

# First Aid Policy

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First Aid can save lives and prevent minor injuries becoming major ones. 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 the pupils at the school (including off-site activities). In general, the consequences of taking no action are likely to be more serious than those of trying to assist in an emergency.

#### **Aims**

To provide effective First Aid support for all pupils, staff and visitors.

To ensure that all staff and visitors are aware of their roles and responsibilities in relation to First Aid and the First Aid systems in place.

To support awareness of Health & Safety issues within school and during off-site activities, in order to reduce the risk of illness or injury.

The Senior Leadership Team in all our schools will always act in the best interests in the health and safety of all children, staff and visitors. The Senior Leadership Team will need to make flexible arrangements to cover the points in this policy to respond to e.g. staff absence, school trips etc. The Senior Leadership Team will ensure that all responsibilities with regard to first aid are covered when making these arrangements

## Legislation and guidance

This policy is based on the <u>Statutory Framework for the Early Years Foundation Stage</u>, advice from the Department for Education on <u>first aid in schools</u> and <u>health and 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
- <u>The Management of Health and Safety at Work Regulations 1992</u>, 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 School Premises (England) Regulations 2012</u>, which require that suitable space is provided to cater for the medical and therapy needs of pupils

# Roles and Responsibilities

#### The Governing Body

Ensure adequate First Aid provision as outlined in the Health & Safety (First Aid) Regulations 1981, having regard to the most up-to-date guidance from the Department for Education.

Monitor and respond to all matters relating to the health and safety of all persons on school premises.

Review this policy and any associated risk assessments and practices annually.

#### The Headteacher

Ensure the First Aid Policy is put into practice and put detailed procedures in place according to the specific needs of the school.

Ensure that an appropriate number of appointed persons and trained first aid personnel are present in school at all times.

Ensure that, where there are children in Early Years Foundation Stage, there is one person on site at all times with a current paediatric first aid certificate.

Ensure that training is kept to date and trained staff remain competent to perform their role.

Ensure that the school's First Aid Policy is available for all staff and parents/carers.

Implement suitable induction procedures to ensure that all new staff are made aware of First Aid procedures in school.

#### All School Staff

Familiarise themselves with the first aid procedures (including this policy) in operation and ensure that they know who the current First Aiders are. These are on display in the staff room and in the school office.

Be aware of specific medical details of individual students as given by the Senior Leadership Team. Medical details for individual students in each class will be provided by the office to class teachers. Medical boards in the staff room will include the names, photos and care plans (where appropriate) of individual children in the school with medical needs.

Inform the headteacher or their manager of any specific health conditions or first aid needs.

Ensure that the children in their care have an awareness of the procedures in operation as appropriate to their age and development.

Send a child who feels generally 'unwell' to the nearest First Aider.

Send a child who has minor injuries to the nearest First Aider.

Ensure that any child who feels unwell or who has an injury is not left unsupervised by an adult at any time.

Ensure that they have a current medical consent form for every student that they take out on a school trip, which indicates any specific conditions or medications of which they should be aware.

Ensure that they have all the necessary emergency medication for all children in their care when children are taken off site for school trips etc.

Ensure that arrangements are in place to maintain the First Aid support outlined in this policy whilst away from the school site.

Have regard to their own personal safety.

Have regard to the Safeguarding (Child Protection) policy and procedures.

In the event of a minor injury, staff in possession of a valid Emergency First Aid in Schools Certificate may treat minor injuries e.g. grazed knees, bruised shin. Other members of staff will use their professional judgment and treat appropriately according to their duty of care.

Ensure that all first aid administered is recorded on an accident form and then correctly filed and shared with parents/carers according to each site's procedure as displayed in the staff room and school office

In the event of a major injury, administer appropriate first aid (if possible) and call for a nominated person and a member of the Senior Leadership Team. The emergency services should be called immediately if appropriate.

Major injuries should be reported to the Senior Leadership team who will then report the injury, where appropriate, to the Health and Safety team via the Senior Administration Officer in the school office.

#### All Members of School Staff with First Aid Training

Give immediate help to casualties with common injuries or illnesses and those arising from specific hazards at school.

When necessary, ensure that an ambulance or other professional medical help is called.

#### **SENDCos**

Update medical boards in the staff room with names, photos and care plans (where appropriate) of all individual children with medical needs at the start of each academic year.

Update medical boards as appropriate with changes or new, additional needs, including for any newly enrolled children throughout the year.

Raise awareness amongst staff during staff briefings of children with particularly severe or complex medical needs, or any new medical needs throughout the year.

Work together with the school office to ensure that all medication and medical consent forms are stored so that they are easily accessible in line with procedure on each school site (as displayed in the staff room and school office).

Arrange training for staff, together with the school nurse team, on the use of emergency medication – inhalers, adrenaline auto-injectors etc.

Work together with the school office and parents/carers to arrange for the safe disposal of any expired medication, or that which is no longer needed. Medicines, which are in use and in date, should be collected by the parent at the end of each term. Date expired medicines or those no longer required for treatment will be returned immediately to the parent for safe disposal.

#### The School Office

At the start of each academic year, provide all class teachers with up-to-date information on the medical needs of the individual children in their class.

Update class teachers throughout the school year of any changes to existing medical conditions or any new medical conditions for the individual children in their class.

Work together with the SENDCos to ensure that all medication and medical consent forms are stored so that they are easily accessible in line with procedure on each school site (as displayed in the staff room and school office).

Work together with the SENDCos and parents/carers to arrange for the safe disposal of any expired medication, or that which is no longer needed. Medicines, which are in use and in date, should be collected by the parent at the end of each term. Date expired medicines or those no longer required for treatment will be returned immediately to the parent for safe disposal.

Ensure that all class teachers and staff accompanying pupils on trips have current and up-to-date medical information indicating any specific conditions or medications for all children in their care.

Report more major injuries to the Health and Safety team in liaison with the Senior Leadership Team.

#### Parents/Carers

Inform the school prior to a child's start date of any existing medical conditions. Inform the school immediately if their child develops a new medical condition following their start date.

Ensure that any developments or changes in a child's medical condition are shared with the school.

Ensure that all emergency medication (inhalers, Adrenaline Auto-Injectors etc.) kept in school is in date. It is the parents'/carers' responsibility to provide the medication and to be aware of when medication kept in school will expire and to bring in replacement medication. Medicines, which are in

use and in date, should be collected by the parent at the end of each term. Date expired medicines or those no longer required for treatment will be returned immediately to the parent for safe disposal.

#### The Appointed Person

Ensure that a child with an illness or injury is looked after and supervised. Ensure that first aid stock is ordered and maintained.

Where required, ensure an ambulance has been called and inform the Senior Leadership Team that the emergency services have been contacted.

#### The Nominated Person MUST be called and a member of SLT informed for:

Any serious head or facial injury.

Vomiting which is possibly caused by poisoning. Severe breathing difficulties.

Any deep cut, or cut that continues bleeding for more than a few seconds. Any potential joint injury e.g. ankle, elbow etc.

Any potential break.

Any injury caused by the deliberate actions of another pupil.

#### Off-site procedures

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

- A mobile phone (number shared with Senior Leadership Team on risk assessment)
- A portable first aid kit
- Information about the specific medical needs of pupils
- · Parents' contact details

Risk assessments will be completed by the class teacher in line with the Educational Visits and Activities Policy.

For Early Years, 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.

#### First Aid Kit

Teaching Assistants carry a basic first aid kit for morning and lunchtime play and these are also kept in classrooms. There is a full first aid kit located in the school office and in other areas specified on site specific information boards located in the staff room and the school office. If members of staff who carry first aid kits are running low on first aid material, they must inform the appointed person. The appointed person will replenish the first aid kit from central supplies. The appointed person will liaise with the Senior Leadership Team to place orders when central supplies are running low.

# Hygiene/Infection Control

All staff should take precautions to avoid infection and must follow basic hygiene procedures. Staff should have access to single-use disposable gloves and hand- washing facilities, and should take care when dealing with blood or other body fluids and disposing of dressings or equipment.

# **Emergency medication**

SENDCos work with parents/carers and the school nurse to put care plans in place for children with medical needs. This includes conditions that require emergency medication such as asthma and anaphylaxis. Parents/carers must inform SENDCos of any change in a child's condition e.g. if their asthma

has worsened or is being impacted by the weather etc. so that SENDCos can put appropriate measures in place.

## Asthma Inhalers

It is the responsibility of parents/carers of pupils who have asthma to supply the School Office with an in date asthma inhaler clearly labelled with their child's details. It is the parents'/carers' responsibility to be aware when the medication has expired beyond



the use by date and to bring replacement medication to school accordingly. This and other medication is kept in a secure central place in the School Office. A Central Medicines Register is kept and maintained in school.

Staff are made aware of which children suffer from asthma on the medical board in staff rooms and all class teachers have class lists including all the medical needs of the children in their class.

Training on managing asthma in school for support staff and identified members of teaching and senior staff is provided on an annual basis.

Pupils who suffer from severe asthma will have their inhaler available to them at all times. How their inhaler will be made available to them at all times will be agreed together with the parents/carers and outlined in the child's care plan according to their age; stage of development; and understanding of their condition. The SENDCo will liaise with parents/carers of children with moderate/severe asthma and the child's class teacher to put appropriate arrangements in place. These will be included as part of the child's care plan and shared with all members of staff in staff briefings and on the staff room medical board.

Class teachers will make arrangements to ensure that asthma medication is collected prior to PE lessons or lessons involving significant physical activity.

Class teachers will make arrangements to ensure that children who suffer from asthma have their inhaler easily accessible on any school trip or off-site activity.

## Adrenaline Auto-Injectors (EpiPen etc)

It is the responsibility of parents/carers of pupils who may need treatment using an adrenaline auto-injector for allergies/anaphylactic shock to supply the School Office with two adrenaline auto-injectors clearly labelled with their child's details. It is the parents'/carers' responsibility to be aware when the medication has expired beyond the use by date and to bring replacement medication to school accordingly. One adrenaline auto-injector is kept in a secure central place in the School Office. The other adrenaline auto-injector is stored in a secure place in the child's classroom. A Central Medicines Register is kept and maintained in school.

Staff are made aware of which children may need treatment using an adrenaline auto-injector for allergies/anaphylactic shock on the medical board in staff rooms and all class teachers have class lists including all the medical needs of the children in their class.

Adrenaline auto-injector training for support staff and identified members of teaching and senior staff is provided on an annual basis.

If a member of staff finds themselves in the situation requiring the use of an adrenaline auto-injector on a child, they must ask another member of staff to call 999 immediately to request medical assistance or call 999 immediately after having administered the adrenaline auto-injector if no other member of staff is present. Following this, the child's parent/carer must be phoned immediately and a member of the Senior Leadership Team must be informed immediately.

Class teachers will make arrangements to ensure that children who may need treatment using an adrenaline auto-injector for allergies/anaphylactic shock have their adrenaline auto-injectors easily accessible on any school trip or off-site activity. Adrenaline auto-injectors will also be available for any activity in school away from the classroom where the child risks being exposed to any allergen that may cause them to suffer from anaphylaxis.

#### Other emergency medication:

The school is aware that there are other conditions requiring emergency medication. It is the responsibility of parents/carers to inform the school of any condition that might require emergency medication. It is the parents'/carers' responsibility to provide the school with the appropriate medication.

The SENDCo will liaise with parents/carers to put an appropriate care plan in place and inform members of staff accordingly. Please refer to Supporting Pupils at School with Medical Conditions Policy for further information. This can also be found on the school website.

### Allergies

It is the parents'/carers' responsibility to inform the school of any allergies a child may have. Children's photos and their dietary needs are displayed in the school kitchen. Class teachers receive lists from the school office at the start of each year with all dietary needs including allergies indicated.

Children's names and photos will be included on the medical board for all members of staff in the case of severe allergies.

# Head Injury

As with all injuries, the severity of the head injury will be established and an appropriate course of action for first aid will be followed. All members of staff will be particularly vigilant when a head injury has been sustained as children can experience delayed concussion or headaches.

After having treated a child for a head injury, the first aider will ensure that the members of staff who will be in class with the child following the injury are informed so that they can monitor the child and liaise with the parent/carer at the end of the day. The first aider will also follow the appropriate procedure as outlined on each specific site in the school office and in the staff room to ensure that the parent/carer of the child who has sustained a head injury is telephoned and informed. This telephone call will be made regardless of how serious or not the head injury might be. The members of staff in class with the child who sustained the head injury will ensure that the accident form is sent home at the end of the same day the incident happened.

# Record Keeping and Reporting

#### **Accident Forms**

Accident forms will be completed in all cases where first aid has been administered for any injury. Accident forms will be completed for **all** head injuries. A template accident form can be found in appendix 1. All sections will be completed and will be signed by the member of staff who administered the first aid. The original accident form will be kept on site. A copy of the accident form will be sent home to parents on the same day as the injury was sustained. Procedures for ensuring parents receive copies of the accident form are detailed in the school office and staff room on each school site.

#### Notifying Parents/Carers

For any injury resulting in first aid being administered, parents/carers will receive a copy of the accident form completed on the same day.

Parents/Carers will notified by telephone if: the injury is considered to be a serious injury (or more than minor injury); requires attendance at hospital or other intervention by a medical professional; was caused by another child; has left a significant mark; or is a head injury (including on the face).

We will notify parents/carers by calling the contact numbers provided on the emergency contact form and leave a message should the parents/carers not be contactable. In the event of an injury where the child needs to go home, we will continue to attempt to make contact with the parents/carers whilst supervising the child until the parents/carers arrive.

In the event that the child requires hospital treatment and the parents/carers cannot be contacted prior to attendance, a member of staff will accompany the child to hospital and remain with them until the parents/carers arrive at the hospital.

#### Accident Form Analysis

Accident Forms will be analysed periodically at the end of each Autumn term for the previous half-term and at the end of the Summer term for the previous half-term.

The location, type of injury, treatment given and whether calls home were made for the relevant injuries will be analysed. This analysis will be shared with the Senior Leadership Team and will help the school identify accident trends and possible areas for improvement in the control of health and safety risks. It will inform any necessary reviews to procedure or training needed for staff. Analysis of accident records will take place at the discretion of the headteacher at other times in the year, for example, if members of staff are reporting high incidence of accidents in the playground, so as to inform any necessary reviews.

#### Reporting Accidents to HSE

Under the Reporting Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR) we have a statutory duty to report some accidents to the HSE. We follow the guidance as laid out in *Incident Reporting in Schools (accidents, diseases and dangerous occurrences): Guidance for Employers (HSE, 2013)* 

#### Reporting Accidents to Ofsted and child protection agencies

The headteacher will notify Ofsted of any serious accident, illness of injury to, or death of, a pupil 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 Lambeth / Southwark Children's Services of any serious accident or injury to, or the death of, a pupil while in the school's care.

# **Appendices**

The following appendices will be adapted according to the specific information on each school site.

Appendix 1: Template Accident Form to be adapted to reflect each school site

Appendix 2: First Aid Stock Checklist

Appendix 3: Template for display for First Aid Information for each school site

#### This policy should be read in conjunction with:

Safeguarding (Child Protection) policy

Administration of Medicine on School Premises Policy

Health and Safety Policy

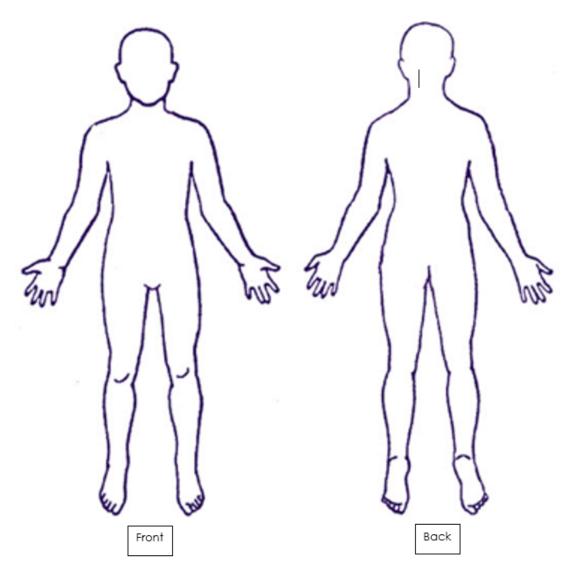
Supporting Pupils at School with Medical Conditions Policy

Guidance on First Aid for Schools (DfEE)

**Educational Visits and Activities Policy** 

# Appendix 1: Gipsy Hill Federation Form First Aid Injury Form Template

Dear Parents/Carers,		Brief account of the incident:			
This is to advise you that your c	•				
school. Please see below for de	etails.				
Childs name					
Class					
DateTim	ne	Handed over to:			
Location of incident: Nursery Reception/Year 1/2 playground Year 3, 4, 5 & 6 playground  Classroom PE lesson Stairs Other					
Treatment given:	Outcome:	Should office call home? Y/N			
Please circle	Please airale	Parents/Carers contacted by phone: Y/N Spoken to: Y/N			
Ice pack/cold compress	Returned to	Name of parent/carer spoken to:			
Cold water applied	play/lessons	Message Left <b>Y/N</b>			
Washed with water	Sent home				
Antiseptic wipe	Ambulance called				
Plaster/Bandage applied					
Rest	Additional advice for	parents/carers: This note describes the treatment given. Please check			
Observation	that the injury/illness in	nproves as expected. <b>Head injuries</b> : If your child complains of			
Other	headaches, dizziness,	blurred vision or vomiting, please consult your doctor immediately.			
	Signed	Print			



Please circle the injury/injuries sustained
Graze
Scratch
Cut
Knock
Burn
Other

Please indicate on the body image where on the child's body the injury occurred.

If there is more than one injury please ensue all injuries are indicated on the body image.

# Appendix 2: First Aid Stock Checklist

There is no mandatory list of items for a first-aid container. However, the HSE recommend that, where there is no special risk identified, a **minimum** provision of first aid items is as follows:

#### First Aid Container

- Leaflet giving general advice on first aid
- 20 individually wrapped sterile adhesive dressings (assorted sizes)
- two sterile eye pads
- four individually wrapped sterile triangular bandages
- six safety pins
- six medium sized (approximately 12cm x 12 cm) individually wrapped sterile unmedicated wound dressings
- two large (approximately 18cm by 18cm) sterile individually wrapped unmedicated wound dressings
- one pair of disposable gloves

#### Basic First Aid Kit

- Leaflet giving general advice on first aid
- six individually wrapped sterile adhesive dressings (assorted sizes)
- two individually wrapped sterile triangular bandages
- two safety pins
- one large (approximately 18cm by 18cm) sterile individually wrapped unmedicated wound dressing
- individually wrapped moist cleansing wipes
- one pair of disposable gloves

# Appendix 3: Template for Display for First Aid Information

# First Aid Key information

Appointed Person(s):	
School staff trained in emergency first aid:	All Support Staff receive annual first aid training in November.
School staff trained in paediatric first aid:	Roxana Fox Sashenie Ewers Tammy Morris
Location of Central First Aid Boxes:	Small Hall
Location of children's emergency medication:	Emergency Medication is stored in the school office
Procedure for Copying / Sharing / Filing Accident Forms:	Accident forms and completed by staff members who administer first aid to the child with the injury.  The adult leading on the first aid scans the accident forms and shares this with the school office.  The adult leading on the first aid is responsible for ensuring that a copy of the completed accident form is sent home to parents and carers.
Procedure for Notifying Parents/Carers of Head Injuries:	The staff member who administers first aid makes the call to the parents/carers.  Contact information is recorded on the accident form.