

# **First Aid Policy**

**Approved by:** Academy Headteacher

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on:

Next review due by:

September 24

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## **Aims**

The aims of our First Aid Policy are to:

- Ensure the health and safety of all staff, students and visitors
- Ensure that staff and governors are aware of their responsibilities with regards to health and safety
- Provide a framework for responding to an incident and recording and reporting the outcomes

## Legislation and guidance

This policy is based on advice from the Department for Education on <u>first aid in schools</u> and <u>health</u> and <u>safety in schools</u>, and the following legislation:

- The Health and Safety (First Aid) Regulations 1981, which state that employers must provide adequate and appropriate equipment and facilities to enable first aid to be administered to employees, and qualified first aid personnel
- The Management of Health and Safety at Work Regulations 1992, which require employers to make an assessment of the risks to the health and safety of their employees
- The Management of Health and Safety at Work Regulations 1999, which require employers to carry out risk assessments, make arrangements to implement necessary measures, and arrange for appropriate information and training
- The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013, which state that some accidents must be reported to the Health and Safety Executive (HSE), and set out the timeframe for this and how long records of such accidents must be kept
- <u>Social Security (Claims and Payments) Regulations 1979</u>, which set out rules on the retention of accident records
- <u>The Education (Independent School Standards) Regulations 2014</u>, which require that suitable space is provided to cater for the medical and therapy needs of pupils

This policy complies with our funding agreement and articles of association.

# **Roles and Responsibilities**

### 3.1 Appointed person(s) and first aiders

The appointed person are responsible for:

- Taking charge when someone is injured or becomes ill
- Ensuring there is an adequate supply of medical materials in first aid kits, and replenishing the contents of these kits
- Ensuring that an ambulance or other professional medical help is summoned when appropriate

First aiders are trained and qualified to carry out the role (see section 7) and are responsible for:

- Acting as first responders to any incidents; they will assess the situation where there is an
  injured or ill person, and provide immediate and appropriate treatment
- Liasing with parents as required, including sending pupils home to recover, where necessary, and recommending further medical opinion e.g visit to MIU. For suspected head injuries the parents will be contacted and the student will be given a head injury form to take home.

- Filling in an accident report on the same day, or as soon as is reasonably practicable, after an incident (see the template in appendix 2)
- · Keeping their contact details up to date

Our Academy's appointed person and first aiders are listed in appendix 1. Their names will also be displayed prominently around the school.

### 3.2 The Governing Board

The Directors have ultimate responsibility for health and safety matters in the school, but delegate's operational matters and day-to-day tasks to the Local Governing Committee, Headteacher and staff members.

## 3.4 The Headteacher and Local Governing Committee

The Headteacher is responsible for the implementation of this policy, including:

- Ensuring that an appropriate number of appointed persons and/or trained first aid personnel are present in the Academy at all times
- Ensuring that first aiders have an appropriate qualification, keep training up to date and remain competent to perform their role
- Ensuring appropriate risk assessments are completed and appropriate measures are put in place
- Undertaking, or ensuring that managers undertake, risk assessments, as appropriate, and that appropriate measures are put in place
- Ensuring that adequate space is available for catering to the medical needs of students.
- Reporting specified incidents to the HSE when necessary (see section 6)

### 3.5 Staff

School staff are responsible for:

- Ensuring they know who the first aiders in school are
- Completing accident reports (see appendix 2) for all incidents they attend to where a first aider/appointed person is not called
- Informing the Headteacher or their manager of any specific health conditions or first aid needs

### First Aid Procedures

## 4.1 In-school procedures

In the event of an accident resulting in injury:

- The closest member of staff present will assess the seriousness of the injury and seek the
  assistance of a qualified first aider, if appropriate, who will provide the required first aid
  treatment
- The first aider, if called, will assess the injury and decide if further assistance is needed from a colleague or the emergency services. They will remain on scene until help arrives. Any witnesses to the incident will also be required to stay with the first aider until they have given a detailed account of the incident.
- The first aider will also decide whether the injured person should be moved or placed in a recovery position

- If the first aider judges that a pupil is too unwell to remain in school, parents will be contacted and asked to collect their child. Upon their arrival, the first aider will recommend next steps to the parents
- If emergency services are called, the Reception or the first aider attending the incident will contact parents immediately
- The first aider/relevant member of staff will complete an accident report form on the same day or as soon as is reasonably practical after an incident resulting in an injury, and pass to the Medical Room Assistant, based on the ground floor of F block.

#### 4.2 Off-Site Procedures

When taking students off the Academy premises, staff will ensure they always have the following:

- A school mobile phone or have provided the Academy with a contact mobile number.
- · A portable first aid kit
- Information about the specific medical needs of students.
- · Parents' contact details

Risk assessments will be completed by the visit leader and shared with all staff accompanying the trip prior to any educational visit that necessitates taking students off school premises.

Where possible a first aider will go on Academy trips and visits. If this is not possible the appointed person will discuss with the trip leader, and where appropriate the parents and student, any relevant medical requirements.

## First Aid Equipment

A typical first aid kit in our school will include the following:

- A leaflet with general first aid advice
- Regular and large bandages
- Eye pad bandages
- Triangular bandages
- Adhesive tape
- Safety pins
- Disposable gloves
- · Antiseptic wipes
- · Plasters of assorted sizes
- Scissors
- Cold compresses
- Burns dressings

No medication is kept in first aid kits.

First aid kits are stored in:

- The medical room
- Reception upper and lower site
- · All science labs
- All design and technology classrooms
- The school kitchens

### · School vehicles

We strive to ensure compliance with the relevant legislation and guidance in *Health Guidance for Schools* with regard to procedures for supporting children with medical requirements, including managing medicines. Responsibility for all administration of medicines at is held by the Headteacher but delegated to our appointed first aiders.

All medical information is treated confidentially by the responsible manager and staff. All administration of medicines is arranged and managed in accordance with the *Health Guidance for Schools* document. All staff have a duty of care to follow and co-operate with the requirements of this policy.

## **Record-Keeping and Reporting**

### 6.1 First aid and accident record book

- An accident form will be completed by the first aider/relevant member of staff on the same day or as soon as possible after an incident resulting in an injury.
- As much detail as possible should be supplied when reporting an accident, including all of the information included in the accident form at appendix 3
- The form must then be taken upon competition to the medical room assistant who will complete the on line accident form based on this information provided.
- On line records held in the first aid and accident book will be retained by the school for a minimum of 3 years, in accordance with regulation 25 of the Social Security (Claims and Payments) Regulations 1979, and then securely disposed of

## 6.2 Reporting to the HSE

Any accidents that are a reportable injury, disease, or dangerous occurrence as defined in the RIDDOR 2013 legislation (regulations 4, 5, 6 and 7), will be reported automatically to the Health and Safety Executive as soon as is reasonably practicable and in any event within 10 days of the incident via the EECLive online system.

Reportable injuries, diseases or dangerous occurrences include:

- Death
- Specified injuries, which are:
  - o Fractures, other than to fingers, thumbs and toes
  - Amputations
  - Any injury likely to lead to permanent loss of sight or reduction in sight
  - Any crush injury to the head or torso causing damage to the brain or internal organs
  - Serious burns (including scalding)
  - Any scalping requiring hospital treatment
  - Any loss of consciousness caused by head injury or asphyxia
  - Any other injury arising from working in an enclosed space which leads to hypothermia or heat-induced illness, or requires resuscitation or admittance to hospital for more than 24 hours
- Injuries where an employee is away from work or unable to perform their normal work duties for more than 7 consecutive days (not including the day of the incident)
- Where an accident leads to someone being taken to hospital
- Near-miss events that do not result in an injury, but could have done. Examples of near-miss events relevant to schools include, but are not limited to:
  - o The collapse or failure of load-bearing parts of lifts and lifting equipment

- o The accidental release of a biological agent likely to cause severe human illness
- The accidental release or escape of any substance that may cause a serious injury or damage to health
- o An electrical short circuit or overload causing a fire or explosion

### 6.3 Reporting to Ofsted and Child Protection Agencies

The Headteacher will notify Ofsted of any serious accident, illness or injury to, or death of, a student while in the Academy's care. This will happen as soon as is reasonably practicable, and no later than 14 days after the incident.

The Headteacher will also notify the Local Authority LADO of any serious accident or injury to, or the death of, a pupil while in the school's care.

## **Training**

All school staff are able to undertake first aid training if they would like to.

All first aiders must have completed a training course, and must hold a valid certificate of competence to show this. The Academy will keep a register of all trained first aiders on SIMs, what training they have received and when this is valid until

Staff are encouraged to renew their first aid training when it is no longer valid.

## **Monitoring Arrangements**

This policy will be reviewed by the Headteacher in conjunction with his Senior Team every 3 years.

At every review, the policy will be approved by the Academy Local Governing Committee.

This first aid policy is linked to the

- Health and safety policy
- · Risk management policy
- Policy on supporting pupils with medical conditions

# Appendix 1: List of appointed person(s) for first aid and/or trained first aiders

Staff member's name	Role
Mrs A Warren	First Aider
Mrs P Duffy	First Aider
Mr D Tozer	First Aider
Mrs A Richards	First Aider
Miss L Constable	First Aid Support – Science
Mrs G Lloyd- Jones	First Aid Support – Science
Mrs S Preston	First Aid Support – PE
Mr S Jenkins	First Aid Support – PE
Mrs L Bowker	First Aid Support – PE
Mr R Barker	First Aid Support – PE
Mr P Reid	First Aid Support - PE
Miss I Hamilton	First Aid Support – Outdoor Activities
Mrs L Haynes	First Aid Support – Forest School

## **Appendix 2: Administration of Medicines**

## **Aims and Objectives**

Our administration of medicine requirements are achieved by establishing principles for safe practice in the management and administration of:

- prescribed medicines
- non-prescribed medicines
- maintenance drugs
- emergency medicine

### We:

- provide clear guidance to all staff on the administration of medicines
- ensure that there are sufficient numbers of appropriately trained staff to manage and administer medicines
- ensure that there are suitable and sufficient facilities and equipment available to aid the safe management and administration of medicines
- ensure the above provisions are clear and shared with all who may require them
- ensure that this policy is reviewed periodically or following any significant change which may affect the management or administration of medicines

The administration of medicines is the overall responsibility of parents/carers. The Headteacher is responsible for ensuring children are supported with their medical needs whilst on site, and this may include managing medicines where appropriate and agreed with parents/carers. At these times the member of staff overseeing the administration of drugs will watch the student take this drug.

### **Prescribed medicines**

It is our policy to manage prescribed medicines (eg. antibiotics, inhalers) where appropriate following consultation and agreement with, and written consent from, the parents/carers.

### Non-prescribed medicines

Non-prescribed medicines will only be administered in exceptional circumstances at the discretion of the Appointed First Aider.

### Maintenance drugs

It is our policy to manage the administration of maintenance drugs (eg. Insulin) as appropriate following consultation and agreement with, and written consent from parents/carers. On such occasions, a health care plan is in place for the child concerned

### Non-Routine Administration (Emergency medicine)

We manage the administration of emergency medicines such as:

- injections of adrenaline for acute allergic reactions
- injections of Glucagan for diabetic hypoglycemia

In all cases, professional training and guidance from an appropriate source will be received before commitment to such administration is accepted

### **Procedure for Administration**

When deciding upon the administration of medicine needs for children we discuss this with the parents/carers concerned and make reasonable decisions about the level of care required. Any child required to have medicines will have an 'administration of medicines/treatment' consent form completed by the parent/carer and kept on file.

Individual health care plans are completed for children where required and chronic cases are reviewed periodically in discussion with the parents/carers to ensure their continuous suitability.

All administration of medicines is recorded. If a child refuses to take medication, parents/carers are informed at the earliest available opportunity.

## **Schedule Two Drugs**

These drugs, which include Ritalin, are governed by the Misuse of Drugs Act and are kept in a locked cupboard which conforms to the legislation. It is kept locked at all times except when being accessed for storage or administration of medicine. Keys are kept to a minimum.

A register of controlled (schedule two) drugs is kept which records:

- medication provided
- · medication administered
- the name of the person for whom they were supplied.
- the name and quantity of the drug/medication supplied
- the amount administered each time and the amount left each time.

Register entries are made in ink and in chronological order.

This register is kept for at least two years from the last entry made.

All pupils with ongoing medical needs have a care plan. This includes pupils with diabetes, Epipen, heart problems, epilepsy and very severe asthma.

## **Contacting the Emergency Services**

When a medical condition causes the child to become ill and/or requires emergency administration of medicines, then an ambulance will be summoned at the earliest opportunity and parents/carers informed to accompany the pupil to the hospital if at all possible.

### **Training**

Where staff are required to carry out non-routine, more specialised administration of medicines or emergency treatment to children, appropriate professional training and guidance from a competent source is sought before commitment to such administration is accepted.

### Storage

The storage of medicines is the overall responsibility of the Headteacher who ensures that arrangements are in place to store medicines safely. Secure storage is situated in our First Aid Centre.

The storage of medicines is undertaken in accordance with product instructions and in the original container in which the medicine was dispensed.

It is the responsibility of all staff to ensure that the received medicine container is clearly labelled with the name of the child, the name and dose of the medicine and the frequency of administration.

It is the responsibility of the parents/carers to provide medicine that is in date. This should be agreed with the parents/carers at the time of acceptance of on-site administration responsibilities.

## **Disposal of Medicines**

It is the responsibility of the parents/carers to ensure that all medicines no longer required, including those which have date-expired, are returned to a pharmacy for safe disposal.

'Sharps boxes' will always be used for the disposal of needles. Collection and disposal of the boxes is arranged as appropriate.

# **Appendix 3: Accident Report Form**

harmful substance

### EEC Accident Report - Data Collection Form

(Version NOV18)

EEC <u>MUST</u> be used for reporting details of <u>INJURIES</u> that occur to our employees, visitors, pupils / children in our care, clients or service users as a result of an accident or incident that is connected with our work.

This form is designed to assist users of EEC in collecting the necessary data required to submit accident reports on the Accident Reporting module. Therefore, you do not have to use this form if you do not need to. You should enter a report for any incident which resulted in anything more than trivial first aid provision, or where the incident or near miss could have resulted in a serious injury.

#### If you have any gueries about whether an incident should be reported contact Matt at Educating Safely LLP Your Establishment Where did the incident occur? email Date of incident Time No. of injured parties. (The following data will be required for each party) Name Date of Birth (If Known) Home Phone (If Known) Address (If Known) Contractor Trainee **Employee** Client / Service User Public Pupil/Student NI Number (if known) 2. ABOUT THE INJURY \*\*\*\* SCHOOLS ONLY \*\*\*\* Nature of injury indicating affected body part. (i.e. cut to left leg etc.) Is the incident attributable to the condition of the premises, facilities or equipment? Is the incident attributable to the quality and/or suitability of the supervision or instruction? Was the injury to a member of the public, pupil or client / service Did the incident occur during an organised activity? i.e. curriculum user which meant they had to be taken from the scene of the accident activities. to a hospital for treatment? NOTE - This is not applicable if the injured party visited hospital later in the day or at another time. Did the injured party go absent from work as a result of this injury? A minor Injury (Including verbal abuse) Date of first first day of absence No injury - NEAR MISS Date returned to work (If known) Unconscious Resucitation Hospital for 24h+ None of these What were the extent of the injuries?→ 3. WHAT HAPPENED - Kind of incident (TICK ONE BOX) Animal or Insect Exposed to Harassment -Injured whilst Slipped, tripped or Violence -Physical Assault related Asbestos Racial handling, lifting or fell on same level carrying Deliberate Contact with Exposed to Fire Harassment -Injury not related Violence -Sport to a specific event Restraint and Control electricity Sexual Incident Contact with hot Exposed to, or Harassment -None - Near miss Stepping on / Violence surface or liquid contact with, a Other Striking against a fixed or Threatening

stationary object

Incident

Contact with moving machinery or materials being machined	ed	Hit by a moving vehicle	Other		Trapped or crushed by something collapsing		Violence – Verbal Assault	٠
Drowned or asphyxiated Fall from he	eight 🗖	Hit by a moving, flying or falling object	Repetitive Strain Injury (RSI)		Use of Hand Tools		Work related non-accidental illness	
Explosion Found on fl	oor	Injured whilst assisting client	Road Traffic Accident		Violence – Ph Assault – Acc		Work related stress	ū
4. WHAT WAS INVOLVED?								
Height of fall (if applicable)		Name of alleged assaila	nt (if applicable)		Crime No.	(if applicable)		
None - Near Miss	Equipmen	t/ Furniture - Office	Hot Surface/ liqui	id	٦		ner (Please state n of Incident)	
Animal/ Insect - Dead	Equipmen	t/ Furniture - Other	Ladder or scaffol	ding	Person - Relative of Client/ Service User/ Pupil			
Animal/ Insect - Live	Explosion	C C	Machinery/ Equip	oment -	Other 📮	Portable pov	wer or hand tools	
Any material, substance or product being handled, used or stored	Fire - Fire	Fighting	Machinery/ Equip	chinery/ Equipment for ng / conveying		Process plant, pipe-work or bulk storage		
Building, engineering structure or excavation / underground working	Floor, grown	und, stairs or any urface	Moveable container or package of any kind			Recurring injury		
Construction formwork, shuttering and falsework	Gas, vapo oxygen de	or, dust, fume or ficient atmosphere	Pathogen or infected material			Sport		
Electricity supply cable, wiring, apparatus or equipment	Handling p	person	Person - Client/ Service User/ Pupil/ Member of the public			Vehicle or associated equipment / machinery		
Entertainment or sporting facilities or equipment	Horseplay		Person - Employee/ Colleague			Violent incid	ent	
OTHER: Please Specify								
5. DESCRIPTION OF THE INCIDEN	IT	****THIS IS A MA	NDATORY FIELD**	**				
6. ADULT WITNESSES (This inform	nation shou	uld be collected for each	witness)		1 1			
Name			Number of Witness	es (Ma	x 5) 0	1 2	3 4	5
Address			Consent to record personal information obtained?					
			Job Title (If appropr	riate)				
7. WHAT HAPPENED IMMEDIATELY AFTER THE INCIDENT?								
What date was the injured parties line manager made aware of the incident:								

Please tick all the boxes which describe the action taken following the incident $\downarrow$								
First Aid Given Name of first aider Taken Home Returne	ed to work							
Taken directly to hospital from the scene of the accident  Admitted to Hospital None of the above								
If taken to hospital provide the following details if known ↓								
Name of GP / Doctor that provided treatment								
Name and address of Hospital attended								
8. INVESTIGATIONS ****THIS IS A MANDATORY FIELD****								
Each and every incident should be investigated. The investigation should be relevant to the type of incident that is being reported.  Therefore, some minor or trivial incident's may not require a full investigation. If this is the case, you should indicate why a full investigation has not been carried out. i.e. Sporting Injury No investigation reqd, or Known behavioural issues No Investigation reqd, etc.								
At the time of the incident was the person authorised:								
To be where they were?  To be doing what they were doing?								
Explain the outcome of any investigation or indicate why an investigation is not required								
YOU MAY SELECT 3 PEOPLE / MANAGERS TO BE AUTOMATICALLY ADVISED OF THIS INCID	ENT							
1.								
2.								
3.								
Close the report once all actions, investigations have been completed.	CLOS	CLOSED						
Remember to add the return to work date once known.		NO						
DATA CAPTURER DATE								

YOU MUST ENSURE THAT THIS INFORMATION IS ENTERED ONTO EEC.

For queries or guidance contact Matt at Educating Safely LLP on 07824 382443 or your Health and Safety advisor