

Pickwick Academy Trust



First Aid Policy

Reviewed: December 2018

Policy Ratified by the Board: February 2019

Next Review Date: December 2021

PICKWICK ACADEMY TRUST

FIRST AID POLICY

To be read in conjunction with Trust Policies on Health and Safety, Safeguarding, Children with Medical Needs, Administration of Medication, Allergen Policy, Intimate and Invasive Care, Incident and Accident investigation procedures.

Introduction

The **First Aid Policy** at Pickwick Academy Trust is in operation to ensure that every child, member of staff and visitor will be well looked after in the event of an accident whether on or off site and no matter how minor or major, and provides a framework for responding to an incident, and recording and reporting the outcomes.

Following an accident, all members of the community should be aware of the support available (Employers Assistance Programme) through their insurance policies and how to access this support.

Responsibilities

The Board of Trustees responsibilities:

- Ensure the provision of adequate First Aid cover, equipment, and facilities across the Trust.
- Monitor and respond to all matters relating to the health and safety of all persons on school premises.

Local Governing Body responsibilities:

- Ensure the provision of adequate First Aid cover, equipment, and facilities are in place in each school and that such provision are monitored and maintained.
- Ensure that required measures are implemented in each school in response to all matters relating to the health and safety of all persons on school premises.

Headteachers and the Leadership Team responsibilities:

- Put in place and review the necessary arrangements for an effective, trained and appropriate first aid response for pupils, staff, and visitors on and off site including on school trips and which meets defined ratios of first aiders. Please see table 1 below.
- Ensure that information is made available about first aid provision and that this is understood; and that adequate information is provided to staff which should include displaying names of first aiders and first aid locations.
- Ensure that they always obtain a history relating to an employee or pupil with medical issues. (See Children with Medical Needs Policy.)
- Ensure that if an injury has caused a problem, the individual **must** be referred to a First Aider for examination.

- Undertaking, or ensuring that managers undertake risk assessments as appropriate, and that appropriate measures are put in place.
- Reporting specified incidents to the HSE - RIDDOR when necessary.
- At the start of each academic year, we provide the first aid team with a list of pupils and staff who are known to be asthmatic, anaphylactic, diabetic, and epileptic or have any other serious illness based on information supplied by parents/carers or individuals. Procedures should be in place to review and update this as required ensuring both prompt and good communication throughout.
- Ensure Individual Care Plans are current and in place for those with medical needs.
- Ensure that appropriate first aid cover is available throughout the working hours of the school week.
- Post notices around the school identifying the location of first aid boxes and a list of trained First Aiders.
- Ensure there is a system in place to supervise staff, monitor effectiveness and review at regular intervals.
- Make use of Wiltshire Council's online incident & accident reporting system where applicable (optional but included in the Ts & Cs of the H&S package)
- Work in conjunction with Wiltshire EVOLVE and the school Educational Visit Coordinator to ensure suitable and adequate first aid provision is in place for all offsite activities and Learning Outside the Classroom.
- Appoint a nominated person to take charge of the provision of first aid supplies

First Aider in the Work Place:

These persons have completed the three-day training to be certified as a First Aider in the Work Place. HSE recommend a ratio of one first aider to a hundred persons – it is expected that each Trust school should have a ratio of 1:100 persons (including children and adults) in place plus spare capacity to ensure additional events such as trips, as well as staff absences (i.e. training days, sick leave), can be covered appropriately. Heads can go onto the Red Cross web-site and undertake a risk assessment which will ask questions such as the number of disabled pupils and pregnant staff should they wish to be reassured they are providing the best first aid care in their schools.

<https://www.redcross.org.uk/first-aid>

First Aiders in the Workplace fulfil a crucial role in ensuring the effective administration of first aid in their schools, their responsibilities include:

- Takes charge when someone is injured or becomes ill.
- Help ensure that portable first aid kits are routinely checked, adequately stocked and always on hand around the school and that the First Aid Room is correctly stocked with up to date equipment and organised. (See First Aid Room and Equipment section.)
- Ensures that an ambulance or professional medical help is summoned when appropriate.
- Reviews processes, procedures, and critical incidents to ensure best practice is followed and any agreed recommendations are communicated.

- Be mindful of training requirements, employers should arrange refresher training and retesting of competence before certificates expires.

Table 1

Type of School	Number of people on site (Staff & Pupils)	Number of first aiders
Nursery/Primary	0 - 100	1 qualified first aider and 1 relief to provide cover for absences. Thereafter 1 additional first aider for every 100 persons on site. Plus 1 qualified paediatric first aider and 1 relief to provide cover for absences where children under 5 years of age are present.
NB. Appropriate numbers of additional qualified first aiders should be established based on each school's specific needs and staffing arrangements to cover absences.		

Emergency First Aiders and Paediatric First Aiders

Emergency (or Basic) First Aid at Work trained staff have completed a one-day training course.

Paediatric First Aiders have completed a 2-day training course.

These First Aiders fully support First Aiders in the Workplace.

The Paediatric First Aider is specifically allocated to support in the Early Years Foundation Stage (pupils under age 5). A Paediatric First Aider should be on site and available always whenever EYFS children are present. Please be mindful of before and after school wraparound care.

Emergency and Paediatric First Aiders fulfil a crucial role in ensuring the effective administration of first aid in their schools and their responsibilities include:

Both types of First aiders are trained and qualified to carry out the role, and are

also, 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 individuals home to recover, where necessary in conjunction with the Head Teacher or senior leader
- Keeping their contact details and qualifications up to date, identifying in advance any training needs and attending timely, relevant training (should the training be down to a nominated person to oversee and ensure it's current?)
- Always attend a casualty when requested to do so and treat the casualty to the best of their ability in the safest way possible without putting oneself in danger of harm. This includes wearing gloves and other personal protective equipment where any loss of blood or body fluid is evident and calling for help from other First Aiders or Emergency Services.

- Act as a person who can be relied upon to help when the need arises, helping fellow First Aiders at an incident and providing support during the aftermath.
- Providing accurate and timely information to emergency/medical services to assist further treatment to ensure that any casualty, especially those who have sustained a significant head injury, are enabled to receive correct treatment. This will likely involve being seen by professionals at a hospital.
- Help arrange transport to appropriate medical facilities, either taking them directly to hospital or asking parents or emergency contact to pick up an individual to take them to hospital.
- Ensure that parents and teaching staff are aware of **all** head injuries promptly.
- Help to ensure that a child who is sent to hospital by ambulance is either:
 - Accompanied in the ambulance at the request of paramedics, or;
 - Followed to a hospital by a member of staff to act in loco parentis if a relative cannot be contacted, or;
 - Met at hospital by a relative (where possible).
- Keep a concise and accurate record in the accident book, of everyone attended to, the nature of the injury and any treatment given, on the same day, or as soon as is reasonably practicable, after an incident.
- Provide relevant information to parents. After attendance at an incident requiring first aid, ensure that everything is cleared away; used gloves, and every dressing etc. be put in the clinical waste bin (Offensive waste is non-clinical waste that's non-infectious waste and can be double bagged and put in the municable waste bins). Any bloodstains on the ground must be washed away thoroughly. No contaminated or used items should be left lying around.

Responsibilities of Teachers:

- Familiarise themselves with the first aid procedures in operation and ensure that they know who the current First Aiders are.
- Be aware of specific medical details of individual pupils and colleagues when publicised by Headteachers and the Leadership Team.
- Send for help to the School Office and First Aid Room as soon as possible, ensuring that the messenger knows the precise location of the casualty. Where possible, confirmation that the message has been received must be obtained.
- Never move a casualty until they have been assessed by a qualified First Aider unless the casualty is in immediate danger. Reassure, but never treat a casualty unless staff are in possession of a First Aid in the Work Place certificate and know the correct procedures to use.
- Send for the First Aider on duty using the Emergency timetable. A First Aider will come to the classroom and take the individual to the First Aid Room.

- Be aware of individuals' specific conditions and/or medications whether on site or on a visit and be prepared to share this information with relevant others (i.e. the Educational Visit Coordinator) in the event of an incident and the requirement for first aid. Ensure that they have a current medical consent form for every pupil that they take out on a school trip which indicates any specific conditions or medications of which they should be aware.
- Have regard for personal safety.

Distribute Incident Forms and Head Bump letters to pupils to take home. This may involve obtaining information left in the first aid room.

Post incident observation. Where pupils have not gone to hospital for emergency treatment and have been returned to their care following a head bump, teaching staff should have a clear understanding of what symptoms and signs to look for.

Support the response to an incident including, where necessary, calling the emergency services.

Responsibilities of Teacher's and Teaching Assistants:

Ensure all notes to parents left in the First Aid room tray are distributed to the class teachers to give out to go home. This may involve obtaining information left in the first aid room (should a nominated person take charge of this as a daily task?)

Responsibilities of Play Workers or MDSAs:

- Alert other staff to the need for first aid for a pupil and send the pupil who has minor injuries to the First Aid Room if they can walk, where a First Aider will see them; this pupil should be accompanied perhaps by a responsible child.

Responsibilities of Office staff:

- Call for a qualified First Aider, to examine or treat any individual requiring first aid.
- Support the First Aiders by calling for an ambulance or contacting relatives in an emergency and be the point of contact if required for communication between the school and the emergency services.
- Maintain a training record of all staff qualified in first aid and drawing to the attention of Headteachers and first aiders, issues associated with the validity of certificates.

First Aid Room and Equipment:

Each school in the Trust will designate at least one room on each premises to be a First Aid Room and this will be easily accessible. This provision will have the appropriate equipment and information to provide effective First Aid care. It may include:

Information and photos are displayed in the First Aid Room in a confidential place to comply with GDPR.

The nominated person will ensure every First Aider has access to first aid equipment and there are sufficient first aid boxes and a system in place for ensuring stocks are

maintained. Special travelling kits are available for use with sporting activities or school trips.

First aid boxes and travelling first aid kits contain sufficient quantity of suitable first aid materials and nothing else. In most cases these will be:

- Twenty individually wrapped sterile adhesive dressings (assorted sizes) appropriate to the work environment (which may be detectable for the catering industry);
- Two sterile eye pads, with attachment;
- Six individually wrapped triangular bandages;
- Six safety pins;
- Six medium sized individually wrapped sterile unmedicated wound dressings (approx. 10cm x 8cm);
- Two large sterile individually wrapped unmedicated wound dressings (approx. 13cm x 9 cm); and
- Three extra-large sterile individually wrapped unmedicated wound dressings (approx. 28cm x 17.5cm).
- Individually wrapped disinfectant wipes
- Examination gloves pairs
- Water based burns dressing - small
- Water based burns dressing – large

First aid boxes do NOT contain drugs of any kind including Aspirin or similar pain killers and such medicines should NOT be issued to staff or pupils as there is a danger of adverse reaction in some cases. Such advice extends to antiseptic creams or liquids etc which may aggravate injuries. Splinters should not be removed either. (See Administration of Medicines Policy)

Individual named boxes are provided for children with Individual Health Care Plans and have medicines administered to them. These boxes provide a secure place for medicines to be stored and are easily accessible in case of an emergency. Medicines that need to be kept under lock and key are secured in a locked cupboard in the First Aid Room.

Where EpiPens are required, these should not be locked away but kept in a safe location which is immediately accessible.

Sterile First Aid dressings should be packaged in such a way as to allow the user to apply the dressing to a wound without touching the part that is to come into direct contact with the wound.

The part of the dressing which comes into contact with a wound should be absorbent. There should be a bandage or other fixture attached to the dressings and consequently there is no reason to keep scissors in the first aid box. Dressings, including adhesive ones, should be of a design and type which is appropriate for their use.

Disposable plastic gloves and aprons are provided. First Aiders regularly check these to ensure that they remain in good, usable condition.

Blunt-ended stainless-steel scissors are kept in case clothing has to be cut away.

Communicable Diseases

Individuals who are unwell with a communicable disease should not be in school. They should not return until they are feeling better and the risk of infection to others has passed. For more

information and guidance please see Public Health England's The Spotty Book which is kept in each school office Health and Safety Folder and available on the Wiltshire Health and Safety web-site which all Trust school's buy into.

First Aid Incident & Accident Reporting: record keeping

- A detailed accident log will be completed in the accident book by the first aider on the same day or as soon as possible after an incident resulting in an injury
- The more serious incidents and accidents can be reported to Wiltshire Council's Health & Safety Team (link below)

http://services.wiltshire.gov.uk/Forms/hr/incident_report_investigation2.php

- 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.

RIDDOR Reporting to the HSE

Headteachers 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 - <http://www.hse.gov.uk/riddor/>)

These will be reported to the Health and Safety Executive, as soon as is reasonably practical, and within 10 days of any incident. Reportable injuries, diseases or dangerous occurrences include:

- Death
- Specified injuries, which are:
 - 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 injury arising from working in enclosed spaces which leads to hypothermia or heat-induced illness, requires resuscitation or admittance to hospital for 24 hours or more
- 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

Non-accidental Injury

According to the Safeguarding Policy, whenever anyone has reason to believe that a pupil may be suffering from a non-accidental injury they should immediately tell the Headteacher and/or the Trust's designated child protection staff member according to the Safeguarding Policy. If the above individuals are not available, then the Deputy or Head of School must be informed in order that appropriate action can be taken.

Training

All school staff can undertake first aid training if they would like to and are supported by management. All first aiders must have completed a training course, and hold a valid certificate of competence to show this. Each school will keep a register of all trained first aiders, what training they have received and when this is valid until. Staff are encouraged to renew their first aid training when it is no longer valid.

At all times, at least one staff member will have a current paediatric first aid (PFA) certificate which meets the requirements set out in the Early Years Foundation Stage statutory framework and is updated at least every 3 years or sooner as the need arises..

Using Sharps (Needles, Syringes, Auto Injectors) in School

Appropriate training should be in place and if there is a foreseeable hazard to staff a risk assessment should also be in place.

Awareness of the Hazard and Risks enables the production of appropriate effective controls, such as:

- Identifying which employees are "at risk" of receiving such injuries, to enable the prioritising of training.
- Training all at risk employees in the appropriate procedures for handling sharp objects, including appropriate methods of disposing of the sharp objects.
- Provision of appropriate protective equipment to enable trained staff to handle sharp objects safely.
- All employees at risk of receiving cuts whilst at work should be kept up to date with their Tetanus injections.
- Appropriate disposal methods.
- Employees who are at risk of being injured by sharp objects (such as needles) contaminated by blood infected with HIV or Hepatitis B/C, should be provided with appropriate vaccinations/ inoculations.

Sharps include any implement that has a blade (e.g. scissors, knives etc.), it also includes needles and syringes and a range of tools and equipment used in practical subjects such as scalpels. All sharps present a potential Health and Safety risk to members of the

school community and the school wishes to ensure that every effort is made to manage sharps safely.

Sharp items found on the school site

If a student finds a 'Sharps' item on the school site, for example a blade, needle, or syringe, they should leave the item where it is and inform a member of staff at the earliest possible opportunity. The member of staff should call for the assistance of a member of the site team who will remove the item after the location and any other relevant information has been recorded.

The member of site team will use protective gloves or a litter picker/tongs to handle the item. It should be placed in a secure container and removed to a safe place. If the item may have a drug or other welfare related use, a member of the senior management team must be informed. Injuries arising from sharps.

Where an injury arises from an accident involving the appropriate use of a sharp item, the school's normal first aid procedures will be followed.

If an injury results from the misuse of a sharp item, for example removing the blade from a pencil sharpener, the first aid procedure will be followed, and the incident recorded in the accident book. If an injury results from an accident involving a sharp item found on the school site, then the first aid procedures will be followed. The first aider must be made aware that the injury was caused by an item which may cause an infection so that appropriate steps can be taken. Consideration should be given to contacting the relevant emergency contact in case it should be dealt with at hospital.

How to Dispose of Sharps

Used sharps should be immediately placed in a sharps disposal container which will be situated in the main first aid room (FDA-cleared sharps containers are generally available through pharmacies, medical supply companies, health care providers and online). These containers are made of puncture-resistant plastic with leak-resistant sides and bottom. They also have a tight fitting, puncture-resistant lid.

If an FDA-cleared container is not available a heavy-duty plastic household container, such as a laundry detergent container can be used as an alternative.

Used needles and other sharps are dangerous to people and pets if not disposed of safely because they can injure people and spread infections that cause serious health conditions.

Never place loose needles and other sharps (those that are not placed in a sharps disposal container) in the general rubbish or recycling bins, and never flush them down the toilet. This puts others at risk of being harmed.

What to Do If You Are Accidentally Stuck by a Used Needle or Other Sharp

If you are accidentally stuck by another person's used needle or other sharp:

1. Wash the exposed area right away with water and soap or use a skin disinfectant (antiseptic) such as rubbing alcohol or hand sanitizer.
2. Seek immediate medical attention from a trained first aider, your G.P or local hospital.

The same instructions apply if you get blood or other bodily fluids in your eyes, nose, mouth, or on your skin.

Protocol for EpiPens and other Adrenaline Auto-Injectors

From 1 October 2017, all schools in England are allowed to buy EpiPens and other adrenaline auto-injectors (AAIs) without a prescription and keep these for emergency use should they wish to.

Use of AAIs / EpiPens

An AAI or EpiPen can be used in an emergency on pupils:

- Who are known to be at risk of anaphylaxis
- A spare pen held by the school can be used on an individual whose own device is not available or not working

Schools' Responsibilities:

The Headteacher will ensure that the following responsibilities are in place:

- To identify those children for whom an "allergic reaction" protocol has been provided.
- Ensure that each affected individual has a recent written protocol incorporating medical authorisation and written consent from the individual or parent, to use a spare AAI.
- Ensure that a supply of antihistamine, for mild and non-specific reactions, is available
- Ensure that, for children with more severe reactions, a supply of adrenaline is available (EpiPen, 2 syringes where appropriate)
- Medication should only be given to the named child for whom the medication is intended.

Training

- Instructions and training must be provided on when and how to use medication
- It is recommended that all First Aid trained staff attend AAI training sessions and are then invited to volunteer to administer EpiPen/Antihistamine if required.
- The names of trained staff volunteers should be noted by the school on the protocol. The Headteacher is responsible for ensuring school staff are identified.
- It is recommended that a review of skills takes place on an annual basis as school staff change with each school year. The Headteacher should arrange any retraining required.

Protocol Awareness

- To ensure that all staff, including non-teaching and playground staff, are aware of those with an allergic reaction protocol, and of how to seek help in case of emergency. This must be reviewed when staff change, or when a child changes class or a teacher changes schools within the MAT. Catering staff need to be aware of those requiring special diets.
- It is important that schools ensure information is transferred to a child's new teacher at the start of each new school session. It is also important that any supply teachers are made aware of children with life threatening reactions.
- Ensure staff are aware of when to seek medical assistance – for example, if a severe attack occurs, should an EpiPen be used. If EpiPen is administered, a phone call MUST simultaneously be made to 999, paramedics or the G.P
- The individual should go to hospital even if they appear to be recovered. 20% of acute anaphylaxis episodes are quickly followed by another crisis, so once the adrenaline has been administered, the individual should be seen by a doctor without delay
- EpiPen should be given to the outside of the thigh only (**not in the buttock or any other place on the body**)

Storage

Schools should store their spare EpiPens as part of an emergency anaphylaxis kit, and ensure all devices:

- Are kept in a safe and suitably central location to which all trained staff have access at all times, but in which the device is out of the reach and sight of children
- Are not locked away, but are accessible and available for use at all times
- Are kept at room temperature away from direct sunlight, and not exposed to high heat
- Spare EpiPens should be kept separate from any pupil's own prescribed EpiPen, and clearly labelled to avoid confusion.
- Any spare AAls / EpiPens held by the school should be **in addition** to those already held by a pupil. They are not a replacement for a pupil's own devices.

Care

At least two named volunteers among school staff should have responsibility for ensuring, on a monthly basis, that AAls / EpiPens are present and in date.

They should also ensure that replacement EpiPens are obtained when the expiry date is near.

EpiPens should be kept at room temperature, in line with manufacturer's guidelines, and protected from direct sunlight.

It is the parents' responsibility to ensure that their child's medication is kept within the expiry date.

Disposal

EpiPens and other AAls can only be used once, and once an EpiPen has been used, the school should dispose of it according to the manufacturer's guidelines, and following the sharps guidance above.

School trips

Ensure Educational Visit Coordinator (EVC) is aware of any pupil who has an Individual Health Care Plan and any specific medical needs, including the following: -

Individuals at risk of anaphylaxis who take part in school activities off the premises, such as a school trip, should have their EpiPen / AAI with them. There should be staff present who are trained to administer the AAI in an emergency.

Useful websites include www.allergyinschool.co.uk and The Anaphylaxis Campaign (www.anaphylaxis.org.uk) and reference made to "The Administration of Medication in Schools".

Equal Opportunities

When writing and reviewing this policy staff have completed an Equality and Diversity Impact Assessment to ensure it complies with equality obligations outlined in anti-discrimination legislation. We believe the policy positively reflects the aims and ambitions of Pickwick Academy Trust.