

Great Sankey High School



FIRST AID POLICY

Policy approval Date	January 22
Review Date:	January 23
Next Review	January 24

First Aid Policy

Policy Statement

This policy is designed to promote the health, safety and welfare of pupils, staff, and visitors to this school through the provision of first aid equipment and trained personnel in accordance with the requirements of the Health and Safety (First Aid) Regulations 1981 and Approved Code of Practice and Guidance.

The first aid appointed lead is provided by Christina Kane

The Aims of the Policy

The aim of providing first aid is to save lives and to ensure that minor injuries and illnesses do not escalate into major ones. The aim of this policy is to ensure that:

- We are compliant with all relevant legislation.
- a person is appointed to take charge of first aid arrangements.
- staff nominated as first aiders receive up-to-date training by a suitably recognised organisation.
- suitably stocked and marked first aid containers are available at appropriate locations throughout the school.
- all members of staff are fully informed regarding the first aid arrangements.
- records are maintained of any accidents, injuries, diseases, or dangerous occurrences.
 Reports are undertaken as required under the reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013.
- first aid arrangements are annually reviewed and assessed to maintain adequate first aid provision.

Procedure

First aid provision will be always available during the school day and also off the premises while on school visits.

Risk Assessment

In accordance with the school's Health and Safety Policy, the annual risk assessment of all school buildings and facilities will pay particular attention to:

- Practical activities
- The use of machinery
- Storage of hazardous substances
- The use of equipment for sports and physical education

From this assessment a judgment will be made as to how many trained first aiders are required to provide an effective and safe response to accidents and injuries.

A judgment will also be made as to how many fixed and portable first aid containers should be available and where they are to be located.

Specific consideration will be given to staff or students who have special health needs or disabilities.

In determining the level of provision, the Headteacher and Senior Leadership Team will consider:

- the provision during lunch times and breaks
- the adequacy of the provision to account for staff absences
- the provision of first aid for off-site activities and school trips
- the provision for practical lessons and activities, e.g., science, D&T, Art, physical education etc.

Qualification and Training

All school first aiders hold a certificate of competence that is valid for three years.

Refresher training and retesting of competence should be arranged at least three months before certificates expire.

The school will consider interim refresher training to maintain first aiders' basic skills and keep them up to date with changes, where necessary, e.g., adrenaline pen, CPR, and defibrillator training.

Ensure all staff are aware of reporting procedures

School Training Procedure:

Training will be carried out by an organisation whose training and qualifications are approved by the Health and Safety Executive.

The certificate is valid for three years after which a refresher course is required before further recertification.

A list of qualified first aiders is provided to all staff at the start of the academic year by means of the Staff Handbook.

First Aid Materials, Equipment and Facilities

First Aid container will be:

- marked with a white cross on a green background.
- Appropriately stocked for the

Portable first aid containers will be available for all school trips and for sporting and other activities that take place over 200 metres from school buildings.

Where it is known that staff or students engaged in an out of school activity have specific health needs or a disability, the contents of the first aid container will include the resources to meet these specific needs, e.g., a supply of insulin or an adrenaline-pen.

Labelled First Aid Boxes are located in:

- Map will be available with locations of first aiders and names of nominated first aiders.
- See map attached.

A First Aid Bag contains:

Sterile Dressing

Large Sterile Dressing

Triangular Bandage

Eye pad sterile dressing

Sterile adhesive dressings

Alcohol free moist cleansing wipes

Adhesive tape roll

Nitrile disposable gloves

Finger sterile dressing

Resuscitation face shield

Foil blanket

Burns dressing

Shears

Conforming bandage

Trauma dressing large

Trauma dressing medium

Haemostatic dressing

Tourniquet

• No medicine/tablets are to be kept in the first aid bags.

Information and Notices

First aid notices giving the location of first aid containers and the names of members of staff who are certificated first aiders will be prominently displayed in the staff room and in various locations around school.

The school will make every effort to ensure that first aid notices are clear and easily understood by all.

Information on the school's first aid provision will be included in the staff handbook.

Hygiene and Infection Control

All First aid staff will:

- follow basic hygiene procedures.
- be aware as to how to take precautions to avoid infections, e.g., COVID-19 etc.

All First Aid staff will have access to single use disposable gloves and hand washing facilities.

The school will ensure adequate and appropriate stock levels of PPE is provided for all staff:

- Gloves Are to be worn to protect your hands.
- Face Masks/Coverings Are worn to protect/prevent the spread of a respiratory virus when close contact with another person cannot be avoided.
- Eye Protection or Shields Are worn when there is a risk of bodily fluids splashing up into your face.
- Aprons Are worn to protect your clothing from becoming soiled.

Disposable gloves will be always worn when dealing with blood or other body fluids or when disposing of dressings or other potentially contaminated equipment.

School's Body Spillages Procedure:

- No person must treat a pupil who is bleeding, without protective gloves.
- Protective gloves are provided within each first aid kit.
- Sponges and water buckets must never be used for first aid to avoid the risk of contamination.
- All body fluid spillage's (Vomit, Diarrhoea and Blood) must be cleaned immediately. This is
 vital so spread of infections is reduced. Disposable gloves, mask and an apron should be
 worn. They must be kept for this purpose only. Following use, gloves, mask and apron
 must appropriately discarded.
- Absorbent granules should be dispersed over the spillage and left to absorb for a few
 minutes then swept up in accordance with bio-hazard kit instructions. Wash the affected
 area with warm water and detergent and dry. Once spillages have been cleaned, dispose
 of the contents as detailed within the bio-hazard kit instructions.
- · Hands must be washed and dried after removal of protective gloves.

COVID-19 Guidance for clearing up blood or body-fluids spills:

Keep people away from the area. Use a spill-kit if available, using the PPE in the kit or PPE provided by your employer or organisation and following the instructions provided with the spillkit. If no spill-kit is available, place paper towels or roll onto the spill.

Recording Accidents and Injuries

All accidents and injuries will be recorded in an electronic form and such records will be kept for a minimum of three years.

In some cases, a record maybe kept longer, if the injury is deemed significate enough to imply the injury may cause the student problems in the future as a student has up until their 21st birthday to make a claim.

The record of any first aid treatment given by first aiders and other appointed persons will include:

- the date, time, and place of the incident
- the name and class of the injured or ill person
- details of the injury or illness and what first aid was given.
- what happened to the student or member of staff immediately afterwards (e.g. went home, resumed normal duties, went back to class or went to hospital)
- the name and signature of the first aider or person dealing with the incident.

Serious or significant incidents will be reported to parents by direct contact with the parent or carer.

In an emergency involving outside medical professionals or services, the Headteacher or the appointed person will follow the school's established procedures for contacting a parent or carer.

School Incident Reporting Procedure.

- All incidents, injuries, head injuries, ailments and treatment will be reported by a First Aider via the accident / incident form. Serious incidents where a child has had to be taken to hospital must also be reported to Compliance Education on 0800 6128162.
- Parents will be informed of a head injury by letter. The letter outlines the injury and symptoms to look out for. This letter is to be handed to the pupil so that they are aware of any injury and therefore can monitor the child. A telephone call will also be made to the child's parent / carer.
- First Aiders will contact parents by phone if they have concerns about any injury.
- Staff should also report accident following the same procedures for a child if they sustain
 an injury at work. An injured member of staff or other supervising adult should not
 continue to work if there is any possibility that further medical treatment is needed. The
 member of staff or other supervising adult concerned should seek medical advice without
 delay.

Reporting Accidents to the HSE (RIDDOR)

The following types of accidents will be reported to the HSE as required under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013:

http://www.hse.gov.uk/pubns/edis1.pdf

Accident - Employees

- accidents resulting in death or major injury (including those that result from physical violence)
- accidents that prevent the injured person from doing their normal work for more than seven days
- work-related disease that affects an employee and that a doctor confirms in writing.
- Fractures, other than to fingers, thumbs, and toes
- Amputation
- 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) which cover more than 10% of the body or cause significate damage to the eyes, respiratory system or other vital organs.
- · 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-induces illness or requires resuscitation or admittance to hospital for more than
 24 hours.

Accident - Students and Visitors

- The death of the person which arose out of or in connection with a work activity.
- An injury that arose out of or in connection with a work activity and the person is taken directly from the scene of the accident to the hospital for treatment.

The responsible person at/for the school will consider whether the incident was caused by:

• a failure in the way a work activity was organised (e.g., inadequate supervision of a field trip);

- the way equipment or substances were used (e.g., lifts, machinery, experiments etc);
 and/or
- the condition of the premises (e.g., poorly maintained or slippery floors)

Submitting a Report and Accident Investigation

All incidents will be recorded in the school accident book and to Compliance Education on 0800 6128162 or via the schools appointed Health and Safety Advisor.

Compliance Education will review/investigate the incident and when necessary, will report all RIDDOR incidents to the HSE's Incident Contact Centre without delay.

The Headteacher is responsible for ensuring all incidents subject to RIDDOR are reported Compliance Education within 48hrs of the incident as RIDDOR reports are time sensitive.

All incidents will receive an appropriate level of investigation by staff. An accident investigation is performed in order to prevent similar accidents in the future.

Additional advice and guidance regarding what are reportable under RIDDOR, along with support in investigating serious incidents is available from Compliance Education if required.

School Procedures

First Aid Provision

- A sufficient number of staff will hold a First Aid at Work Qualification. Training will be carried
 out by an organisation whose training and qualifications are approved by the Health and
 Safety Executive. The certificate is valid for three years after which a refresher course is
 required before further re-certification. A list of qualified first aiders is provided to all staff at
 the start of the academic year.
- A designated lead First Aider will oversee the implementation of this policy.
- The designated lead person for First Aid is Christina Kane who will ensure that there are
 enough first aid boxes for the number of pupils and adults in the school and for the number
 of pupils and adults participating in a school trip. There is a legal requirement for first aid
 equipment for each person in the school community; this should be regularly checked on the
 NHS website.
- The designated lead person will ensure the maintenance of the contents of the first aid boxes and other supplies.
- The designated lead person keeps a record of the training completed and will identify when First Aiders need to refresh training and inform Christina Kane to arrange.
- All staff will be trained in any aspects of First Aid deemed necessary to support a care plan for a pupil e.g., asthma, epilepsy, the use of an EpiPen.
- The site manager will monitor the frequency of accidents, their location, and age group to see if patterns emerge. They will bring this to the attention of the of SLT who will plan a course of action to address the matter.
- There is a defibrillator positioned in the Main staff room. For best practise the first aid at work staff have had training and are qualified to deliver this. However, you do not need to be trained to use a defibrillator, there are clear instructions on how to attach the defibrillator pads, it then assesses the heart rhythm and will only instruct you to deliver a shock if required.

Procedures - In school

- In the event of injury or medical emergency, pupils /staff will be directed to an appointed First Aider.
- Any pupil complaining of illness or who has been injured will be taken to the Year office
 waiting area by an adult for the named First Aider(s) to inspect and, where appropriate, treat.
 Constant supervision will be provided (this designated facility has access to a wash basin
 and toilet facilities). If appropriate, parents will be contacted so that the child can be collected
 and taken home.
- IF THE SITUATION IS LIFE THREATENING THEN AN AMBULANCE SHOULD BE CALLED AT THE EARLIEST OPPORTUNITY BY DIALLING 9 then 999 / 112
- Unless it cannot possibly be avoided, members of staff should administer first aid with another adult present or in a public area. Whilst respecting the dignity of the child, adults should not put themselves in vulnerable situations on their own with a child.
- For their own protection and the protection of the patient, staff who administer first aid should take the following precautions: Exposed cuts and abrasions should be cleaned under running water and patted dry with a sterile dressing or cleaned with sterile wipes. CHECK FOR ALLERGY TO PLASTERS BEFORE USE. Hands should be washed before and after administering first aid. Disposable gloves should be worn.
- All serious accidents should be reported to SLT or a First Aider who should call an
 ambulance and the child's parents ASAP. Contact details can be obtained from the school
 office. A member of staff will accompany the pupil to the hospital if the parent is not able to
 come to school immediately.
- If staff are concerned about the welfare of a pupil, they should contact the Year Office/First Aider immediately. If an injury has been sustained, the pupil should not be moved unless they are in immediate danger.

Procedures - Educational Visits / Residentials

- The Headteacher and EVO have responsibility for ensuring staff have adhered to the school's 'Educational Visits Procedures' when organising a visit.
- Risk Assessment will be carried out as part of an educational trip. Particular attention needs to be paid to the Educational Visits Policy
- Educational visit/risk assessment forms must be completed before any visit takes place and this is signed by two members of the SLT and or the Education Visits Co-ordinator This form has the mobile numbers for emergencies of staff on the trip and those in school.
- This form also has information about any child who has an illness or needs medication.
- Teachers must take an adequate number of first aid kit/s for the number of pupils participating.
- All education residentials will have a qualified first aider at work present.

Action at an Emergency (To be undertaken by trained First Aider)

- Assess the situation: Are there dangers to the First Aider or the casualty? Make the area safe, look at injury: Is there likely to be a neck injury?
- Assess the casualty for responsiveness: Does the casualty respond.

IF THERE IS NO RESPONSE in an adult:

- Open airway by placing one hand on the forehead and gently tilt the head back. Remove any
 obvious obstructions from the mouth and lift the chin.
- Check for breathing. If the casualty is breathing assess for life threatening injuries and then place in the recovery position.
- If the casualty is not breathing send a helper to call an ambulance and then bring the defibrillator from the Internet Lounge (6th form) of the sports hall, whichever is nearer.

- If breathing is absent begin Cardiopulmonary Resuscitation (CPR).
- Give 30 chest compressions, 2 rescue breaths and then continue with 30 chest compressions, (30:2) until emergency help arrives.

IF THERE IS NO RESPONSE in a child:

• Give 5 rescue breaths and with one hand on the centre of the chest give 30 chest compressions,

Then continue with 2 rescue breaths and 30 chest compressions (30:2) until emergency help arrives.

IF THERE IS NO RESPONSE in a child under one year:

• Give 5 rescue breaths and with index and middle finger on the centre of the chest give 30 chest compressions,

Then continue with 2 rescue breaths and 30 chest compressions (30:2) until emergency help arrives.

COVID-19: Guidance for First Aiders.

Physical distancing – is close contact required or likely?

Assess whether close contact is required. Where possible, stay at least 2 metres away from other people but not if this affects your response.

Hand hygiene: Clean your hands thoroughly with soap and water or hand sanitiser after close contact with others and after touching any surfaces in the area you are working in.

Person Protective Equipment (PPE):

Where it is not possible to maintain a 2-metre distance and you are required to deliver hands on care, wear appropriate PPE.

Cardiopulmonary resuscitation:

If you are required to perform cardiopulmonary resuscitation (CPR), you should conduct a dynamic risk assessment to assess appropriate infection control precautions.

In adults, it is recommended that you do not perform mouth-to-mouth ventilation – perform chest compressions only.

Compression-only CPR may be as effective as combined ventilation and compression in the first few minutes where cardiac arrest has not occurred due to lack of oxygen (asphyxial arrest).

In children, cardiac arrest is more likely to be caused by a respiratory problem or lack of oxygen. Therefore, chest compressions alone are unlikely to be effective. If a decision is made to perform mouth-to-mouth ventilation, use a resuscitation face shield, if one is available.

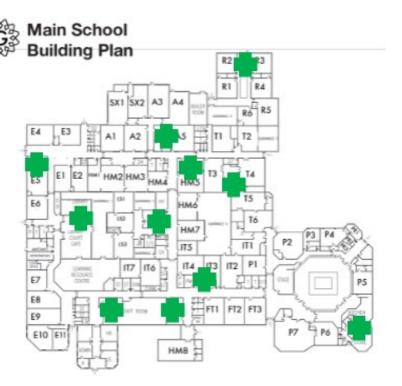
If you perform mouth to mouth ventilation on someone with COVID-19 you should stay at home and complete 10 full days self- isolation.

If you perform mouth-to-mouth ventilation on someone who does not have COVID-19, no additional actions need to be taken other than monitoring yourself for symptoms of COVID-19 over the following 14 days.

However, if they are subsequently diagnosed with COVID-19 you may be contacted by NHS Test and Trace and asked to self-isolate.

If you develop symptoms of COVID-19, however mild, or receive a positive test result, inform your employer, and follow the stay-at-home guidance.

First Aid Kit Locations



First Aid Kits are located in the following locations:

Year offices, reception, main staffroom, DT office, Art office, Science Prep Room, Dining areas, College office, Sports Hall, Humanities office, RS office, Maths office, MFL office, BEICT office

