

First Aid Policy

The following policy is in four parts:

- 1. Responsibilities
- 2. Risk Assessment
- 3. Staff Training, Reporting and Provision of Materials
- 4. First Aid Practice

The employer is responsible under the Health and Safety at Work Act 1974 for making sure the school has a Health and Safety Policy. This should include arrangements for first aid, based on a risk assessment of the school. This policy therefore should be read in conjunction with the school's Health and Safety Policy.

Responsibilities

The Governing Body

The Governing body has responsibility for Health and Safety matters with the leadership team and staff also having responsibilities.

The Governing Body are required to develop policies to cover their own school. In practice most of the day-to-day functions of managing health and safety are delegated to the head teacher.

The Head Teacher

The head teacher is responsible for putting the governing policy into practice and for developing detailed procedures. The head teacher should also make sure that the parents are aware of the school's health and safety policy, including arrangements for first aid and the management of medicines.

Teachers and other School Staff

Teachers' conditions of employment do not include giving first aid, although any member of staff may volunteer to undertake these tasks. 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 in the same way that parents might be expected to act toward their children. In general, the consequences of taking no action are likely to be more serious than those of trying to assist in an emergency.

The employer must arrange adequate and appropriate training and guidance for staff who volunteer to be first aiders / appointed persons and to manage medicines. The employer must make sure there are enough trained staff to meet the statutory requirements and assessed needs, allowing for staff on annual / sick leave or off site.

This training should include the new legislative requirements for paediatric first aid trained staff for the Foundation Stage.

The First Aiders' Main Duties

First aiders should have completed at First Aid at Work training course. At school their duties are to:

- Give immediate help to casualties with common injuries or illness and those arising from specific hazards at school
- When necessary, ensure that an ambulance or other professional medical help is called

The Appointed Person / People (Sally Elderfield, Anita Sandy and Ali Witts)

They are someone who:

- Takes charge when someone is injured or becomes ill
- Looks after the first aid equipment e.g. restocking the first aid container
- Ensures that an ambulance or other professional medical help is summoned when appropriate

Appointed persons need not be first aiders, in which case they should not give first aid for treatment for which they have not been trained. However it is good practice to ensure that appointed persons have first aid training / refresher training as appropriate.

Emergency first aid training should help an appointed person cope with an emergency and improve their competence and confidence.

The School's Obligations

The school must provide adequate and appropriate equipment, facilities and qualified first aid personnel.

Although regulations oblige employers to provide for their own staff, the school should include all users of the school site in their risk assessment and consider carefully risk to pupils and visitors.

Risk Assessment

There are annual procedures that check on the safety and systems that are in place in this policy. The school takes part in the Annual Health and Safety checks by Oxfordshire Local Authority. Adjustments are made by implementing the Health and Safety Action Plan based on the OCC findings.

A risk assessment will take place annually, covering the following areas. The

results of the assessment will lead to a revision of policy and procedure by the Leadership Team of the school where appropriate. The revised / updated policy will then be agreed by Governors.

The risk assessment should cover:

The size of the school:

 As the site is not multi floor or split site, the numbers of first aiders / appointed people needed to provide adequate cover is clear, including consideration for sickness absence and off-site trips / activities

The Location of the school:

- As the school is a village school and therefore relatively remote, the emergency services should be informed of the location of the school, giving grid reference / post code and any circumstances that may restrict access.
- The entrance to be used for access should be clearly identifiable by the services.

Specific Hazards:

- Are there any specific hazards or risks on the site that should be considered by the services?
- Are there any measures that can be put in place to reduce the risks?

Specific Needs

- Are there any staff or pupils with specific health needs or disabilities?
- The first aid procedures for foundation stage children are different from those for the other pupils in the school. The school should have a Paediatric First Aid Appointed person on site at all times.

Accident statistics

• Statistics can provide useful information indicating the most common injuries, times, locations and activities. This information should be used to concentrate and tailor first aid provision.

How many first aid personnel are required?

- Schools are generally considered lower risk
- Consideration should be given to how many personnel are required for:
 - Lunchtimes and breaks (it is good practice for supervisors to have first aid training)
 - o To cover leave in case of absence
 - Off-site activities (both presence on the trip and left back at the school)
 - Adequate provision for practical tasks / departments, science, technology, home economics, PE

Retraining should be organised three months prior to expiry to ensure continuity

Staff Training, Reporting and Provision of Materials

Numbers and Training

- All staff who wish to undertake it are first aid trained except for the Business Manager
- Four members of staff have Paediatric First Aid training and three have Forest School First Aid.
- All names of first aid trained staff are clearly listed around the school.
- Appointed persons are responsible for ensuring that first aid kits are fully stocked and ensuring that any items missing are purchased through the usual school purchasing system. They must be first aid trained

Hygiene and Infection Control

- All staff should take precautions to avoid infection and must follow basic hygiene procedures.
- Access is made available for all staff to single use disposable gloves and hand washing facilities, and should take care when dealing with blood or other bodily fluids and disposing of dressings or equipment.

Procedures for contacting a first aider

- In the case of an untrained staff member being first on the scene requiring a first aider they should first assess the situation and decide whether or not the individual is safe to be left whilst help is sought.
- Help should then be sought by the individual or a responsible other by notifying the school office. The school office is then responsible for ensuring a trained first aider attends the incident.

Reporting Accidents and Record Keeping

- Under the Reporting of Injuries, Diseases and Dangerous
 Occurrences Regulations 2013 (RIDDOR) some accidents must be
 reported to the HSE see below.
- Employees must also keep a record of any reportable injury, disease or dangerous occurrence – including (the date, method of reporting, time, place of event, personal details of those involved, description of the nature of the event/ disease). This record can be combined with other accident records.

In an emergency the child's parents should be contacted using the details in the emergency contacts folder in the school office.

The school will however report all serious or significant incidents to the parents.

REPORTABLE EVENTS

Serious/significant accidents

The following accidents must be reported to the HSE if they injure either the school's employees during an activity connected with the work, or self-employed people while working on the premises

- 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 seven days (including acts of physical violence)

For definitions of major injuries, dangerous occurrences and reportable diseases see HSCE guidance on RIDDOR 2013.

Fatal and major injuries must be reported without delay. This must be followed up with a written report which can be submitted online within 10 days.

- An accident that happens to a pupil or a visitor must be reported if:
 - The person is killed or taken from the site to Hospital; and
 - The accident arises out of or in connection with work (any school activity on or off the premises, resulting from the way a school activity has been organised, equipment, machinery or substances or due to the design or condition of the premises)
 - Like for employees, notification must be without delay and followed up with the written report within 10 days.

Record keeping

In addition to the above, schools should keep a record of any first aid treatment given by first aiders or appointed persons by completing the school's accident record sheet. These record sheets will be kept for a minimum for three years. The school will use this information in the risk assessment to try and reduce risk, for investigatory purposes where necessary

Arrangements of off-site activities

Staff members organising off-site activities are responsible for ensuring they have a portable first aid kit with them. They are also responsible for reporting any use of the kit and consequent shortage of supplies to the adults in charge of restocking first aid supplies so that replacements may be made.

First Aid Materials Equipment and First Aid Facilities:

Numbers and locations of first aid containers:

There are first aid kits in every classroom and the swimming pool and portable kits provided by the school.

Each kit contains at least:

- A leaflet giving advice on first aid
- 20 individual wrapped sterile adhesive dressings (assorted sizes)
- Two sterile eye pads

- One individually wrapped triangular bandage
- Six safety pins
- Six medium-sized (approximately 12cm x 12cm), individually wrapped sterile un-medicated wound dressings
- Two large (approximately 18cm x 18cm) sterile individually wrapped un- medicated wound dressings
- One pair of disposable gloves

The kit should also identify the person responsible for examining the contents, how frequently they will be checked and restocked. There should be extra stock available in the school.

- Portable first aid kits are provided in the pastoral room for staff to take on off-site visits and activities. Each kit contains at least:
 - A leaflet giving advice on first aid
 - Ten antiseptic wipes
 - One conforming disposable bandage (not less than 7.5cm wide)
 - One packet of 24 assorted adhesive dressings
 - Three large sterile un-medicated wound dressing (approximately 18cm x 18cm)
 - Two sterile eye pads with attachments
 - One triangular bandage
 - Twelve assorted safety pins
 - One pair of rust less blunt ended scissors
 - One pair of disposable gloves

Vehicles

Any vehicle used by the school to transport children should carry on board at least one of the portable first aid kits.

The contained must be maintained in good condition, ready for use and prominently marked as a first aid container.

First Aid Room

The WASP room is the first aid room and as such should be respected as ready for this purpose when required.

Out of school arrangements e.g. lettings, parents evenings

All persons using the school outside normal school hours should be informed of the location of the first aid kit and should ensure that they have a first aid trained individual to deal with any incident.

First Aid Practice

Rationale

Children and adults in our care need good quality first aid provision. Clear and agreed systems should ensure that all children are given the same care and understanding in our school. This care should extend from emergency first aid provision, the administration of medicines to dealing with Asthma and head lice.

Purpose

- Gives clear structures and guidelines to all staff regarding all areas of first aid and medicines
- 2. Clearly defines the responsibilities and the staff
- 3. Enables staff to see where their responsibilities end
- 4. Ensures the safe use and storage of medicines in the school
- 5. Ensures the safe administration of medicines in the school
- 6. Ensures good first aid cover is available in the school and on visits

Guidelines

New staff to the school are given a copy of this policy when they are appointed. This policy is regularly reviewed and updated. This policy has safety as its priority.

First aid in school

Cuts

The nearest adult deals with small cuts. All open cuts should be covered after they have been treated with a medi wipe. Children should always be asked if they can wear plasters BEFORE one is applied. Children who are allergic to plasters will be given an alternative dressing. Minor cuts do not need to be recorded in the accident file.

ANYONE TREATING AN OPEN CUT SHOULD USE GLOVES. All blood waste is disposed of in the yellow bin, located in the disabled toilet.

Bumped heads

Any bump to the head, no matter how minor is treated as serious. All bumped heads should be treated with an ice pack. Parents and guardians must be informed **BY TELEPHONE**. The child's teacher should be informed and keep a close eye on the progress of the child. **ALL** bumped head incidents should be recorded in the accident file. Children are given a wristband to wear so anyone collecting the child will be aware that the child has had treatment for a bumped head.

Accident file

The accident file is located in the First Aid room. For major accidents, a further county form must be completed within 24 hours of the accident. These forms are located in the office. These forms need to be signed by the Head teacher, a copy taken and placed in the child's file and the original copy forwarded to county.

Calling the emergency services

In the case of major accidents, it is the decision of the fully trained first aider if the emergency services are to be called. Staff are expected to support and assist the trained first aider in their decision. If a member of staff is asked to call the emergency services, they must,

- 1. State what has happened
- 2. The child's name
- 3. The age of the child
- 4. Whether the casualty is breathing and/or unconscious
- 5. The location of the school

In the event of the emergency services being called, a member of the Admin staff OR another member of staff, should wait by the school gate and guide the emergency vehicle into the school. Children should be kept in their classrooms where possible or on the field so they are not aware of the vehicle arriving.

If the casualty is a child, their parents should be contacted immediately and give all the information required. If the casualty is an adult, their next of kin should be called immediately. All contact numbers for children are in the Emergency Contacts File and all staff contact details are clearly located in the school office.

OTHER ASTHMA SUFFERERS CANNOT SHARE INHALERS.

In the event of a child having an asthma attack, who has no inhaler, the parents must be sought quickly by phone to give permission for the administration of someone else's inhaler. If parents cannot be located, then the emergency services will be contacted and they may give permission for the sharing of the inhaler.

Training

Any specific training required by staff on the administration of medication (e.g.adrenaline via an epipen) will be provided by or through the school nurse. Staff will not administer such medicines until they have been trained to do so. The school will keep records of all staff trained to administer medicines and carry out other medical procedures. Training will be updated as appropriate.

Offsite visits

It is good practice for schools to encourage pupils with medical needs to participate in offsite visits. All staff supervising visits should be aware of any medical needs, medication to be administered and the relevant emergency procedures. Where necessary, an individual risk assessment should be drawn up. It should be ensured that a member of staff who is trained to administer any specific medication accompanies the pupil and that the appropriate medication is taken on the visit.

Menstruation

In situations involving menstrual difficulties in pupils, the best remedial action would be either to send the child home after telephoning the parent/guardian or remove the child from class to rest until the discomfort disappears. There are relevant disposal bins for all pupils to use.

Hygiene and Infection Control

When administering medication, all staff will follow the HCC and CSF guidance on the prevention of contamination from blood borne viruses.

Head lice

Staff do not touch children and examine them for head lice. If it is suspected that a child has head lice parents will be informed and be asked to examine their children at home. When the school is informed of a case of headlice, all parents will be advised to check their children at home as soon as possible.

Vomiting and diarrhoea

If a child vomits or has diarrhoea in school, they will be sent home immediately. Children with these conditions will not be accepted back into school until 48 hours after the last symptom has elapsed.

Chicken pox and other diseases, rashes

If a child is suspected of having chicken pox etc., we will look at their arms or legs.

If your child has any of these infections they will need to stay off school for a prescribed period of time. The Head teacher or school office will advise timescales.

For information on exclusion periods following other infectious diseases there is a poster on the inside of the School Office cupboard.

Staff insurance cover

If these guidelines are followed, including the requisite to obtain parental consent, staff will be protected by the County Council's insurance policy against claims of negligence should a child suffer injury as a result of the giving of medicine.

Evaluating the Policy

This policy statement and the school's performance in supporting pupils requiring medication at school will be monitored and evaluated regularly by the Governing Body. It will be formally reviewed every three years to ensure that the policy enables all children to have equal access to continuity of education.

REVIEW OF POLICY

A review of the policy will be undertaken annually and any amendments or updates will be reported to the full Governing Body.

Any new legislation or directives will be incorporated into the policy as necessary

Date Written/Reviewed: June 2025

Date for next review: June 2026