



FIRST AID POLICY

Updated November 2023
Ratified by Full Governing Body March 2024
Due for review November 2024

Public Sector Equality Duty. We have carefully considered and analysed the impact of this policy on equality and the possible implications for those with protected characteristics, as part of our commitment to meet the Public Sector Equality Duty (PSED) requirement to have due regard to the need to eliminate discrimination, advance equality of opportunity and foster good relations

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1. Aims

The aims of our first aid policy are to:

- Ensure the health and safety of all staff, pupils 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

2. Legislation and guidance

This policy is based on the [Statutory Framework for the Early Years Foundation Stage](#), advice from the Department for Education on [first aid in schools](#) and [health and safety in schools](#), 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
- [Social Security \(Claims and Payments\) Regulations 1979](#), which set out rules on the retention of accident records
- [The Education \(Independent School Standards\) Regulations 2014](#), which require that suitable space is provided to cater for the medical and therapy needs of students

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

3. Roles and responsibilities

3.1 Appointed person(s) and first aiders

The school's appointed persons 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
- Sending pupils home to recover, where necessary
- Filling in an accident report on Evolve Accident Book the same day, or as soon as is reasonably practicable, after an incident.

- Keeping their contact details up to date

Our school's appointed persons and first aider's names are displayed on the staff notice board.

3.2 The Governing Board

The governing board has ultimate responsibility for health and safety matters in the school, but delegates operational matters and day-to-day tasks to the headteacher and staff members.

3.3 The Headteacher

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 school at all times
- Ensuring that first aiders have an appropriate qualification, keep training up to date and remain competent to perform their role
- Ensuring all staff are aware of first aid procedures
- 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 pupils
- Reporting specified incidents to the HSE when necessary (see section 6)

3.4 Staff

School staff are responsible for:

- Ensuring they follow first aid procedures
- Ensuring they know who the first aiders in school are
- Completing accident reports using Evolve Accident Book 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

4. First Aid Provisions

- First Aid provisions are available centrally in the First Aid Inspection rooms of each site.
- First Aid boxes are also located within the Science prep rooms, Technology Rooms and Physical education areas.
- The responsibility for maintaining adequate stocks of materials rests with the respective Subject Leader or First Aider at Primary.
- Fresh supplies of materials and First Aid kits for outdoor activities are available from the First Aid Manager at Southbourne and the School Office in the Primary School.

5. First aid procedures

5.1 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/ escort them to the first aid room, 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
- 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 first aider or relevant member of staff will contact parents immediately
- The first aider will complete an accident report form on the same day or as soon as is reasonably practical after an incident resulting in an injury
- For EYFS there will be at least 1 person who has a current paediatric first aid (PFA) certificate on the premises at all times.

5.2 Procedures to follow when a student is ill:

- Prompt assistance should be given by staff to a student who is unwell. When immediate simple treatment will not suffice, the parents or guardians will be contacted without delay, with a view to the pupil being collected from school and taken home. Parents and guardians are asked to provide emergency telephone numbers for use by the school.
- Use of the first aid rooms for purposes other than first aid inspections should be confined to Administering first aid, if appropriate
- Placing a sick pupil waiting for parents, if necessary
- Placing a student who is unwell and needs to withdraw from class for a short period of time
- If required, the accompanying pupil should be used to carry messages, otherwise they should return to class. The member of staff admitting a student to the first aid room should complete the record book. Students in the first aid room should not be neglected. Serious symptoms, such as in the case of concussion, have to be acted upon even though they may not manifest themselves for some time.

5.3 Emergency Procedures after an Accident:

- A First Aider should be summoned to attend and should take control of the medical needs of the casualty(s). A list of qualified First Aiders is displayed on the staff room notice-boards and reception office on each site.
- Other staff should take control of the situation by dispersing other students from the area of the accident
- If the situation demands, an Ambulance should be called by the first aider who will dial 999. Wherever possible, casualties should be accompanied to the hospital. In less severe cases it may be sufficient to transport the casualty to hospital by car.

- This should normally be undertaken by the pupil's parents or guardians. Should this not be possible, a member of staff may take student to hospital but it should be noted that such a journey should be undertaken on a voluntary basis. Every effort should be made to contact parents or guardians immediately.
- The school provides occasional business insurance for such ad hoc occasions. The driver must be accompanied by a second adult, who should the patients' condition worsen, be able to assist.

5.4 Off-site procedures

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

- A school mobile phone
- A portable first aid kit
- Information about the specific needs of students
- Parents contact details

Risk assessments will be completed by the subject leader prior to any educational visit that necessitates taking pupils off school premises. There will always be at least one first aider with a current paediatric first aid certificate on school trips and visits, as required by the statutory framework for the Early Years Foundation Stage.

6. Asthma, Anaphylaxis, Diabetes and Epilepsy:

Also see https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/638267/supporting-pupils-at-school-with-medical-conditions.pdf

6.1 Asthma:

It is recognised that immediate access to inhalers is essential.

Primary Phase

- Primary aged pupils will keep their inhaler in an accessible tray in their classroom. The classroom teaching assistant will be responsible for ensuring the asthma education is accessible during PE lessons and 'The Daily Mile'. Office staff will be responsible for the checking that inhalers kept in school are in date and operational. When the children are out at play, they are able to ask any member of staff to allow them access to their inhaler.
- In the event of an emergency, playground staff will be able to use the 'school inhaler' which will be accessible in close proximity with the medical supplies. This can be washed and reused as required.

Secondary Phase

- We allow all students with asthma to carry their own inhaler at all times. Parents can provide spare inhalers to be held by the First Aider if required. Bringing Medicine to School procedures must be followed as stated in the Medical conditions and medication policy.

6.2 Anaphylaxis:

- It is the school policy that a clear agreement is drawn up between the school and the parent of each student known to suffer from anaphylactic shock, authorising one or more trained individuals who have volunteered to give treatment. Allergy action plans are developed by the Allergy clinic and a copy should be issued to first aid. These are to be reviewed every 5 years or earlier. On an annual basis trained staff should attend online training for adrenaline pen administration.

6.3 Diabetes:

- This is a disorder in which the body is unable to control the amount of sugar in the blood. Insulin injections are the most common way of regulating blood sugar levels. It is the policy of the school that for each diabetic student there should be a written agreement between the school and the parent. This would be detailing arrangements for the administration of insulin and the monitoring of blood sugar levels, either by the child, parent or by a named staff member who has volunteered to do this. This care plan is developed with specialist diabetic nurses with the NHS and updated each year. Online training is available to school and is refreshed on an annual basis.

6.4 Epilepsy:

- This is a tendency to have recurrent seizures or fits, and it affects one in every 200 people. Some seizures involve 'petit mal' which is a brief interlude of unconsciousness. Witnessing a seizure can be frightening if they are convulsive; other students should understand what is happening so as to avoid undue panic. First Aid Staff are trained in emergency procedures for this condition as part of the first aid qualification. Epilepsy training and administration of Buccal midazolam, online e learning is available through Epilepsy Action Organisation website which should be updated each year.

7. Procedures for students with medical conditions requiring special arrangements:

- Students with medical conditions requiring special arrangements will be identified, generally, from SIMs and made available to staff via SIMs, Staff room/Reception or First Aid rooms. Specific advice regarding the ways in which members of staff are to respond to the needs of these students will be sought from parents, along with supporting documentation from health professionals or individual Healthcare Plan. Subject Leaders are responsible for making the information available to teaching/supply staff in their charge and ensuring that staff replacing for absent colleagues are aware of situations which might arise – the Cover Manager will also ensure that Supply Staff are made aware.
- Members of staff are reminded that, whilst the pupil requiring attention is important, their primary responsibility is for all the pupils in the teaching group and, in general, the advice about how members of staff are to respond will reflect this order of priority.
- The school acknowledges that there are students with mental health issues in particular concerns with self-harm and eating disorders. Staff members will refer all mental health concerns to the pastoral teams.

8. 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

No medication is kept in first aid kits.

First aid kits are stored in areas around the school. A list of first aid kits location is listed on the staff noticeboard.

9. Record-keeping and reporting

9.1 Accident record book

- An accident form will be completed as soon as possible after the accident occurs by the member of staff or first aider who deals with it. The accident form is available on Evolve Accident Book.
- As much detail as possible will be supplied when reporting an accident
- Information about injuries will also be kept in the pupil's educational record
- 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.

9.2 Reporting to the Health and Safety Executive

The First Aid Manager will keep a record of any accident which results in a reportable injury, disease, or dangerous occurrence as defined in the RIDDOR 2013 legislation (regulations 4, 5, 6 and 7). The First Aid Manager will report these to the Health and Safety Executive as soon as is reasonably practicable and in any event within 10 days of the incident.

Reportable injuries, diseases or dangerous occurrences include:

- Death
- Specified injuries. These are:
 - 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
- Where an accident leads to someone being taken to hospital
- Where something happens that does not result in an injury, but could have done
- 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:
 - The collapse or failure of load-bearing parts of lifts and lifting equipment
 - 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
 - An electrical short circuit or overload causing a fire or explosion

Information on how to make a RIDDOR report is available here: www.hse.gov.uk/riddor/report.htm

9.3 Notifying parents

The first aider will inform parents of any accident or injury sustained by a student, and any first aid treatment given, on the same day, or as soon as reasonably practicable.

9.4 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 school'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 [local child protection agencies] of any serious accident or injury to, or the death of, a student while in the school's care.

10. Blood –Avoiding Contamination from Blood Borne Viruses:

What are blood borne viruses (BBVs)?

BBVs are viruses that some people carry in their blood and which may cause severe disease in certain people and few or no symptoms in others. The virus can spread to another person, whether the carrier of the virus is ill or not. All First Aid staff are recommended by First Aid Training providers to receive a Hepatitis B vaccination. See HSE website for further details www.hse.gov.uk/pubns

The main BBVs of concern are:

- hepatitis B virus (HBV), hepatitis C virus and hepatitis D virus, which all cause hepatitis –a disease of the liver
- human immunodeficiency virus (HIV) which causes acquired immune deficiency syndrome (AIDS), affecting the immune system of the body

10.1 Blood Borne Viruses including the cleaning of blood and body fluid spillages

All staff should be familiar with this procedure before having to handle blood:

- wash hands first
- put on disposable gloves
- clean any wound as necessary or ask a first aider to treat it
- dress any wound if necessary
- dispose of the gloves and wipes, and put all contaminated material in a yellow clinical waste bin located in the First aid room. Disposal of the contents is made by a dedicated waste disposal contractor.
- wash hands thoroughly again
- record incident on an accident form

10.2 Action after possible infection with a BBV

If you are contaminated with blood or other body fluids, take the following action without delay:

- wash splashes off your skin with soap and running water
- if your skin is broken, encourage the wound to bleed, do not suck the wound –rinse thoroughly under running water
- wash out splashes in your eyes using tap water or an eye wash bottle, and your nose or mouth with plenty of tap water –do not swallow the water
- record the source of contamination
- Contact the nearest Accident and Emergency department for advice, without delay. The circumstances of the incident need to be assessed and consideration given to any medical treatment required. Treatment might be appropriate following infection with a BBV, but to be effective, it may need to be started quickly.
- Further information on Blood Borne Viruses can be found on www.hse.gov.uk

10.3 Cleaning of blood and body fluid spillages

- Clean up all spillages of blood, faeces, saliva, vomit, nasal and eye discharges immediately and wear personal protective equipment
- When spillages occur, clean using a product that combines both a detergent and a disinfectant and use as per manufacturer's instructions. Ensure it is effective against bacteria and viruses and suitable for use on the affected surface
- Never use mops for cleaning up blood and body fluid spillages – use disposable paper towels and discard clinical waste as described below
- Make spillage kits available for blood spills

10.4 Laundry

- Wash laundry in a separate dedicated facility
- Wash soiled linen separately and at the hottest wash the fabric will tolerate
- Wear personal protective clothing when handling soiled linen
- Bag children's soiled clothing to be sent home, never rinse by hand

10.5 Clinical waste

- Always segregate domestic and clinical waste, in accordance with local policy
- Used nappies/pads, gloves, aprons and soiled dressings are stored in correct clinical waste bags in foot-operated bins
- Remove clinical waste with a registered waste contractor
- Remove all clinical waste bags when they are two-thirds full and store in a dedicated, secure area while awaiting collection
- Sharps bins are provided for safe disposal of sharps in the first aid rooms.

11. 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 First Aid manager will keep a register of all trained first aiders, 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.
- At all times, at least 1 staff member will have a current paediatric first aid (PFA) certificate which meets the requirements set out in the Early Years Foundation Stage statutory framework and is updated at least every 3 years.

12. Monitoring arrangements

This policy will be reviewed by the School Business Manager and the First Aid Manager every 3 years.

At every review, the policy will be approved by the full governing board.

13. Links with other policies

This first aid policy is linked to the

- Health and safety policy
- Risk assessment policy
- Policy on supporting pupils with medical conditions
- Administering Medication policy