PROSPER TOGETHER

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First Aid Policy

Approved by Full Trust Board – 07/2024

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Reviewed by – Selina Timmins

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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 (DfE) on first aid in schools and health and safety in schools, guidance from the Health and Safety Executive (HSE) on incident reporting 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 pupils

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3. Roles and responsibilities

3.1 Appointed person(s) and first aiders

The school's appointed person is **Andrea Crew and Cheryl Holt, as well as each phase will have a trained first aider**. They 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 the same day as, or as soon as is reasonably practicable, after an incident (see the template in appendix 2)
- Keeping their contact details up to date

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

3.2 The Trust

The Trust 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 first aiders 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 and appointed persons in school are
- Completing accident reports (see appendix 2) for all incidents they attend to where a first aider is not called
- Informing the headteacher or their manager of any specific health conditions or first aid needs

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4. 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 the 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/carers will be contacted and asked to collect their child. On their arrival, the first aider will recommend next steps to the parents/carers
- If emergency services are called, **the admin team** will contact parents/carers 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 and also enter the detail on to **Andrea Crew and Admin Team**

4.2 Off-site procedures

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

- A mobile phone
- A portable first aid kit including, at minimum:
    - A leaflet giving general advice on first aid
    - 6 individually wrapped sterile adhesive dressings
    - 1 large sterile unmedicated dressing
    - 2 triangular bandages – individually wrapped and preferably sterile
    - 2 safety pins
    - Individually wrapped moist cleansing wipes
    - 2 pairs of disposable gloves
- Information about the specific medical needs of pupils
- Parents/carers' contact details

When transporting pupils using a minibus or other large vehicle, the school will make sure the vehicle is equipped with a clearly marked first aid box containing, at minimum:

- 10 antiseptic wipes, foil packed
- 1 conforming disposable bandage (not less than 7.5cm wide)
- 2 triangular bandages
- 1 packet of 24 assorted adhesive dressings
- 3 large sterile unmedicated ambulance dressings (not less than 15cm × 20 cm)
- 2 sterile eye pads, with attachments
- 12 assorted safety pins
- 1 pair of rustproof blunt-ended scissors

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Risk assessments will be completed by **class teacher** prior to any educational visit that necessitates taking pupils off school premises **and shared with SENCo and Inclusion team**.

There will always be at least 1 first aider with a current paediatric first aid (PFA) certificate on school trips and visits, as required by the statutory framework for the Early Years Foundation Stage (EYFS).

5. First aid equipment

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

- A leaflet giving general advice on first aid
- 20 individually wrapped sterile adhesive dressings (assorted sizes)
- 2 sterile eye pads
- 2 individually wrapped triangular bandages (preferably sterile)
- 6 safety pins
- 6 medium-sized individually wrapped sterile unmedicated wound dressings
- 2 large sterile individually wrapped unmedicated wound dressings
- 3 pairs of disposable gloves

No medication is kept in first aid kits.

First aid kits are stored in:

- **The medical room**
- **Reception- office**
- **Phase corridors**

6. Record-keeping and reporting

6.1 First aid and accident record book

- An accident form will be completed by the first aider on the same day or as soon as possible after an incident resulting in an injury. This will also be logged on **CPOMs**. If the child is sent home or taken to hospital a large accident form should be completed and handed to the Business Manager
- As much detail as possible should be supplied when reporting an accident, including all of the information included in the accident form at appendix 2
- Records held in the first aid log 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

The Business Manager will keep a record of any accident that results in a reportable injury, disease, or dangerous occurrence as defined in the RIDDOR 2013 legislation (regulations 4, 5, 6 and 7).

The Business Manager will report these to the HSE as soon as is reasonably practicable and in any event within 15 days of the incident – except where indicated below. Fatal and major injuries and dangerous occurrences will be reported without delay (i.e. by telephone) and followed up in writing within 15 days.

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School staff: reportable injuries, diseases or dangerous occurrences

These include:

- Death
- Specified injuries, which 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) which:
        - Covers more than 10% of the whole body's total surface area; or
        - Causes significant damage to the eyes, respiratory system or other vital organs
    - 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
- Work-related injuries that lead to an employee being away from work or unable to perform their normal work duties for more than 7 consecutive days (not including the day of the incident). In this case, the **Business manager** will report these to the HSE as soon as reasonably practicable and in any event within 15 days of the accident
- Occupational diseases where a doctor has made a written diagnosis that the disease is linked to occupational exposure. These include:
    - Carpal tunnel syndrome
    - Severe cramp of the hand or forearm
    - Occupational dermatitis, e.g. from exposure to strong acids or alkalis, including domestic bleach
    - Hand-arm vibration syndrome
    - Occupational asthma, e.g from wood dust
    - Tendonitis or tenosynovitis of the hand or forearm
    - Any occupational cancer
    - Any disease attributed to an occupational exposure to a biological agent
- 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

Pupils and other people who are not at work (e.g. visitors): report injuries, diseases or dangerous occurrences

These include:

- Death of a person that arose from, or was in connection with, a work activity*

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- An injury that arose from, or was in connection with, a work activity* and where the person is taken directly from the scene of the accident to hospital for treatment

*An accident “arises out of” or is “connected with a work activity” if it was caused by:

- A failure in the way a work activity was organised (e.g. inadequate supervision of a field trip)
- The way equipment or substances were used (e.g. lifts, machinery, experiments etc); and/or
- The condition of the premises (e.g. poorly maintained or slippery floors)

Information on how to make a RIDDOR report is available here:

How to make a RIDDOR report, HSE
http://www.hse.gov.uk/riddor/report.htm

6.3 Notifying parents/carers

The first aider or Admin team will inform parents/carers of any significant accident or injury sustained by a pupil, and any first aid treatment given, on the same day, or as soon as reasonably practicable. Parents/carers will also be informed if emergency services are called.

7. 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 school will keep a register of all trained first aiders, what training they have received and when this is valid until (see appendix 3).

The school will arrange for first aiders to retrain before their first aid certificates expire. In cases where a certificate expires, the school will arrange for staff to retake the full first aid course before being reinstated as a first aider.

At all times, at least 2 staff members will have a current paediatric first aid (PFA) certificate that meets the requirements set out in the Early Years Foundation Stage statutory framework. The PFA certificate will be renewed every 3 years.

8. Monitoring arrangements

This policy will be reviewed by the **SENCo** every 3 years.

At every review, the policy will be approved by the Trustees

9. 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

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Appendix 1: Training log

STAFF MEMBER'S NAME	ROLE	CONTACT DETAILS
Nicola Horton	Senior First Aider	Phase 3
Andrea Crew	Senior First Aider	Admin Office
Anita Rooke	Senior First Aider	Phase 1
Steven Parkinson	Senior First Aider	Site
Angie Lander	Paediatric First Aider	Launch Pad
Bethany Johnson	Paediatric First Aider	FCP
Billie Brown	Paediatric First Aider	Lunchtime Supervisor
Cheryl Holt	Paediatric First Aider	Admin Office
Chloe Browne	Paediatric First Aider	Phase 1
Chloe Gummery	Paediatric First Aider	Phase 2
Claire Goulden	Paediatric First Aider	Launch Pad
Claire Green	Paediatric First Aider	Nursery
Claire King	Paediatric First Aider	Phase 1
Danielle Gerald	Paediatric First Aider	Whole School
Emily Betts	Paediatric First Aider	Phase 1
Evie Dolan	Paediatric First Aider	FCP
Gemma Boore	Paediatric First Aider	Admin Office
Gemma Parker	Paediatric First Aider	Phase 1
Hannah Thompson	Paediatric First Aider	FCP
Hayley Berry	Paediatric First Aider	FCP
Keera Lyons	Paediatric First Aider	Phase 2
Kerry Wilkes	Paediatric First Aider	Lunchtime Supervisor
Kyle Gold	Paediatric First Aider	Phase 1
Laura Stone	Paediatric First Aider	Lunchtime Supervisor / Fordbridge Friends
Lauren Bruton	Paediatric First Aider	Whole School
Mandy Barlow	Paediatric First Aider	Phase 1

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STAFF MEMBER'S NAME	ROLE	CONTACT DETAILS
Molly Edwards	Paediatric First Aider	FCP
Nichola Farmiloe	Paediatric First Aider	Phase 3
Olivia Owen	Paediatric First Aider	Launch Pad
Poppy Goulden	Paediatric First Aider	Launch Pad
Rebecca Snookes	Paediatric First Aider	Lauch Pad
Ruby Tracey	Paediatric First Aider	Phase 2
Sally Cornbill	Paediatric First Aider	Lunchtime Supervisor
Simone Andrews	Paediatric First Aider	Lunchtime Supervisor
Stephanie Baker	Paediatric First Aider	Lunchtime Supervisor / Fordbridge Friends
Susan Jones	Paediatric First Aider	Staff
Timi Allsopp	Paediatric First Aider	FCP / Nursery
Victoria Dipple	Paediatric First Aider	Lunchtime Supervisor
Zeenat Usman	Paediatric First Aider	Lunchtime Supervisor
Rebecca Fieldhouse	Emergency First Aid at Work including Paediatric Element	Lunchtime Supervisor
Adam Parkinson	Emergency First Aid at Work	Site
Chloe Knight	Emergency First Aid at Work including Paediatric Element	Phase 2
Chris Allen	Emergency First Aid at Work including Paediatric Element	Phase 2
Dawn Scrimshaw	Emergency First Aid at Work including Paediatric Element	Phase 1
Elaine Foy	Emergency First Aid at Work including Paediatric Element	Lunchtime Supervisor
Jayne Weaver	Emergency First Aid at Work including Paediatric Element	Phase 2
Kirsty Fieldhouse	Emergency First Aid at Work including Paediatric Element	Lunchtime Supervisor
Laura Bacciochi	Emergency First Aid at Work including Paediatric Element	Phase 3 / Fordbridge Friends
Lisa Luckman	Emergency First Aid at Work including Paediatric Element	Phase 2
Sharon Eldridge	Emergency First Aid at Work including Paediatric Element	Phase 2

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STAFF MEMBER'S NAME	ROLE	CONTACT DETAILS
Sharon Holloway	Emergency First Aid at Work including Paediatric Element	Phase 2
Tania Bayley	Emergency First Aid at Work including Paediatric Element	Phase 1
Tom Wale	Emergency First Aid at Work including Paediatric Element	Phase 3

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Appendix 2: accident report form

NAME OF INJURED PERSON		ROLE/CLASS	
DATE AND TIME OF INCIDENT		LOCATION OF INCIDENT	
INCIDENT DETAILS			
Describe in detail what happened, how it happened and what injuries the person incurred.			
ACTION TAKEN			
Describe the steps taken in response to the incident, including any first aid treatment, and what happened to the injured person immediately afterwards.			
FOLLOW-UP ACTION REQUIRED			
Outline what steps the school will take to check on the injured person, and what it will do to reduce the risk of the incident happening again.			
NAME OF PERSON ATTENDING THE INCIDENT			
SIGNATURE		DATE	

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Appendix 3: Procedures for managing bumps to the head

Bump to Head, Head Injury and Concussion

School staff need to be able to assess signs and symptoms, know how to recognise an emergency and how and when to summon assistance. The duty of care that school staff have also extends to acting as any prudent parent would in the event of illness or injury. This policy will be used by staff assessing and treating all head injuries in school on and off site. It will be used to determine the course of action to take depending on the circumstances and symptoms displayed.

Bump To Head

A bump to the head is common in children. If a child is asymptomatic i.e. there is no bruising, swelling, abrasion, mark of any kind, dizziness, headache, confusion, nausea or vomiting and the child appears well then the incident will be treated as a 'bump' rather than a 'head injury'.

Bump to head protocol:

Child to be assessed by a First aider using the Head Injury Checklist below

Head injury checklist for first aiders

Minor head injury symptoms - assess the child for signs of the following:

- Nausea
- Mild headache
- Tender bruising or mild swelling of the scalp
- Mild dizziness

These are signs of a minor head injury – If occur take to Andrea Crew **If unavailable, this assessment to be carried out by phase first aider.** Child to be assessed and follow the Minor head injury protocol. If not available to speak to designated first aider.

If no symptoms – follow Bump to Head protocol.

Bump to Head

Complete a first aid slip, log on SMART LOG and alert the class teacher during hand over.

Class teacher to inform the Parent / Carer at home time and hand over a slip.

Office to still provide phone call home to say that Bump to the Head

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'Please be aware that this pupil has suffered a bump to the head today. They have been monitored and assessed to be fit to remain in school. Please be alert to any changes in their condition and if you have any concerns seek medical advice.' Script

Minor Head Injury

A minor head injury often just causes lumps or bruises on the exterior

of the head.

Other symptoms Include:

- Nausea
- Mild headache
- Tender bruising or mild swelling of the scalp
- Mild dizziness
- Minor Head Injury Protocol

Mild Head Injury Symptoms

Child to be assessed by a First aid lead Andrea Crew at the first aid room. **If unavailable, this assessment to be carried out by phase first aider.**

If sending a student to the medical room, ensure they have another person with them who can inform Mrs Crew / Office staff that they have had a head bump

Office will contact parent to notify of head injury and communicate plan of action – student to go home and parents reminded to observe and if condition changes to seek medical advice.

Severe Head Injury symptoms - assess the child for signs of the following:

- Unconsciousness briefly or longer
- Difficulty in staying awake
- Seizure
- Slurred speech
- Visual problems including blurred or double vision
- Difficulty in understanding what people are saying/disoriented
- Confusion (Rule out signs of confusion by asking them the date, where they are,
- what tutor group they are in)
- Balance problems or loss of power in arms/legs/feet
- Pins & needles
- Amnesia
- Leakage of clear fluid from nose or ear

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Severe Head Injury Protocol

If unconscious, you should suspect a neck injury and do not move the student

CALL 999 FOR AMBULANCE

Notify parent asap (call all telephone numbers and leave a message).

Repeat every hour If the ambulance service assess the pupil over the phone and determine that no ambulance is required, student is to be sent home.

Request a Serious Injury Report form from member of staff present at the time of the incident.

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