

**First Aid Policy  
Raphael School**

**September 2018/2019**



This policy applies to all pupils in the school, including those in Early Years. Any pupil under the age of 18 will be regarded as a child for the purposes of this policy.

## First Aid Policy

### KEY FACTS:

- ❖ First aid can save lives and prevent minor injuries become major ones
- ❖ The school will ensure that there are adequate facilities and appropriate equipment for providing first aid in the workplace, including for visitors, as well as for the age of children.
- ❖ Minimum first aid provision is a suitably stocked first aid container, an appointed person to take charge of first aid arrangements, for information for employees on first-aid arrangements, as well as adequately trained and experienced staff.
- ❖ This minimum provision is supplemented with a first aid needs assessment to identify any additional requirements specific to the school, to record the findings and to introduce measures to manage any risks.
- ❖ First aid provision must be available at all times whilst children are on the school premises and including school visits off site.
- ❖ Our school, staff and others have a duty to safeguard and promote the welfare of children.

## 1. Legislative Requirements

1.1 The following legislation and guidance have been duly considered, to ensure adequate provision has been made for the provision of first aid in the school:-

- **The Health and Safety at Work Act 1974** requires the employer to conduct their work in such a way that their employees or others that may be affected, are not exposed to health and safety risks. Including the provision of suitable information to other people with reference to their workplace/premises, which might affect their health and safety etc
- **The Management of Health and Safety at Work Regulations 1999** requires employers and self-employed persons to make an assessment of the risk to the health and safety of themselves, employees and others that might be affected in connection with their undertakings, to make appropriate arrangements for health and safety etc
- **Health and Safety (First Aid) Regulations 1981** requires employers to provide adequate and appropriate equipment, facilities and personnel to ensure their employees receive immediate attention if they are injured or taken ill at work.
- **The Education (Independent Schools Standards) Regulations 2014**  
*Part 3 (paragraph 13) Welfare, Health and Safety of Pupils* requires that the proprietor ensures that first aid is administered in a timely and competent manner by the drawing up and effective implementation of a written first aid policy.
- **Health and Safety Executive (HSE) – Guidelines on Regulation of the Health and Safety (First Aid) Regulations published 2013**  
*Recommends a range of factors to be considered including the size of the school.*

*The first aid needs assessment should consider a range of factors related factors such as: the nature of the work and associated risks such as curricula and special educational needs and/or disabilities; history of accidents and illness; lone working;*

*travelling; remoteness from main school site; absence of first aiders; provision for non-employees such as visiting parents and volunteers; the number of first aiders required and the type training considered most suitable.*

- First Aid in Schools 2014 and Health and Safety Advice on Legal Duties and Powers outline specific additional guidance to which we adhere.
- All staff receive induction training to help them understand their roles and responsibilities induction training must include health and safety issues.

## **2 Policy Overview**

2.1 The definition of First aid is as follows:

- In cases where a person will need help from a medical practitioner or nurse, treatment for the purpose of preserving life and minimising the consequences of injury and illness until help is obtained; and,
- Treatment of minor injuries which would otherwise receive no treatment, or which do not need treatment by a medical practitioner or nurse.

2.2 This policy provides an overview of the statutory requirements and how these are met in school. All safeguarding and child protection policy guidelines must be adhered to both on and off the school site, when first aid is administered.

2.3 The policy applies to all pupils including those pupils covered by the Early Years Foundation Stage (EYFS). EYFS requires us to ensure that at least one person who has a current paediatric first aid certificate must be on the premises and available at all times when children are present, must accompany children on outings. Paediatric first aid training must be relevant for staff caring for young children. First aiders must be able to respond to emergencies quickly. Our first aid training meets the requirements of the EYFS April 2017 and is fully compliant.

2.4 The responsibility for drawing up and implementing the First aid policy is delegated to the Head, including informing staff and parents. However, implementation remains the responsibility of all staff in our school in order to keep children healthy, safeguarded and protected whenever they are in our care.

## **3 Current Procedure**

3.1 Our risk assessment includes consideration of pupils and staff with specific conditions and major illnesses, such as asthma and epilepsy, takes account of an analysis of the history of accidents in our school, as well as the identification of specific hazards. It also includes careful planning for any trips and visits, including Category C residential and higher risk trips which always include a suitably trained first aider, in keeping with our Learning Outside the Classroom: Educational Visits policy.

3.2 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.

3.3 The following is a guideline and by no means a comprehensive list as no two cases are the same, each case should be assessed by its merit of when an ambulance should be called.

- Appears not to be breathing
- Having chest pain
- Difficulty in breathing
- Feeling weak, numb or struggling to speak
- Experiencing severe bleeding that we are unable to stop by applying direct pressure on the wound.
- Is struggling for breath, possibly breathing in a strange way, appearing to 'suck in' below their rib cage as they use other muscles to help them breath.
- Is unconscious or unaware of what is going on around them.
- Has a fit for the first time, even if they seem to recover from it later.
- If they are having a severe allergic reaction accompanied by difficulty in breathing or collapse.
- If a pupil is burnt and the burn is severe enough to need a dressing.
- If someone has fallen from a height been hit by something travelling at speed.
- Electrocution.

3.4 It's advisable to immediately administer first aid and call for an ambulance if a child appears to be experiencing chest pain, difficulty with breathing or speaking or numbness. Other symptoms necessitating an immediate response include severe bleeding that can't be stopped by applying direct pressure, unconsciousness, lack of awareness of their immediate surroundings, severe allergic reactions accompanied by breathing difficulties or a fit/seizure, even if they seem to recover. Action will obviously need to be taken if a child falls from a height, is hit with force or sustains burns severe enough to need dressing.

3.5 We ensure that first aid provision is available at all times, including out of school trips, during PE, and at other times when the school facilities are used.

3.6 We keep a written record in our accident book of all accidents or injuries and first aid treatment We must inform parent(s)/carer(s) of any accident or injury on the same day, or as soon as reasonably practicable, of any first aid treatment.

3.7 At Raphael Independent School we recognise that accidents may sometimes occur but we make every effort to minimise the risk of accidents by adhering to the following procedures:

- a. The First Aider present will deal with the accident and treat any injuries as required.
- b. Once the individuals have been treated, all details regarding the accident will be recorded in the Accident/Injury Report Forms (for pupils) or the Accident Book (for adults) by a member of staff. An investigation into the accident should be undertaken immediately or at least on the same day. Judgements should be made as to what can be done to reduce the risk of similar accidents occurring again.

c. Any bumps, bangs or knocks to the head will also be communicated personally to parents along with a copy of the Accident/Injury Report Form to advise that the child has received an injury to their head and that they should be continued to be observed and what to do in the event of any concerns.

d. Accident/Injury Report Forms (for pupils) are kept in the Office . The Mid-day Assistants also have a Book. Accident Reporting Books are kept in the Office.

e. Records should be stored for 40 years.

### 3.8

a.If a pupil is taken ill or injured in the classroom, the member of staff responsible should immediately send another member of staff to summon assistance from the office, or if another member of staff is not available, then a responsible pupil should be sent. A further member of staff should be sent for if the rest of the class need supervision or removing from the room. If the pupil simply feels unwell and is able to leave the classroom unaided, the pupil should report to the office for assistance. The other members of the class should not be left unsupervised.

b.If a pupil is taken ill or injured in the playground, then the member of staff on duty should send a responsible pupil to the office for assistance, whilst tending to the pupil. If a more serious injury is suspected, the pupil should be moved as little as possible until a first aider arrives. The member of staff should also in these circumstances send for another member of staff for assistance with the remaining pupils in the playground.

c..If a pupil is taken ill or injured during an activity in school, the above guidelines apply. Should the incident take place at the field, or on the journey to and from the field, or on the netball court then the member of staff should telephone the school office immediately and assistance will be sent. A mobile phone must always be taken to the field or place of activity by the member of staff responsible for the activity.

d.With regard to any illness or injury the first aider will use their discretion as to whether or not outside medical assistance is required. Where a pupil is deemed not to require immediate outside medical attention, it is at the discretion of the first aider to inform the parents of the nature of the injury, advising them to seek medical attention later should they feel it necessary to do so.

- If a child receives a blow to the head, then the above procedures apply. It is a further responsibility of the member of staff in charge of the pupil to ensure that a note is issued from the office stating that a head injury has occurred.
- Members of staff are required to wear disposable gloves when dealing with body fluids. Vomit bags and vomit granules are available from the office.
- Should a pupil be sick or need a change of clothing, then that is the responsibility of the School Office. If a child has vomited or has diarrhoea they should not attend school for 48 hours after the symptoms have gone.
- Satwant Bachoo, Anita Hargrove, Tina Smith, Tracey Hill, Joanne Stleger, Caroline Hansford, Sophie Bayless, Christopher Ward, Johanna Kingdom, Martin Shulver, Judith Jupp, Marian Mann and Christine Gilbert are the current school first aiders. Their training is due to be reviewed in June 2019.
- A list of school first aiders should be distributed to all members of staff, both teaching and non teaching, with the list available in the office and staff room.

- Accidents which require treatment are to be recorded in the accident book immediately. In the cases of head injury, a letter is to be sent home to parents.
- First aid kits are available in the office, the medical room and the Junior lobby.
- Should a pupil have a specific need such as diabetes, asthma or epilepsy, then a health plan will be drawn up with the school, parents and school nurse. The school will act on any advice given.
- Parents should inform the school of any infectious or contagious diseases that a pupil has contracted.
- The school recognises the guidelines set down by RIDDOR and would report to the Health and Safety Executive as necessary.

## 4 First Aid Training

4.1 We carefully consider, and review annually, the training needs of our staff to ensure that suitable staff are trained and experienced to carry out first aid duties in our school. In particular, we consider the following skills and experiences:-

- Reliability, communication and disposition,
- Aptitude and ability to absorb new knowledge and learn new skills,
- Ability to cope with stressful and physically demanding emergency procedures,
- Normal duties are such that they may be left to go immediately and rapidly to an emergency, and
- Need to maintain normal operations with minimum disruption to teaching and learning.

4.2 First aiders in our school have all undertaken appropriate training. They have a qualification in either First Aid at work (FAW, 3 days or 18 hours) or Emergency First Aid at work (EFAW, 1 day or 4-6 hours). EYFS paediatric first aiders hold a clearly recognised certificate or a renewal (minimum of 12 hours tuition). Before the certificates expire, first aiders need to undertake a requalification course as appropriate, to obtain another three-year certificate. In relation to the FAW/EFAW training courses, providers will follow the current guidelines issued by Resuscitation Council (UK) October 2015. E-learning or other forms of distance learning is not recommended by the HSE as a valid form of delivery because training must be delivered face to face to allow for a hands on practical approach.

4.3 Training will be updated every three years and will not be allowed to expire before retraining has been achieved.

4.4 The need for ongoing refresher training for any staff will be carefully reviewed each year to ensure staff basic skills are up-to-date, although we are aware that this is not mandatory. First Aid

Annual three hour basic skills updates in between formal training are strongly recommended by HSE to keep staff up to date.

4.5 Our appointed person (First aid co-ordinator) in school who is responsible for looking after first aid equipment and facilities, as well as calling the emergency services as required is Anita Hargrove & Joanne Stleger.

4.6 The following staff hold the below First Aid Qualifications:

Anita Hargrove, Joanne Stleger, Christopher Ward, Satwant Bhachoo, Tina Smith, Sophie Bayless, Tracey Hill, Joanna Kingdom, Martin Shulver, Marian Mann, Judith Jupp and Christine Gilbert.

## 5 Contents of our First Aid Box +

5.1 Our minimum provision, (**not mandatory**) as recommended by HSE is to hold a suitably stocked first aid box, to nominate an appointed person, as well as the provision for staff of relevant information on first aid arrangements.

In our suitably stocked First Aid box we provide the following as a minimum, or suitable alternatives:-

- a leaflet giving general guidance on First Aid eg HSE leaflet 'Basic advice on First Aid at work' (INDG347 rev 1).
- washproof plasters;
- medium sized (approximately 12cm x 12cm ) individually wrapped sterile unmedicated wound dressings;
- large (approximately 18cm x 18cm) sterile individually wrapped unmedicated wound dressings;
- sterile eye pads;
- individually wrapped triangular bandages (preferably sterile);
- safety pins;
- disposable gloves.
- Moist wipes.

We do not keep tablets or medicines in our first aid boxes.

5.2 Our first aid boxes are kept in the following places:, The school office, Medical Room, Junior Lobby, Science lab, Art room and in the EYFS classroom.

5.3 We take great care to prevent the spread of infection in school, particularly in the event of spillages of bodily fluids which we manage effectively by washing off skin with soap and running water, out of eyes with tap water, wash splashes out of nose with tap water, record details of any contamination, and seek medical advice where appropriate. For further information please see our Communicable and Infectious Diseases Procedures.

5.4 First aiders take careful precautions to avoid the risk of infection by covering cuts and grazes with a waterproof dressing, wearing suitable gloves, using suitable eye protection First and aprons where splashing may occur, use devices such as face shields when giving mouth to mouth resuscitation, wash hands after every procedure.

## 6 Early Years

6.1 The Statutory Framework for the Early Years Foundation Stage is mandatory. In accordance with this, we ensure that at least one person with a current paediatric First Aid certificate is on our premises at all times, when children are present.

6.2 No outing from school is undertaken without the presence of at least one person with a paediatric first aid qualification, present on and off site.

6.3 Our first aid training is relevant for the age of our children.

6.4 We keep a written record of all accidents or injuries and first aid treatment, and we inform parent(s) and/or carer(s) of any accident or injury on the same day, or as soon as reasonably practicable, as well as any first aid treatment. We use an accident book to record such matter.

6.5 Children should not attend school for 48 hours after the symptoms of vomiting and diarrhoea have ceased.

6.6 We know that we must notify the authorities of any serious accident, illness or injury to, or death of, any child in our care, and of the action that we have taken. We aim to do so as quickly as possible and always within 14 days of the incident occurring. We are mindful that not to do so, without a reasonable excuse, would be committing an offence.

6.7 We must notify our local child protection agency Havering Safeguarding Children Board of any serious accident or injury to, or the death of, any child in our care. We always act on their advice, if given to us.

## 7 Monitoring and Evaluation

7.1 Our school's senior leadership team monitors the quality of our first aid provision, including training for staff, on an annual basis. Our policy will be reviewed annually,

## 8 Administering medicine in school

- **As a general policy, the school will not undertake to administer any medicine except those prescribed for long term conditions such as epilepsy, asthma etc**
- For long term conditions, any medicine to be administered in school must be fully labelled with the name of the child and dosage required. They will be kept securely in the school office or refrigerated if necessary.
- Prior written permission for each and every medicine must be received from parents before any medication is given
- Any medicine administered will be noted and parents will be kept informed
- Should any training be required for specific pupils' medical needs then the school will seek appropriate guidance, or a school nurse will visit and formulate a health plan.



- Pupils will report to the school office for any medication needs or requirements. Medicines are administered by the office staff under the direction of the Headteacher. Two members of staff are required to be present during the administration of medicine, one to check the medication and dosage, and one to administer.
- If your child's illness requires prescribed medication from a GP, parents are most welcome to come during school hours to administer medication to their child.

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Reviewed Anita Hargrove

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Signed off by	
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