

St Andrew's CE (VA) Infant School

First Aid Guidelines



First Aid Guidelines

- Treat all children with tender care
- Always wear gloves when dealing with vomit, blood or other bodily fluid.
- All children must be encouraged to walk to first aid area. Any child who cannot comply for any reason must be reassured but not picked up and a first aider informed immediately.
- Always log any **first aid** given in the First Aid folder. If only washing hands and cleaning mud from the body, this is not first aid so no form needed.

Cuts and grazes

1. Clean and dry with gauze swabs and water (in spray bottle)
2. Use a plaster to cover the wound, if necessary
3. If you have any further concerns seek advice from first aider e.g. if something is embedded or bleeding is severe, as parents may need to be informed.
4. Complete the incident log and take-home sheet and pass to class teacher. Common sense should be used as to whether parents need to be informed with a general first aid form

Head bumps – any injury to the skull is a head bump and must be taken seriously

1. Apply cold compress using cold water or gel pack (kept in the staff room fridge)
2. Assess for any signs of concussion: pupil dilation, blurred vision, dizziness, nausea
3. If no signs of distress – complete the incident log and take-home sheet and pass this to relevant teacher
4. Please attach a head bump sticker to the child and ask them to tell their teacher if they feel unwell. If any concerns – inform first aider who will assess and advise. Tell office staff so they can text parent to say they have had a head bump.

Stings

1. Wash and dry with gauze swabs
2. Is sting is still present and can easily be removed then it may be removed
3. If sting is still present and cannot easily be removed, parent's consent must be obtained and preferred treatment adhered to
4. Observe for signs of allergy: severe swelling and/or rash
5. Complete the incident log and take-home sheet and pass to class teacher

Nose bleeds

1. Wearing gloves pinch the bridge of the nose and ask child to lean slightly forward
2. Hold this position for up to 10 minutes. After this time the nose must be released and left to bleed for 2/3 minutes before resuming the hold
3. If nose bleed has stopped, complete the incident log and take-home sheet and pass to class teacher
4. If nose bleed continues a first aider must be informed and parents may need to be contacted

Seizures

1. If a child starts to have a seizure, do not touch or try to move them
2. Observe the fit, moving obstacles including other children out of the immediate area
3. After a short seizure, allow the child to rest then assist them to first aid for further rest
4. Notify the parents and follow their advice
5. If the fit lasts for longer than 3 minutes inform the first aider
6. Any child experiencing a seizure fit needs medical guidance
7. All seizures must be recorded and logged for length of seizure and additional comments.

Guidelines will be reviewed every 2 years.