



**OFFORD**  
PRIMARY  
SCHOOL

# FIRST AID POLICY

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<b>Approved by:</b>	Governing Body
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## INTRODUCTION

Offord Primary School has a duty to ensure that children, staff and visitors to the school receive appropriate first aid care in the event of an accident or emergency whilst on site or on an educational visit. Clear procedures are in place for the safe storage of first aid equipment, administration of first aid to casualties and recording of incidents in accordance with health and safety guidelines.

## Aims

Offord Primary School aims to:

- Identify the first aid needs of the school in line with the Health and Safety at Work Act, 1974.
- Ensure that first aid provision is available while people are on school premises (within school hours), and also off the premises whilst on school visits.
- Appoint the appropriate number of suitably trained people as Appointed Persons and First Aiders to meet the needs of the school.
- Provide relevant training and ensure monitoring of training needs.
- Provide sufficient and appropriate resources and facilities.
- Inform staff and parents of the school's first aid arrangements
- Keep accident records and to report the Health and Safety Executive (HSE) under the Diseases and Dangerous Occurrences Regulations (RIDDOR).

## Roles and responsibilities

### Headteacher

The Headteacher is responsible for:

- Implementing this policy by identifying responsible staff members for managing first aid and the administration of medicines and ensuring that appropriate resources and staff training are available, in line with current health and safety legislation.
- Ensuring that the policy and information on the school's arrangements for first aid are made available to parents.
- Reviewing the school's first aid needs following any changes to staff, building/site, off-site facilities etc.

### Designated persons

Most teaching and classroom support staff hold a first aid qualification. There are designated first aiders in each area of the school to deal with accidents and injuries as they occur, however any member of staff who is first aid qualified can do this.

- The designated person for Reception and Key Stage 1 is Carol Bull
- The designated persons for Key Stage 2 are Karen Wildber and Helen Blackhurst.
- The person responsible for stocking and ordering of first aid provisions is Carol Bull.
- The designated person for administering first aid during forest school sessions is Sharon Taylor. This person has received specific training on administering first aid in the outdoor environment.

**All staff** are responsible for keeping themselves up to date with basic first aid, understanding the importance of risk assessment, and recognising the health needs of pupils for whom they have responsibility.

**Pupils** are responsible for caring for their own welfare and that of other pupils and understanding the importance of risk assessment.

### Training

First aiders must complete a training course approved by the Health and Safety Executive (HSE) and attend a refresher course every 3 years. This is a voluntary role. Emergency first aid training includes:



- what to do in an emergency
- cardiopulmonary resuscitation
- first aid for the unconscious casualty
- first aid for the wounded or bleeding.

Most of our teaching and classroom support staff, plus the Headteacher and the Office Administrator hold a Full Paediatric First Aid & Emergency First Aid at Work qualification.

### **First Aiders**

At school, the main duties of a first aider are to:

- 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.
- Advise the parent/carer or next of kin of the situation.

In selecting designated first aiders the Headteacher has considered the person's:

- Reliability and communication skills
- Aptitude and ability to absorb new knowledge and learn new skills.
- Ability to cope with stressful and physically demanding emergency procedures.
- Normal duties - a first aider must be able to leave to go immediately to an emergency.

Members of staff should not give first aid treatment for which they have not been trained.

### **First aid administration and arrangements**

A first aider can assess an injury and decide, in loco parentis, if it warrants treatment or if it is sufficient for the injured person to rest and recuperate. Where treatment is applied, records of the treatment must be logged on Scholarpak and for pupils, a copy issued to parents/carers.

During induction with the headteacher, new staff are given information regarding:

- Who the designated first aiders are;
- Where the first aid boxes are located; and
- The schools routine for dealing with first aid emergencies.

### **First aid kits**

The Headteacher will ensure that the appropriate number of first aid kits according to the risk assessment of the site are available. All first-aid kits are marked with a white cross on a green background.

First aid kits are located in:

- The corridor outside KS1
- The corridor outside KS2
- First aid kits are strategically placed in other areas of greatest risk, e.g. in the Orchard during forest school.

Additional supplies for first aid kits are stored in the maths cupboard. All first aiders are responsible for informing the designated person responsible for re-stocking first aid provisions of low supplies so that these can be ordered.

A list of children with allergies, including plasters, is available from the school office and is contained in each class register medications cabinet.

As a minimum each first aid kit in school should contain:

- one guidance card



- 20 individually wrapped sterile adhesive dressings (assorted sizes)
- two sterile eye pads
- four individually wrapped triangular bandages (preferably sterile)
- six safety pins
- six medium sized (approximately 12cm x 12cm) individually wrapped sterile unmedicated wound dressings
- two large (approximately 18cm x 18cm) sterile individually wrapped unmedicated wound dressings
- one pair of disposable gloves.

(Equivalent or additional items are acceptable).

For visits, off-site activities and trips the trip leader must assess the level of first aid provision and number of qualified staff required. Staff will have access to a mobile phone available to make emergency calls and will be aware of any care plans for children attending the visit.

First aid kits for use off site should contain the following as a minimum:

- one guidance card
- six individually wrapped sterile adhesive dressings
- one large sterile unmedicated wound dressing approximately 18cm x 18cm
- two individually wrapped triangular bandages
- two safety pins
- individually wrapped moist cleansing wipes
- one large sterile individually wrapped unmedicated wound dressings (approx. 18x18 cm);
- one pair of disposable gloves.
- sick bags
- 2 instant ice packs

(Equivalent or additional items are acceptable. Additional items may be necessary for specialised activities).

The designated first aiders are responsible for regularly checking first aid kits and additional supplies, including expiry dates.

### **Administering medication**

It is not the general function of first aiders to deal with or manage the medical conditions of pupils, staff or visitors unless the condition results in the need for first aid.

If a child needs to receive medication (e.g. for an allergy or antibiotics) the parents should fill in a Medication in School form giving the school authorisation. The medication is stored in the child's classroom or the staff room fridge as necessary. A copy of the Medication in School form completed by parents is stored with each individual medicine and a copy is kept in the school office.

Training will be provided to key support staff working with children with specific conditions to ensure the school's responsibilities identified through individual care plans can be met.

The school has a Medication in School policy in place.

### **Illness**

#### **Pupils**

When a child feels unwell, the teacher/teaching assistant in the class, should contact the school office to arrange for parents/carers to be contacted to collect the unwell child.



### **Staff and other adults**

Members of staff or other adults on site who are taken ill at school should liaise with the headteacher to either seek medical attention or go home, accompanied if appropriate. In an emergency, an ambulance would be called and, for staff members, the next of kin contacted. Details of staff member's next of kin numbers are available from the school office.

### **Record keeping**

An accident record is kept of any first aid treatment given by first aiders or designated persons. This should include:

- The date, time and place of incident
- The name (and class) of the injured or ill person
- Details of their injury/illness and what first aid was given
- What happened to the person immediately afterwards
- Name and signature of first aider or person dealing with the incident.

In the case of pupils, procedures are in place for ensuring that parents are informed of significant incidents.

The school ensures that readily accessible accident records, written or electronic, are kept for a **minimum of three years**.

### **Reporting arrangements**

The school keeps a record of any reportable injury, disease or dangerous occurrence. This must include:

- The date and method of reporting,
- The date, time and place of the event;
- Personal details of those involved and a brief description of the nature of the event or disease.

This record can be combined with other accident records.

Parents/carers are informed of any significant bumps to the head or where there has been bleeding or the potential of swelling or bruising. Class teachers must ensure that a copy of the Scholarpak First Aid report is given to parents/carers at the end of the day.

The following accidents must be reported to the HSE:

- Accidents resulting in death or major injury (including as a result of physical violence)
- Accidents which prevent the injured person from doing their normal work for more than three days

Involving pupils and visitors:

- Accidents resulting in the person being killed or being taken from the site of the accident to hospital and the accident arises out of or in connection with work i.e. if it relates to:
  - Any school activity, both on or off the premises
  - The way the school activity has been organised or managed
  - Equipment, machinery or substances
  - The design or condition of the premises

The HSE must be notified of fatal and major injuries and dangerous occurrences without delay. The Head is responsible for ensuring these accidents are reported to the CAM Academy Trust within 5 calendar days.

The first aider must complete form IRF (96) on-line Reporting Accidents/Incidents form available at <https://www.reportincident.co.uk/> Any accidents involving adults (staff, visitors, contractors or third parties) are also logged on Smartlog.



### **Hygiene and infection control**

Staff must follow basic hygiene procedures. Single use disposable gloves must be worn when treatment involves blood or other body fluids and care should be taken when disposing of dressings or equipment. Staff must take care when handling blood and other body fluids. If they are in contact with blood or body fluid and believe there is a risk to their health, they must report this immediately to the Headteacher, CAM Academy Trust and via the County's on-line reporting system. Soiled dressings should be disposed of in the clinical waste bin in the staff room.

Schools have a legal duty of care placed on any person who produces a "controlled waste". In a school this duty will fall to the Headteacher who has day to day responsibility for the control of the premises. Any waste which is contaminated with human or animal blood or bodily fluids, needles, or other waste which may cause infection (nappies, stoma bags, dialysis kits) is defined as "Clinical Waste". Soiled first aid materials are clinical waste.

At Offord Primary School clinical waste is disposed of in the clinical waste bin which is collected regularly by PHS.

### **Risk assessment**

The Health and Safety policy outlines key risks at Offord Primary School and directs staff on how to manage such risks. In addition, our site risk assessments also support this. Thorough risk assessments are carried out and identify the key actions required to ensure adequate first aid provision is provided.

The following areas are considered when assessing the need for first aid;

- Hazards presented by the work;
- Level of risk presented by hazards;
- Number and nature of staff;
- Number and nature of pupils;
- Number of sites / buildings;
- Location of sites / buildings;
- Accident history;
- Off site visits and lone workers;
- Staff working on shared or multi-occupied sites;
- Leave / absences of first aiders and appointed persons.

Following the assessment and using the information gathered, it is the role of the Headteacher to determine the personnel, equipment and facilities that are required and take steps to ensure they are provided and maintained.

### **Those with Specific Needs**

This document sets out to provide general guidance only. If an establishment has young people with disabilities, long-standing medical conditions or allergies which require special attention, individual and specialist advice should be sought about their treatment in the case of accidents or illness. An individual Healthcare plan will be written for all such cases.

### **Links to other policies and procedures**

- Health and safety policy
- Medication in Schools policy
- Supporting children with medical needs
- Risk assessments



## Addendum in response to Covid-19

### Resuscitation Council UK Statement on COVID-19 in relation to CPR and resuscitation in first aid and community settings

This statement is for anyone who is performing CPR/defibrillation in an out-of-hospital setting.

**Whenever CPR is carried out, particularly on an unknown victim, there is some risk of cross infection, associated particularly with giving rescue breaths. Normally, this risk is very small and is beset against the inevitability that a person in cardiac arrest will die if no assistance is given. The first things to do are shout for help and dial 999.**

- First responders should consult the latest advice on the NHS website - <https://www.gov.uk/government/publications/novel-coronavirus-2019-ncov-interim-guidance-for-first-responders/interim-guidance-for-first-responders-and-others-in-close-contact-with-symptomatic-people-with-potential-2019-ncov>
- Those laypeople and first responders with a duty of care (workplace first-aiders, sports coaches etc.) that may include CPR should be guided by their employer's advice
- This guidance may change based on increasing experience in the care of patients with COVID-19.
- Healthcare workers should consult the recommendations from the World Health Organisation and Department of Health and Social Care for further information, and advice by nation is at the conclusion of this statement.

Resuscitation Council UK Guidelines 2015 state "If you are untrained or unable to do rescue breaths, give chest compression-only CPR (i.e. continuous compressions at a rate of at least 100–120 min<sup>-1</sup>)"

Because of the heightened awareness of the possibility that the victim may have COVID-19, Resuscitation Council UK offers this advice:

1. Recognise cardiac arrest by looking for the absence of signs of life and the absence of normal breathing. Do not listen or feel for breathing by placing your ear and cheek close to the patient's mouth. If you are in any doubt about confirming cardiac arrest, the default position is to start chest compressions until help arrives.
2. Make sure an ambulance is on its way. If COVID 19 is suspected, tell them when you call 999.
3. If there is a perceived risk of infection, rescuers should place a cloth/towel over the victim's mouth and nose and attempt compression only CPR and early defibrillation until the ambulance (or advanced care team) arrives. Put hands together in the middle of the chest and push hard and fast.
4. Early use of a defibrillator significantly increases the person's chances of survival and does not increase risk of infection.
5. If the rescuer has access to any form of personal protective equipment (PPE) this should be worn.
6. After performing compression-only CPR, all rescuers should wash their hands thoroughly with soap and water; alcohol-based hand gel is a convenient alternative. They should also seek advice from the NHS 111 coronavirus advice service or medical adviser.



### Paediatric advice

We are aware that paediatric cardiac arrest is unlikely to be caused by a cardiac problem and is more likely to be a respiratory one, making ventilations crucial to the child's chances of survival. However, for those not trained in paediatric resuscitation, the most important thing is to act quickly to ensure the child gets the treatment they need in the critical situation.

For out of hospital cardiac arrest, the importance of calling an ambulance and taking immediate action cannot be stressed highly enough. If a child is not breathing normally and no actions are taken, their heart will stop and full cardiac arrest will occur. Therefore, if there is any doubt about what to do, the guidance in the **Resuscitation Council UK Statement on COVID-19 in relation to CPR and resuscitation in first aid and community settings** should be used.

It is likely that the child/infant having an out-of-hospital cardiac arrest will be known to you. We accept that doing rescue breaths will increase the risk of transmitting the COVID-19 virus, either to the rescuer or the child/infant. However, this risk is small compared to the risk of taking no action as this will result in certain cardiac arrest and the death of the child.

*(updated 13 May 2020, [www.resus.org.uk](http://www.resus.org.uk))*