

First Aid Policy

Last Reviewed: April 2018

Next Review Due: Spring Term, First Half, 2018/19

Reviewed by John Ingrassia, Headmaster

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1 Scope

This guidance is applicable to all those involved in the provision of first aid related to school activities including EYFS staff. This Policy is developed with regard to the recommendations and requirements of the EYFS for a range of aspects of health & well-being.

2 Objectives

- 2.1 To ensure that there is an adequate provision of appropriate first aid at all times
- **2.2** To ensure that where individuals have been injured there are suitable mechanisms in place to provide remedial treatment.

3 Responsibilities & Implementation

- **3.1** The Health & Safety Co-Ordinator & First Aid Co-Ordinators will be responsible for the implementation of this policy.
- 3.2 The Health & Safety Co-Ordinator & First Aid Co-Ordinators will undertake a risk assessment to determine the first aid needs. This will include consideration of the following:
 - Size of the school and whether it is on split sites / levels
 - · Location of the school
 - · Specific hazards or risks on the site
 - Staff or pupils with special health needs or disabilities
 - Previous record of accidents / incidents at the school
 - Provision for lunchtimes and breaks
 - Provision for leave / absence of first aiders
 - Off site activities, including trips
 - Practical departments, such as science, technology, PE
 - Out of hours activities
 - Contractors on site and agreed arrangements.

4 Principles applying to the provision of First Aid

4.1 Responsibilities

All staff will follow the procedure in dealing with accidents as detailed in this policy.

4.2 Records

Details of any incident, which requires treatment, will be recorded on the Engage system using the Accident Report form.

This includes any incident which requires First Aid to be administered to a member of staff, pupil or other person – either on the School premises or engaged in activities sponsored by the School (including visits). It applies to every case where First Aid is given whether from a remote location or in the Medical Room. RIDDOR reporting requirements must be followed as per Health and Safety Policy.

4.3 First Aid materials

First Aid materials are held at various locations throughout the School where accidents are considered most likely to happen. Such locations are prominently marked and all staff are advised of their position at induction training and in the Staff Handbook. Listed materials are checked for use-by date, contamination etc and replenished regularly, at least termly, by a First Aid Co-Ordinator who signs and dates a sheet to identify when these checks have taken place.

4.4 Out of school activities

Adequate and appropriate First Aid provision will form part of the arrangements for all out of school activities. All groups will have a qualified First Aider with them (paediatric first aid for EYFS pupils) and the First Aid pack will be comprehensively stocked. A First Aid trip checklist (APPENDIX A) will be completed by the lead teacher. Parents will complete a Medical Form ahead of the residential trip (APPENDIX B)

4.5 First Aiders

At least one qualified person will be on site when children are present. All such staff will be trained in Paediatric First Aid to a basic minimum level of competence. The names of First Aid Co-Ordinators and their working hours are displayed in the School Office. Staff First Aid training is recorded on the Engage system. This is monitored by the Head of Finance & Operations.

First aiders will give immediate help to those with common injuries or illnesses and those arising from specific hazards, and where necessary ensure that an ambulance or other professional medical help is called

The school has appointed two First Aid Co-Ordinators in addition to first aiders. Such persons have received formal training and their duties may include:

- o take charge when someone becomes ill or is injured
- o look after first aid equipment, eg restocking of supplies
- o ensure that an ambulance or other professional medical help is called when appropriate.

First aid and First Aid Co-ordinator training will be refreshed every 3 years

4.6 First Aid Policy

This First Aid Policy will be reviewed annually or immediately if any pupil or staff with a medical condition that may need special provision joins the school.

5 Dealing With Accidents

If a pupil has an accident, they should be dealt with by staff present unless it is deemed to be serious enough to require a second opinion when one of the appointed first aiders should be sent for.

In the case of distress, pupils are taken to the Medical Room for recovery. The staff member accompanying the child will advise a colleague of their whereabouts and a second child will remain with the staff member and the patient in line with Child Protection and Safeguarding procedures. The staff member should explain what is happening to the injured child.

For more serious accidents (other than minor cuts and abrasions) the pupil will be sent to hospital with their parent/guardian if contact has been made in a timely manner, or by ambulance. Instructions on contacting the Emergency Services (Appendix E) are by the phones in the School Office, the swimming pool and in the Site Manager's Office. The Headteacher and members of the SLT will be informed immediately. If a parent/guardian cannot accompany immediately and a child is going to hospital in an ambulance, a member of staff will accompany. The School Secretary will prepare a note of Parent/guardian contact details for the Ambulance crew if the parent can not accompany. If unable to accompany and an ambulance is called, parents/guardians should be:

- given the name of the hospital to which their son/daughter has been taken
- asked to attend the hospital as a matter of urgency
- reassured to prevent parental distress and another possible accident as they travel to hospital Pupils must be sent to hospital **immediately** by ambulance in these cases:
 - any head injuries and wounds needing stitches
 - all suspected fractures

if there has been any amount of unconsciousness, even for a few seconds.

6 Dealing With Sick Pupils

If a teacher feels that a child is not well enough to continue with the School day, a member of staff will phone the office to ask them to contact parents. The child will be brought to the School Office (except in extreme cases) and the parents will be contacted and asked to take direct responsibility for the pupil (remove the pupil from the premises). The responsibility for deciding whether the pupil should go home or not primarily resides with the class teacher/tutor. If pupils become unwell at break or lunch times, the teacher(s) on duty should deal with the situation.

7 Blood Borne Viruses (BBVs)

If you are a first aider in the workplace, the risk of being infected with a BBV while carrying out your duties is small. There has been no recorded case of HIV or HBV being passed on during mouth-to-mouth resuscitation. The following precautions can be taken to reduce the risk of infection:

- cover any cuts or grazes on your skin with a waterproof dressing
- wear suitable disposable gloves when dealing with blood or any other body fluids
- use suitable eye protection and a disposable plastic apron where splashing is possible
- use devices such as face shields when you give mouth-to-mouth resuscitation, but only if you have been trained to use them;
- wash your hands after each procedure.

8 Allergies and Administering Medication to Pupils

8.1 The storage and administration of medicines.

Parents complete documentation on registering their pupil to notify the School of any allergies/health issues.

- If the child requires an inhaler or medication the parent completes the Parent Agreement for Windlesham School to Administer Medicine form (APPENDIX C) and provides the relevant medicine(s) to the School.
- Annually completed forms for inhalers/longer term treatment are kept in the School Office and Medical Room.
- Forms for short term treatment such as anti-biotics are kept in the School Office.
- If a child needs medicine during the school day without advance notification by the parent, two
 different members of staff need to obtain telephone consent from the parent and confirmation that
 the child is not allergic to the medicine to be administered. The staff should each make a written
 record of this and the parent then completes the form (APPENDIX C) on their arrival at School. This
 is a last resort only.
- Teachers' conditions of employment do not include giving medication or supervising a pupil taking
 it, although staff may volunteer to do this. Any member of staff who agrees to accept responsibility
 for administering prescribed medication to a pupil should have proper training and guidance. He or
 she should also be aware of possible side effects of the medication and what to do if they occur.
 The type of training necessary will depend on the individual case.

8.2 Children requiring Inhalers/Epipens

Two labelled inhalers are kept in school with the appropriate administration device if used. One inhaler to be kept in the Medical Room and one with the child if the child is old enough to self-administer and manage their inhaler. The parent must complete a medicine administration form in the School Office.

8.3 Children with allergies requiring medical treatment.

Two sets of their medicines are kept in School. One with the child or teacher in a locked cupboard or drawer as necessary and one in the First Aid cupboard in the staff room. Parent to fill in medical form with details of allergy, how it presents and treatment plan.

9 First Aid Procedure

9.1 Procedure in case of an accident

Teacher in charge to:

- Assess nature of incident severity and whether another adult is required for support.
- Call for an appointed First Aider if required. Another adult or two children to fetch them.
- Access First Aid box as required sited in the Medical Room, outside the main school office, on top floor of Cooper House, in staff room, swimming pool, upstairs in Upper School, in Reception M (annex to L5), in Nursery area and in cupboard of L4's cloakroom area.
- Treat at one of these sites for minor cuts and abrasions. Wounds to be washed and dressed if necessary. Waste to be disposed of appropriately.

9.2 Procedure for head/face area injuries

Treat child, phone office, parents must be advised and invited to view if they wish and to take child home or to hospital. A Head Injury Advice leaflet is sent home with the child in these instances.

9.3 Procedure for nose bleeds

Treat child; notify office; office will then notify parent/carer that the child has had a nose bleed either via email or a note. If it is a significant nose bleed parents will be advised by telephone at the time it occurs.

9.4 Procedure for bruising/falls

Ice packs are in all First Aid boxes. Iced pads are kept in the fridge in the Medical Room. Singles can be applied to small areas.

9.5 Shock and other incidents requiring a seated treatment

In the Medical Room there are chairs, a bed and blankets for treatment.

9.6 Accident Reporting

All incidents should be recorded on an Accident Report on Engage and the Class Tutor/Teacher should be informed. Parent to be seen by person dismissing the pupil at the end of the day. It is the responsibility of the Class Tutor/Teacher to ensure the Club supervisor knows.

10 Items in First Aid Boxes

The contents of a first aid box will be in accordance with the guidance given in HSE document "Basic advice on first aid at work" INDG 347

- a leaflet giving general guidance on first aid (for example, HSE's leaflet Basic advice on first aid at work);
- Dressings
- Tape
- Assorted plasters
- Cleansing wipes
- Sling
- Ice pack
- Large sterile individually wrapped unmedicated wound dressings
- Medium-sized sterile individually wrapped unmedicated wound dressings:
- Disposable Gloves
- individually wrapped triangular bandages, preferably sterile;
- Vomit bags

- Resuscitation face shield
- [3]sterile eye pads;
- safety pins;

11 Disposal of Waste Materials

All body fluids, blood etc, which are to be thrown away, should be placed in marked bins which in the Medical Room and the cloakroom outside the School Office. These are to be emptied and disposed of by the Site Manager.

Vomit and other fluids can be covered with prepared substance and Site Manager requested to clear.

12 Legal Requirements & Education Standards

References:

- A: Handbook for the Inspection of Schools The Regulatory Requirements, Part 3 (www.isi.net)
- B: Reference Guide to the key standards in each type of social care service inspected by Ofsted (www.ofsted.gov.uk)
- C: "Health and Safety at Work" Section H of the ISBA Model Staff Handbook,
- D: " Health and Safety and Welfare at Work" Chapter N of the ISBA Bursar's Guide
- E: "Insurance" Chapter K of the Bursar's Guide by HSBC Insurance Brokers Ltd
- F: Early Years Foundation Stage (EYFS) Checklist and Monitoring Reference for Inspectors (www.isi.net)
- G: DfE "Guidance on First Aid for Schools" (www.dfe.gov.uk)
- H: HSE home page, First Aid at Work (www.hse.gov.uk)
- I: MOSA Guidance: "First Aid Provision and Training in Schools" (www.mosa.org.uk)

Appendix A: MEDICAL INFORMATION FOR TRIP FORM

First aid and medical provision

Trip Venue & Yo	ear Group:	•••••	
Completed by:	Date:		
Medical forms complete	ed by parents?	(sign to confi	rm)
Staff trained to administ	ter medicine?	(list names)	
Staff First Aid qualified		(list names)	
Medical help available?	Local hospital		_
Emergency Plan	Local doctor		_
Contact numbers	Venue Windlesham School: 01273 553645 School Mobile (taken on trip) : Party Leader mobile phone (or other) please specify		
	Out of hours School number (i.e. Headteacher or other)		
Pupil list (with names an	nd contact numbers of parents)		(sign to confirm)
I have read and underst	ood the Windlesham School emergency procedures		_(sign to confirm)

Appendix B: RESIDENTIAL TRIP CONSENT / MEDICAL INFORMATION SHEET

Pupil Details: Surname	Forename	
I agree to my child taking part in this trip the need for good conduct and responsib		ipation in any or all of the activities described. I acknowledge
Emergency details		
medical authorities present.	dical, surgical or dental treatment, including general anaesth	etic and blood transfusion, as considered necessary by the
b. I may be contacted by telephoning the	following number(s):	
Home (full number)	Work (full number)	
Mobile	Mobile 2	
c. In case of emergency, please give furth		
Telephone number	Mobile number	
Relationship to child		
d. Child health service details: Medical ca		

Appendix B (Contd.) Medical information

Does your child suffer from any of the following conditions? (Cross out the YES or NO which does not apply)

Asthma	YES/NO	Bronchitis	YES/NO
Chest Problems	YES/NO	Diabetes	YES/NO
Epilepsy	YES/NO	Fainting Attacks	YES/NO
Heart Trouble	YES/NO	Impaired/Restricted vision	YES/NO
Migraine	YES/NO	Raised Blood Pressure	YES/NO
Tuberculosis	YES/NO		

If YES to any of the above, please provide details:
Please write if there are any limitations or restrictions for your child as a result of their condition:
Does your child suffer from any other condition requiring medical treatment, including medication? YES/NO. If YES, please provide full details:
Is your child allergic or sensitive to any medication, insect bites or food e.g. nut allergy? YES/NO. If YES, please provide full details:
Has your child been immunised against the following diseases?
Poliomyelitis YES/NO Tetanus (lock jaw) YES/NO If YES to Tetanus, please give date if known

Is your child taking any form of medication on a regular basis? YES/NO. If YES, please give full details, indicating the type of medication and dosage:

Appendix B (Contd.)

Please ensure that your child has adequate supplies of medication and dosage. To the best of your knowledge, has your child been in contact with any contagious or infectious diseases, or suffered any recent condition that may become infectious or contagious? YES/NO. If YES, please give full details:				
Additional Information (e.g. sleeping problem	s)			
Insurance cover				
	egal liabilities (third party liability) but that my child has no personal accident cover unless I have been specifically sit. I also understand that any extension of insurance cover is my responsibility unless advised by the School.			
Declaration				
	pout the proposed educational visit and the insurance arrangements.			
• I consent to my child and physically able to participate in all the activities	taking part in the visit and, having read the information sheet, declare my child to be in good health mentioned.			
	my child from Windlesham School upon their return			
• I am aware of the levels of insurance cover.				
• I have completed the required consent and media	cal form and I will return it to the Class Tutor.			
• I will ensure that any change in the circumstance	s which will affect my child's participation in the visit will be notified to the School prior to the visit.			
Signature of parent/guardian	Date			
Print Name				

Appendix C: Parental Agreement for Windlesham School to administer medicines

NB: Medicines must be in the original container as dispensed by the pharmacy

The School will not give your child medicine unless you complete and sign this form. If more than one medicine is to be given, a separate form should be completed for each.

Date	Child's name		
Class Teacher/Tutor			
Name of medicine	Ex	piry date	
Dosage	When to be given		
Number of tablets/quantity	y to be given to School		
Further Information			
Parent/Carer daytime telep	hone number		
Name and contact number	for GP		
	h the School policy. I will inform the School		nsent for Windlesham School staff administering ere is any change in dosage or frequency of the
Signature of parent/guardia	nn	_Date	
Print Name			

Appendix C (Contd.)

Windlesham School - Record of Administered Medicine for Individual Child

Child's Name	Class

Date	Time	Medicine	Dosage	Reaction?	Staff signature	Print name

WINDLESHAM SCHOOL FIRST AID POLICY

Appendix D

Emergency Services Checklist

Dial 9+999 or 9+112

Have a pen and paper ready for any instructions.

School Office Address is: 190 Dyke Road Brighton BN1 5AA

Phone: 01273 553645

Entry to car park is 180 Dyke Road BN1 5AA

WINDLESHAM SCHOOL FIRST AID POLICY

Appendix E

List of Staff First Aid Training

First Name	Last Name	Training Type	Date last trained
Nicki	Ball	INSET First Aid training	04/01/2016
Elenie	Card	INSET First Aid training	12/02/2016
Sally	Carvey	INSET First Aid training	16/04/2018
Despina	Christofis	INSET First Aid training	16/04/2018
Elizabeth	Coego	INSET First Aid training	29/08/2012
Trish	Colley	INSET First Aid training	16/04/2018
Christopher	Crellin	INSET First Aid training	12/02/2016
Clare	Derby	Paediatric	Expires Nov 19
Naomi	Fox	Higher	20/06/2015
David	Freeborn	INSET First Aid training	16/04/2018
Gaynor	Gallant	INSET First Aid training	04/01/2016
Sally	Glasgow-Simmonds	INSET First Aid training	16/04/2018
Marina	Green	INSET First Aid training	12/02/2016
Sheena	Groves	INSET First Aid training	04/01/2016
Martin	Hall	INSET First Aid training	12/02/2016
Faye	Higgs	INSET First Aid training	16/04/2018
John	Ingrassia	INSET First Aid training	Expires Sept 18
Sarah	Jarman	INSET First Aid training	16/04/2018
Maria	Jeffrey	INSET First Aid training	12/02/2016
Michelle	Jones	INSET First Aid training	16/04/2018
Joanne	Joyce	INSET First Aid training	12/02/2016
Mandy	Kearton	INSET First Aid training	04/01/2016
Sinead	Kiernan	INSET First Aid training	16/04/2018
Mark	Lambert	INSET First Aid training	16/04/2018
Matthew	Lyle	Higher	14/12/2017
Lisa	Mack	INSET First Aid training	13/02/2015
Pip	Martin	INSET First Aid training	04/01/2016
Joanna	May	INSET First Aid training	16/04/2018
Caitlin	Metzner	INSET First Aid training	12/02/2016
Pamela	Moss	INSET First Aid training	04/01/2016
Aisling	O'Dowd	INSET First Aid training	04/01/2016
Rebecca	Older	INSET First Aid training	12/02/2016
Melanie	Slater	Paediatric	04/06/2015
Yvonne	Spicer	Paediatric	26/07/2017
Sheena	Stevenson	INSET First Aid training	16/04/2018
Gillian	Stewart	Paediatric	26/05/2015
Annie	Thompsett	INSET First Aid training	13/02/2015
Jane	Waller	Workplace	02/04/2017

WINDLESHAM SCHOOL FIRST AID POLICY