

# "CREATIVITY, RESPONSIBILITY, RESPECT, AND HAPPINESS"

# BLUE COAT CE VA PRIMARY SCHOOL

# First Aid Policy

Committee responsible for this policy	Resources committee
Policy initially approved by FGB	2012
Policy reviewed/amended	28 <sup>th</sup> Jan 2014: 10 <sup>th</sup> Feb
	2015:14 <sup>th</sup> June 2016,13thJune
	2017, 20 <sup>th</sup> March 2018, 26 <sup>th</sup>
	March 2019
Policy review term	Annual
Policy due for review	April 2020



### Statement of Intent / Scope of the Policy

This policy sets out the responsibilities and procedures for First Aid at Blue Coat CEVA Primary school.

#### Responsibilities

#### The Governing Body

The Governing Body at Blue Coat CEVA Primary School:agree and regularly review the First Aid Policy

- arrange adequate and appropriate training and guidance for staff who volunteer to be First Aiders/appointed persons.
- ensure that there are enough trained staff to meet the statutory requirements and assessed needs, allowing for staff on annual/sick leave or off-site.
- ensure they have adequate Employers' Liability Insurance.
- ensure proper procedures are in place and monitor the school's agreed policy.
- ensure staff are aware of procedures and are properly trained.
- work with the Headteacher in developing an effective policy

#### The Headteacher

At Blue Coat CEVA Primary School it is the responsibility of the Headteacher to:

- put the agreed policy into practice and develop detailed procedures where necessary.
- take responsibility for day-to-day decisions.
- ensure the policy is available to all stakeholders
- liaise with health services on matters of best practice
- ensure all First Aiders, Appointed Persons and general staff are aware of their roles and responsibilities and are adequately trained
- arrange back up cover if staff are absent
- ensure all staff know what to do in an emergency

#### 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 endeavors 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 towards 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. (Reference - page 4, paragraph 17 'Guidance for First Aid Schools – DCSF)

#### First Aiders

First Aiders will:

- complete a training course approved by the Health and Safety Executive (HSE).
- 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.

#### **Appointed Persons**

An Appointed Person is not always necessarily First Aid trained but will:

- take charge when someone is injured or becomes ill
- look after the First Aid equipment e.g. restocking the First Aid container
- ensure that an ambulance or other professional medical help is summoned when appropriate.

#### **First Aid Provision**

The Governing Body and Headteacher regularly review the school's First Aid needs (at least annually), and particularly after any changes and ensures that the provision is adequate. Where minimum numbers of trained First Aiders are set, these are monitored to ensure that these standards are being met.

The Headteacher will inform all staff of the First Aid arrangements. This includes the location of equipment, facilities and First Aid personnel, and the procedures for monitoring and reviewing the school's First Aid needs. This is communicated via staff meetings, the medical room notice board and also through induction procedures when new staff start. (Every new member of staff is given an induction list of issues they should be made aware of. A Health and Safety discussion (including First Aid) should be held on the first day of attendance). Cover staff on a casual basis are given a booklet identifying these.

Schools have a responsibility to provide the proper First Aid materials, equipment and facilities at all times. First Aid equipment is clearly labelled and easily accessible in the school medical room. The cases are clearly marked. All First Aid incidents, whether deemed to be minor or major, will always be directed to the school's central medical room for treatment during the school day or after hours during after-school clubs or sporting events. [Lettings on site are responsible for their own First Aiders and First Aid arrangements.]

Unless First Aid cover is part of a member of staff's contract of employment, people who agree to become First Aiders at Blue Coat CEVA Primary School do so on a **voluntary basis**. Such individuals are mentioned on notices around the school identifying the First Aiders and their usual location.

First Aiders will have completed standard First Aid at Work training courses. However, these courses do not include resuscitation procedures for children. First Aid at Work certificates are only valid for **three years.** The school will arrange refresher training and retesting of competence before certificates expire. If a certificate expires, the individual will have to undertake another full course of training to become a school First Aider. The school maintains a record of First Aiders and their certification dates. The First Aiders themselves should also be pro-active and prompt in identifying their need for refresher training.



# **Incident/Accident Log Book**

Accident statistics can indicate the most common injuries, times, locations and activities at a particular location on the school site. These can be a useful tool in risk assessment, highlighting areas to concentrate on and tailor First Aid provision to. Accident statistics are reviewed both by the Senior Leadership Team 3 times annually, as well as by the Resources committee.

The record of any First Aid treatment given by First Aiders and appointed persons includes:

- the date, time and place of incident
- the name (and class) of the injured or ill person
- details of the injury/illness and what First Aid was given
- what happened to the person immediately afterwards
- name of the First Aider dealing with the incident

A copy of this form can be located in **Appendix A**.

Under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR), some accidents must be reported to the HSE. The school keeps a record of any reportable injury, disease or dangerous occurrence. This includes: 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.

The following accidents must be reported to HSE: if there are accidents resulting in death or major injury (including as a result of physical violence); or accidents which prevent the injured person from doing their normal work for more than three days (including acts of physical violence). The School Business Manager (SBM) is responsible for ensuring the RIDDOR forms and any subsequent processes are completed.

HSE must be notified of fatal and major injuries and dangerous occurrences without delay (e.g. by telephone). This must be followed up within ten days with a written report on Form 2508. Other reportable accidents do not need immediate notification, but they must be reported to HSE within ten days on Form 2508.

#### **Contents of a First Aid Container**

There is no mandatory list of items for a First Aid container. However, the HSE recommend that, where there is no special risk identified, a **minimum** provision of First Aid items would be:

- a leaflet giving general advice on First Aid
- 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.

The First Aid containers and emergency First Aid kits are checked weekly by Graham Carlton (Site Manager and First Aider) to ensure stocks are complete. These should be restocked as soon as possible after use. There should be extra stock in the school. This stock is kept in the medical room.

# **Hygiene/Infection Control**

All staff should take precautions to avoid infection and must follow basic hygiene procedures. Staff should have access to single-use disposable gloves and hand washing facilities, and should take care when dealing with blood or other body fluids and disposing of dressings or equipment.

#### **Procedures**

The office maintains a list of all staff qualified, to ensure qualifications are up to date. The members of staff listed below **MUST BE CONSULTED** in the event that a child (or member of staff) should sustain a **major injury** or injury of the following nature:

- Cut to head or serious knock
- All accidents with potential for significant injury i.e. fall from height etc
- Suspect sprain or fracture
- Burns
- Stings: i.e. bees/wasps/insects (due to the possibility of allergic reaction)

In addition, appropriately trained members of staff MUST BE CONSULTED to treat pupils who are known to have a specific illness i.e. diabetics/pupils known to have allergic reactions/pupils with epipens in school – irrespective of the type of illness or injury sustained. On NO ACCOUNT must these pupils be left/sent to self-administer their own treatment.

Consultation from the designated member of First Aid staff **should not be sought** in the event of **minor incidents** which may be treated with Pastoral care. Examples of these are:

- minor cuts or grazes
- pupils who feel or who are actually sick
- minor bumps to the head i.e. pupils who lightly bump their head on a window/door etc
- minor marks to the body (bruises)

In the event of **major** or **potentially significant injury**, the designated member of First Aid staff should be sent for immediately. An informed assessment will be carried out and the appropriate treatment



given. Should the injury require medical assistance (i.e.

Parent/carer called into school/hospital visit/ambulance/), a member of the office staff should be contacted immediately to seek urgent authorisation from the Headteacher/Deputy Headteacher (injury type permitting) and the relevant action taken.

A detailed process map of how the school deals with potentially significant injuries can be located in **Appendix B**.

Parents/carers will be called in each instance that an accident has occurred with potential for significant injury i.e. fall from height. If a child is examined and deemed to be fit to return to class but is **later readmitted** to the medical room by staff then the child's parents will be immediately contacted.

The use of an epi-pen would normally require the calling of an Ambulance. The pen should be disposed of through the Ambulance Service. A child, whose epi-pen has been used, **cannot** be allowed back into school, until there is a replacement pen.

### **Administration of Medicines**

Please see the school's Medicines In School Policy for the storage and administration of medication.

# **Communications with Parents/Carers**

Appendix B sets out how major or potentially significant injuries are communicated to parents/carers using the form in Appendix A.

#### **Cross Referenced:**

Cc: Safeguarding Policy, Medicines in School Policy, Health & Safety Policy.



Appendix A: Reporting Form for Major or Potentially Significant Injuries

BLUE COAT CEVA PRIMARY SCHOOL SIGNIFICANT INJURY REPORT FORM					
NAME OF CHILD:	TIME	TIME & DATE:			
CLASS / YEAR GROUP:					
MEMBER OF STAFF REPORTING INCIDENT:	FIRS	T AIDER:			
EXACT LOCATION OF INCIDENT:					
NATURE OF INCIDENT:	SEVERITY OF INCIDENT:				
□ Near Miss □ Injury		☐ Moderate: First Aid Required			
<ul> <li>□ Property Damaged</li> <li>□ At Risk Behaviour</li> <li>□ Illness</li> </ul>	□ P	☐ Serious: Further medical assistance required ☐ Potentially Serious			
PART(S) OF BODY INJURED:		Inknown at this stage OF HOW INJURY HAPPENED:			
$\Omega$					
	TIME:	FIRST AID TREATMENT GIVEN/ACTIONS TAKEN:			
CHILD'S PAIN ASSESSMENT:		NEXT STEP(S):			
HAPPY FACE - SAD FACE SCALE					
0 1 2 3 4 5		NOTE: Any further information to be recorded overleaf			
HANDOVER RECORD:					
☐ CLASS TEACHER (Verbal Briefing Req'd)		☐ PARENT/CARER (Verbal Briefing Req'd)			
☐ BUSY BEES (Phone Parent/Carer & Verbal Briefing I	Req'd)	☐ SENT WITH CHILD (Phone Parent/Carer)			

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SIGNIFICANT INJURY REPORT FORM (Continued)						
TIME	TIME CONTINUATION/UPDATE/ADDITIONAL INFORMATION					



# Appendix B: Process for Dealing with Major or Potentially Significant Injuries

First Aider Support Staff Teaching staff

First Aider initiates an injury form upon the child's admission to the medical room.

All relevant information is taken from the supervising adult.

First Aider

First Aider completes the form in its entirety, taking care to note times and nature of treatments applied. **Potentially Significant injuries reported to parents** with treatment details explained.

First Aider Teaching staff If the child is judged safe to go back to class then the child is escorted by the First Aider to the next supervising adult (i.e. class teacher) and then they are briefed as to the contents of the injury form, including the 'next steps' of action

Teaching staff

If the child receives further transitions in the day between supervising adults i.e. collective worship, P.E., learning in a neighbouring class etc then it is the responsibility of the supervising adult to brief the next adult with a duty of care

Teaching staff

The supervising adult who will dismiss the child has the responsibility to verbally brief the parent/carer whilst handing them the injury form when collecting their child. If the child is not being picked up by a parent/carer then....

Teaching staff

Send the form home with the child to hand to parent/carer. Follow up with a prompt phone call to parent/carer to inform them of the injury form

aoina homo with child

Verbally brief after-school care using the injury form and follow up with a prompt phone call to parent/carer to inform them of the injury form going

Teaching staff

After-school Care



## **BLUE COAT CE VA PRIMARY SCHOOL**

HEAD / OTHER INJURY REPORT FORM			
NAME OF CHILD: DATE:		DATE:	
CLASS: TIM		TIME:	
HEAD INJURY	Your child received a bump to the head today.  It was reported to: Class Teacher / Qualified first aider / Headteacher / Other  It is recommended that this child is observed over the next 24 hours. Look for signs of:  Dizziness / Drowsiness / Headaches / Vomiting / Blurred or double vision  If they experience any of these symptoms, please seek further medical advice immediately.		
OTHER INJURY	Your child suffered an inju	iry to:	
Details of the incident:			

## **BLUE COAT CE VA PRIMARY SCHOOL**

HEAD / OTHER INJURY REPORT FORM			
NAME OF CHILD:	DATE:		
CLASS: TIME:		TIME:	
HEAD INJURY	Your child received a bump to the head today. It was reported to: Class Teacher / Qualified first aider / Headteacher / Other  It is recommended that this child is observed over the next 24 hours. Look for signs of: Dizziness / Drowsiness / Headaches / Vomiting / Blurred or double vision  If they experience any of these symptoms, please seek further medical advice immediately.		
OTHER INJURY	Your child suffered an inju	ıry to:	
Details of the incident	:		

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## **BLUE COAT CE VA PRIMARY SCHOOL**

	HEAD INJURY FORM —	SUSPECTED CONCUSSION		
NAME OF CHILD:		DATE:		
CLASS:		TIME of injury:	First aider:	
HEAD INJURY	Your child received a bump to the I (circled).	l nead today. They have exhibited	the following symptoms	
	Loss of consciousness	s of consciousness Ringing in the ears		
	Dizziness / Poor balance	Slurred speech		
	Drowsiness / Confusion	Poor concentratio	n	
	Headaches	Feeling unwell		
	Stomach pain / nausea / vomiting	Blurred or double	vision	
	Other (details)			
	Due to these symptoms, we adv healthcare professional e.g. a Gl department.			
	-	with a suspected or confirmed concussion need to be away from school for 24 hours time of the accident to aid recovery, and for close supervision.		
	Please speak with your doctor to confirm that your child is fit to return to school. You will be asked to sign a form on your child's return to school to confirm this.			
	Please check with your doctor if any long. Examples may include:	·	estricted and for how	
	- PE or physical activity clu			
	<ul><li>Outdoor play time (lunch</li><li>Use of computer or lapto</li></ul>	•		
		o your child, e.g. Sports Day, S	chool trip	
	Please visit the school office to pro If you have any queries, please call term time).			

Details of the incident:

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<sup>\*</sup> Office: please also attach copy of Significant Injury Form



### **BLUE COAT CE VA PRIMARY SCHOOL**

	RETURN TO SCHOOL FOLLOWING SIGNIFICANT INJURY OR ILLNESS				
NAME OF CHILD:			DATE:		
CLASS:			Parent/Carer		Staff member
This form is to completed by a parent/carer of a child returning to school after a significant injury or illness. These could include, but are not restricted to, a bone fracture, concussion, an operation or invasive medical procedure, injury requiring stitches, or an illness requiring hospitalisation. A member of office staff will help you complete this form <a href="mailto:before">before</a> your child returns to class.					
The purpose of this form and to that all current info					e of any needs of the child, s of staff.
Details of illness / injury (	please circle and pr	ovide more details be	low)		
Fracture/Break	Operation	Illness	Concussion	Injury	Other
Details – include dates					
Where was medical assistance provided (e.g. hospital, GP, Minor Injuries).					
Has a medical professiona	al cleared this child	for being fit to return	to school?	Yes	No
(please attach copies of ar		_			
Does your child require a	ny change to their n	ormal school activitie	s? Examples include	e:	
Physical activity / PE / outdoor play / sport clubs Use of computer, laptop or television screens Attendance of school trips Assistance in classroom (e.g. seating arrangements) Assistance outside classroom (e.g. using the toilet, moving around school, lunchtime arrangements) Prescription medicines to be administered					
Give details					
How long do these restrictions need to stay in place? Date/s					
Is there any other relevant information that needs sharing with school?					
Signature parent /carer			Signature Blue Coat	staff member	•
				••••••	