Aid	October 2028
Miss A Edwards	Teacher	Paediatric First Aid	October 2028
Miss H Baldwyn	Teacher	Paediatric First Aid	February 2029
Miss F Philips	EYFS Practitioner	Paediatic First Aid	March 2029
Miss L Murray	ETA	Paediatric First Aid	September 2029

If the qualification ceasing during the school year they will be booked onto the training prior to the end of their qualified time.

Certificated Diabetes Training:

Staff Name	Role in School	Training	Date completed
Mrs J Zaffino	EYFS Lead/ SLT	Localla Diabetes training	May 2026
Mrs S Stewart	Deputy Headteacher/ SENDCO	Localla Diabetes training	January 2026
Mrs J McGovern	ETA / HLTA	Localla Diabetes training	June 2025
Miss H Baldwyn	Y5 Class teacher	Localla Diabetes training	September 2024

First Aiders can be identified by their Green "First Aid" lanyard.

Administering Medicines in school:

Pupils should only need to have prescription medicine administered in school if it needs taking 4 times a day. If a medicine is to be taken 3 times a day, it should be taken outside of the school day.

Staff in school can only administer medicine if a parent has completed the 'Administration of Medication Form'. This includes administration of prescription and over the counter medication. When medication is administered in school, this will only be administered by a qualified First Aider at the times and in the quantities detailed on the above form. Staff will sign, date and time stamp all medication administered. All medication will be clearly labelled with the child's name and only administered to that child. A dojo will also be sent to inform parents each time the medication is administered.

First Aid Resources, Classroom First Aid Kits and additional Travel kit

At St Joseph's these are situated in the First Aid Room, one in each classroom, one additional travel first aid kit in the medical room. The classroom first aid kits can be used at lunchtime by the adults on duty – if contents are used it must be refilled before putting back in the classroom.

The class kits should contain:

- 1 x pair of vinyl powder-free disposable gloves
- 1 x pack of safety pins (6)
- 1 x None-woven triangular bandage 90cm x 90cm x 127cm
- 6 x sterile saline wipes
- 2 x Bags of assorted washproof plasters (10)
- 1 x Large flow wrapped dressing 18cm x 18cm each
- NO LOTIONS, SPRAYS, CREAMS OR MEDICINES

Note: If any pupil is allergic to plasters then separate ones are available, SPECIFIC TO EACH PUPIL, from the Medical Room.

These should be checked and refilled by the First Aider/Miss Y Sutcliffe for the phase / class.

- There is also an additional First Aid kit in the Medical Room which can be used as a travel kit or the class kit.

At St Joseph's contents of the travel kit will be checked by Miss Y Sutcliffe (Administrator) after each use and be left complete. The First Aid room resources will be checked half termly by Miss Y Sutcliffe, who will arrange for ordering new resources if needed.

Accident book - In the Medical (First Aid) Room

School has a pupil accident book and adult accident book which are held in the medical room. All accidents that are dealt with by a First Aider must be noted in the accident book.

If an accident takes place during break times or lunchtimes, the staff on duty/responsible for that area should enter the details if appropriate in the accident book (In the Medical/First Aid Room). The First Aider must ask the office staff to make any necessary phone calls / dojo messages arising mainly from bumped heads. It is school policy to inform parents when a child has sustained a "bumped" head.

Serious incidents must be reported to the Health and Safety Team (Calderdale) on 01422 393080 or 01422 393079

For symptoms which may occur following a head injury see Appendix 1.

Cleaning up after an incident:
Isolate the area, clean up as soon as possible, for spillages use disposable gloves, use designated equipment (colour marked), double bag waste materials. The Site Manager must be informed as soon as reasonably possible so that he can ensure the area is cleaned carefully after school.

Head Lice
A general letter is sent to parents of all pupils that may be at risk. If live lice or eggs are observed in a pupil's hair, the parents must be informed and asked to ensure the pupil is treated for headlice before they return to school.

Recommendations and Additional information on specific first aid needs

For more serious injury
- Ensure someone else is present (get trained assistance) and ensure that there is constant supervision.
- Are there any hazards?
- Assess the circumstances of any injury/problem Is there a patient response?

Signs/Symptoms of Diabetes

High Blood pressure (slow onset)
- Excessive thirst
- Frequent need to urinate
- Acetone smell on breath
- Drowsiness
- Hot dry skin
- (give sugar, glucose or sweet drink)

Low blood pressure (fast onset)
- Feeling dizzy
- Lots of sweating
- Pale, rapid pulse
- Numb around lips, fingers
- Aggressive behaviour (self-administration of insulin. If unsure about symptoms give sugar)

How to recognise an Asthma Attack

The signs of an asthma attack are:
- Persistent cough (when at rest)
- A wheezing sound coming from the chest (when at rest)
- Difficulty breathing (the child could be breathing fast and with effort using all accessory muscles in the upper body)

- Nasal flaring
- Unable to talk or complete sentences. Some children may go very quiet
- May try to tell you that their chest 'feels tight' (younger children may express this as a tummy ache)

CALL AN AMBULANCE IMMEDIATELY AND COMMENCE THE ASTHMA ATTACK PROCEDURE WITHOUT DELAY IF THE CHILD:

- Appears exhausted
- Has a blue/white tinge around lips
- Is going blue
- Has collapsed

WHAT TO DO IN THE EVENT OF AN ASTHMA ATTACK:

- Keep calm and reassure the child
- Encourage the child to sit up and slightly forward
- Use the child's own inhaler – if not available, use the emergency inhaler
- Remain with the child while the inhaler and spacer are brought to them
- Immediately help the child to take two separate puffs of salbutamol via the spacer
- If there is no immediate improvement, continue to give two puffs at a time every two minutes, up to a maximum of 10 puffs
- Stay calm and reassure the child. Stay with the child until they feel better. The child can return to school activities when they feel better
- If the child does not feel better, or you are worried at ANYTIME before you have reached 10 puffs, CALL 999 FOR AN AMBULANCE
- If an ambulance does not arrive in 10 minutes give another 10 puffs in the same way

Epileptic Seizure

These are caused by brain disturbance and may last between 1 – 3 minutes. Signs/symptoms (they may not present with all these symptoms)

- Cry as air is forced through vocal chords
- May fall over and briefly lie rigid
- Congested, blue face and neck
- Jerking, spasmodic muscle movement
- Froth from mouth
- Possible loss of bowel/bladder movement
- Do not restrain, push anything into mouth. do protect person from injury

Anaphylaxis

Can be life threatening in most severe form, but most pupils are well aware of 'does and don'ts' and of the necessary medication (adrenalin pen – epipen, antihistamines).

All staff have received Allergy Awareness training, and are aware of the spare AAI's are kept in school. Our Allergy Governor is Mr Ian Goulding.

Call emergency services

Signs/symptoms

- Swelling (angioedema) and redness of skin

- Itchy raised rash
- Swelling of throat (cannot always be seen)
- Wheezing/coughing (can be trying to clear the airway)
- Rapid irregular pulse
- Nauseousness/vomiting
- Dizziness/unconsciousness
- Feeling of "impending doom" or panic

Remember to contact an ambulance straight away

Appendix 1

Symptoms which may occur following a head injury:

Minor Symptoms

The symptoms of a minor head injury are usually mild and short lived. Symptoms may include:

- a bump or bruise on the head
- nausea (feeling sick)
- mild headache
- tender bruising or mild swelling of the scalp
- mild dizziness

Major Symptoms

If any of the following symptoms are present, particularly a loss of consciousness (even if only for a short period of time), go immediately to the accident and emergency (A&E) department of your local hospital, or call 999 and ask for an ambulance:

- unconsciousness (either very briefly or for a longer period of time)
- difficulty staying awake or still being sleepy several hours after the injury
- having a seizure or fit (when your body suddenly moves uncontrollably)
- difficulty speaking, such as slurred speech
- vision problems or double vision
- difficulty understanding what people say
- reading or writing problems
- balance problems or difficulty waking
- loss of power in part of the body, such as weakness in an arm or leg
- amnesia (memory loss), such as not being able to remember what happened before or after the injury
- clear fluid leaking from the nose or ears (this could be cerebrospinal fluid, which normally surrounds the brain)
- a black eye (with no other damage around the eye)
- bleeding from one or both ears
- new deafness (loss of hearing) in one or both ears
- bruising behind one or both ears
- a lasting headache since the injury
- vomiting since the injury

- irritability or unusual behaviour
- visible trauma (damage) to the head, such as an open, bleeding wound

Please see the NHS website for further guidelines **www.nhs.uk**