



St Peter's Church of England Middle School

First Aid Policy

Approved by Local Governing Body: September 2021

Next Review on or before end of: September 2023

Headteacher: Andy Snipp

Chair of Local Governing Body: Jane Whitehorn

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Amendments

31/05/2020	Updated COVID 19	Ravi Matharu – Business Manager	
01/03/2021	Updated Staff Training records	Ravi Matharu - Business Manager	
01/03/2021	Updated Governors	Ravi Matharu- Business Manager	
17/09/2021	Updated Staff First Aiders	Ravi Matharu – Business Manager	

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 advice from the Department for Education on <u>first aid in schools</u> and <u>health</u> <u>and safety in schools</u>, 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
- https://www.hse.gov.uk/news/riddor-reporting-coronavirus.htm guidance for reporting dangerous diseases COVID 19
- https://www.gov.uk/government/publications/safe-working-in-education-childcare-and-childrens-social-care/safe-working-in-education-childcare-and-childrens-social-care-settings-including-the-use-of-personal-protective-equipment-ppe

3. Roles and responsibilities

3.1 Appointed person(s) and first aiders

The school's appointed person(s) is Ravi Matharu – Business Manager.

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, 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 person(s) and/or first aiders are listed in appendix 1. Their names will also be displayed prominently around the school.

3.2 The Governing Board

The governing board 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.

3.4 The Headteacher

The headteacher is responsible for the implementation of this policy, including:

- Ensuring that an appropriate number of appointed persons and/or trained first aid personnel 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)

3.5 Staff

School staff are responsible for:

- · Ensuring they follow first aid procedures
- · Ensuring they know who the first aiders in school are
- Completing accident reports (see appendix 2) for all incidents they attend to where a first aider/appointed person is not called
- Informing the headteacher or their manager of any specific health conditions or first aid needs

4. First aid procedures & Effective Management of COVID 19

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 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 will be contacted and asked to collect their child. Upon their arrival, the first aider will recommend next steps to the parents

- If emergency services are called, the first aider or relevant member of staff will contact parents immediately
- The first aider/relevant member of staff will complete an accident report form on the same day or as soon as is reasonably practical after an incident resulting in an injury

4.1a Use if Emergency inhalers in School – COVID 19

Guidance taken from Department of Health and RBWM Infection Control Team;

In the event that a school's emergency inhaler is used by a pupil, to ensure there is no risk of potential infection, **this inhaler SHOULD be sent home with that pupil.**

Usually the recommendation would be only the spacer goes home with the child who has used it and the inhaler is cleaned and ready to be used again. However, during the Covid-19 period the recommendation is if the school's emergency inhaler is used, both the inhaler and spacer be taken home by that child.

4.1b Person Protective Equipment guidance by Department of Education (04/2020)

Personal protective equipment (PPE) including face coverings and face masks

Wearing a face covering or face mask in schools or other education settings is not recommended. Face coverings may be beneficial for short periods indoors where there is a risk of close social contact with people you do not usually meet and where social distancing and other measures cannot be maintained, for example on public transport or in some shops. This does not apply to schools or other education settings. Schools and other education or childcare settings should therefore not require staff, children and learners to wear face coverings. Changing habits, cleaning and hygiene are effective measures in controlling the spread of the virus. Face coverings (or any form of medical mask where instructed to be used for specific clinical reasons) should not be worn in any circumstance by those who may not be able to handle them as directed (for example, young children, or those with special educational needs or disabilities) as it may inadvertently increase the risk of transmission.

The majority of staff in education settings will not require PPE beyond what they would normally need for their work, even if they are not always able to maintain a distance of 2 metres from others. PPE is only needed in a very small number of cases including:

- children, young people and students whose care routinely already involves the use of PPE due to their intimate care needs should continue to receive their care in the same way
- if a child, young person or other learner becomes unwell with symptoms of coronavirus while in their setting and needs direct personal care until they can return home. A fluid-resistant surgical face mask should be worn by the supervising adult if a distance of 2 metres cannot be maintained. If contact with the child or young person is necessary, then disposable gloves, a disposable apron and a fluid-resistant surgical face mask should be worn by the supervising adult. If a risk assessment determines that there is a risk of splashing to the eyes, for example from coughing, spitting, or vomiting, then eye protection should also be worn

Education, settings and providers should use their local supply chains to obtain PPE. Where this is not possible, and there is unmet urgent need for PPE in order to operate safely, they may approach their nearest local resilience forum.

4.1c Effective Protection & Infection Control – Department of Education (May 2020)

- Minimise contact with individuals who are unwell
- Clean your hands often
- **Respiratory Hygiene** Catch it, Bin it, Kill it avoid touching your mouth, ears and nose when you cough and sneeze
- Clean surfaces that are touched frequently
- Minimise contact and mixing
- Personal Protective Equipment

4.1d How to work safely in specific situations, including where PPE may be required

Reference to PPE in the following situations means:

- fluid-resistant surgical face masks
- disposable gloves
- disposable plastic aprons
- eye protection (for example a face visor or goggles)

Where PPE is recommended, this means that:

- a facemask should be worn if a distance of 2 metres cannot be maintained from someone with symptoms of coronavirus
- if contact is necessary, then gloves, an apron and a facemask should be worn
- if a risk assessment determines that there is a risk of fluids entering the eye from, for example, coughing, spitting or vomiting, then eye protection should also be worn

When PPE is used, it is essential that it is used properly. This includes scrupulous hand hygiene and following guidance on how to put PPE on and take it off safely in order to reduce self-contamination.

Face masks must:

- cover both nose and mouth
- not be allowed to dangle around the neck
- not be touched once put on, except when carefully removed before disposal
- be changed when they become moist or damaged
- be worn once and then discarded hands must be cleaned after disposal

4.1e How should PPE and face coverings be disposed of?

Used PPE and any disposable face coverings that staffs, children, young people or other learners arrive wearing should be placed in a refuse bag and can be disposed of as normal

domestic waste unless the wearer has symptoms of coronavirus, in line with the <u>guidance on cleaning for non-healthcare settings</u>.

Any homemade non-disposable face coverings that staff or children, young people or other learners are wearing when they arrive at their setting must be removed by the wearer and placed into a plastic bag that the wearer has brought with them in order to take it home. The wearer must then clean their hands.

To dispose of waste from people with symptoms of coronavirus, such as disposable cleaning cloths, tissues and PPE:

- put it in a plastic rubbish bag and tie it when full
- place the plastic bag in a second bin bag and tie it
- put it in a suitable and secure place marked for storage for 72 hours

Waste should be stored safely and securely kept away from children. You should not put your waste in communal waste areas until the waste has been stored for at least 72 hours. Storing for 72 hours saves unnecessary waste movements and minimises the risk to waste operatives. This waste does not require a dedicated clinical waste collection in the above circumstances

4.2 Off-site procedures

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

- · A school mobile phone
- A portable first aid kit
- Information about the specific medical needs of pupils
- · Parents' contact details

Risk assessments will be completed by the teacher or leader of the trip prior to any educational visit that necessitates taking pupils off school premises.

There will always be at least one first aider on school trips and visits.

5. First aid equipment

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

- A leaflet with general first aid advice
- Regular and large bandages
- · Eye pad bandages
- Triangular bandages
- Adhesive tape
- Safety pins
- Disposable gloves
- Antiseptic wipes
- · Plasters of assorted sizes
- Scissors
- Cold compresses
- · Burns dressings

No medication is kept in first aid kits.

First aid kits are stored in:

- · The medical room
- Reception (at the desk)
- All science labs
- All design and technology classrooms
- The school kitchens
- School vehicles
- Caretaker room

6. Record-keeping and reporting

6.1 First aid and accident record book

- An accident form will be completed by the first aider/relevant member of staff on the same day
 or as soon as possible after an incident resulting in an injury
- 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
- A copy of the accident report form will also be added to the pupil's educational record by the first aider.
- Records held in the first aid and accident book 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 School Business Manager will keep a record of any accident which results in a reportable injury, disease, or dangerous occurrence as defined in the **RIDDOR 2013** legislation (regulations 4, 5, 6 and 7).

The School Business Manager will report these to the Health and Safety Executive as soon as is reasonably practicable and in any event within 10 days of the incident.

Reportable injuries, diseases or dangerous occurrences include (RIDDOR):

- Death
- Specified injuries, which are:
 - o 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)
 - 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
- Injuries where an employee is away from work or unable to perform their normal work duties for more than 7 consecutive days (not including the day of the incident)
- Where an accident leads to someone being taken to hospital

- 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

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

The first aider will inform parents of any accident or injury sustained by a pupil, and any first aid treatment given, on the same day, or as soon as reasonably practicable.

6.4 Reporting to Ofsted and child protection agencies

The Headteacher will notify Ofsted of any serious accident, illness or injury to, or death of, a pupil while in the school's care. This will happen as soon as is reasonably practicable, and no later than 14 days after the incident.

The Headteacher will also notify Oxford Diocese Schools Trust and LADO of any serious accident or injury to, or the death of, a pupil while in the school's care.

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).

Staff are encouraged to renew their first aid training when it is no longer valid.

8. Monitoring arrangements

This policy will be reviewed by the School Business Manager every three years or when a change occurs.

At every review, the policy will be approved by the Headteacher, The Finance & Premises and Full Governing body.

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

Appendix 1: list of Appointed person(s) for First Aid at Work (FAW) and Paediatric First Aid (PFA)

Staff member's name	Role	Contact details
Sheryl Breach	Reception	
Bernadette Binstead	Reception	
Emma Wood	Head's PA	
Charu Gohil	Teaching Assistant	
Nichola Vallis	Lunch time supervisor	
Nailah Hussain	Librarian	
Rachel Caffyn	Student Support	
Gisela Hoogers	SENDCo Assistant	
Ravi Matharu – First Aid at Work	Business Manger	0758 106 0681
Christine Hardy	Pastoral Leader	
Patricia Atten Ambo	Teaching Assistant	
Josie Holliday	Teaching Assistant	
Kathrine Smith	Teaching Assistant	
Dave Wood	Technician	
Una Bulivuata	Apprentice- Teaching Assist	

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			

Appendix 3: First Aid Training log

Name/type of training	Staff who attended (individual staff members or groups)	Date attended	Date for training to be updated (where applicable)
First Aid at Work	Ravi Matharu	10/06/2021	10/06/2024
Anaphylaxis Awareness Level 2 Emergency First Aid at School	Nichola Vallis Sheryl Breach Nailah Hussain Gisela Hoogers Bernie Binstead	01/03/2021	29/02/2024
Automatic external Defibrillator Level 2	Nichola Vallis Sheryl Breach Nailah Hussain Gisela Hoogers Bernie Binstead	01/03/2021	28/02/2022
Emergency First Aid at School Anaphylaxis Awareness	Patricia Atteh-Ambo Unaisi Bulivuata Rachel Caffyn Charu Gohil Christine Hardy Josie Holliday Kathrine Smith	02/09/2021	01/09/2024
Level 2	Dave Wood Emma Wood		
Automatic external Defibrillator Level 2	Patricia Atteh-Ambo Unaisi Bulivuata Rachel Caffyn Charu Gohil Christine Hardy Josie Holliday Kathrine Smith Dave Wood Emma Wood	02/09/2021	01/09/2023