



BOND PRIMARY SCHOOL

# **First Aid Policy**

## 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

## Legislation and guidance

This policy is based on the [Statutory Framework for the Early Years Foundation Stage](#), advice from the Department for Education on [first aid in schools](#) and [health and safety in schools](#), 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 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 School Premises \(England\) Regulations 2012](#), which require that suitable space is provided to cater for the medical and therapy needs of pupils

## Roles and responsibilities

### Appointed person(s) and first aiders

The school's Appointed Person is Ying Lumbera who is 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 First Aiders are listed in appendix 1. Their names will also be displayed prominently around the school.

### The local authority and governing board

Merton Local Authority has ultimate responsibility for health and safety matters in the school, but delegates responsibility for the strategic management of such matters to the school's governing board.

The governing board delegates operational matters and day-to-day tasks to the Headteacher and staff members.

## **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)
- Reporting specified incidents on London Borough of Merton online accident reporting system.

## **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
- Informing the headteacher or their manager of any specific health conditions or first aid needs

## **First aid procedures**

### **In-school procedures**

In the event of an accident resulting in injury to a child:

- The closest member of staff present will assist the child and will seek support from the nearest First Aider (directing additional adult or child to request support from First Aider) to assess the seriousness of the injury who will then provide the required first aid treatment.
- The First Aider 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, SLT should be informed and the approved first aider or the administration officer will contact parents immediately
- The staff member attending to the pupil will complete an accident report form on the same day or as soon as is reasonably practical after an incident resulting in an injury

- In the event of an accident resulting in the injury of a staff member requiring emergency services to be called, their next of kin should be contacted.
- All staff and pupils involved in a serious accident or incident at school, including violence and aggression must report details on the London Borough of Merton's Accident Reporting system via Merton website. The Headteacher and School Business Manager are responsible for reporting on the system. In such cases the Headteacher is responsible for accident/incident investigation.

Note: An accident is defined as:

***“Any unplanned event which gives rise to ill health or injury; damage to property, plant, products or the environment; production losses, or increased liabilities.***

- The accident Reporting System will indicate the need for RIDDOR reporting. If this is the case the Headteacher is responsible for reporting these incidents to the HSE.

Types of accident that must be reported are:

- Any injury resulting in a fatality
- An injury to a member of the public that results in them being taken directly to hospital for treatment from a council owned or managed building

**If a member of staff sustains one of the following:**

- Bone fracture, excluding fingers, thumbs and toes
- Amputation of arm, hand, finger, thumb, leg, foot or toe
- Blinding or permanent sight reduction
- Crush injuries leading to brain damage or internal organ damage
- Serious burns (including scalding) which:
  - Covers more than 10% of the body
  - Causes significant damage to the eyes, respiratory system or other vital organs
- Scalping requiring hospital treatment
- Loss of consciousness caused by head injury or asphyxia
- Injuries associated with working in an enclosed space leading to hypothermia or heat-induced illness, resuscitation, hospitalisation for over 24 hours
- Any injury that prevents a member of staff from carrying out their routine work for more than 7 days

(Corporate Guidance for school staff, business managers and Head teachers on reporting accidents, incidents & actions of violence and aggression)

### **Off-site procedures**

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

- Access to a working 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 lead teacher in charge of the visit and passed onto the Deputy Headteacher (Educational Visits co-ordinator) for checking prior to any educational visit that necessitates taking pupils off school premises.

There will always be at least one First Aid trained staff and/or Paediatric Trained staff (EYFS) with an assisting school trips and visits, as required by the statutory framework for the Early Years Foundation Stage. Again where serious injuries are caused this must be reported to the Headteacher or School Business Manager as soon as possible to report details on the Accident reporting System.

## **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

## **Record-keeping and reporting**

### **First aid and accident record book**

- A first aid/ accident log 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 recording 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 Administrative officer
- 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.
- When a child sustains an injury at school not requiring emergency medical attention i.e. ambulance services, a carbon first aid/incident report slip will be completed and sent home with the child on the same day. A carbon copy will be kept on file in the medical room.

### **Reporting to the HSE**

The Appointed Person 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 Appointed Person 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:

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

## Head bumps

Any bump to the head, no matter how minor is treated as serious. All bumped heads should be treated with an ice pack. Parents and Guardians must be informed by telephone. The adults in the child's class room should be informed and keep a close eye on the child. All bumped head accidents should be recorded in the accident file. Children with a bumped head will be given a head injury letter. Staff will remain vigilant and advise parents/carer to be look for the following:

- unconsciousness – either brief (concussion) or for a longer period of time
- fits or seizures
- problems with the senses – such as hearing loss or double vision
- repeated vomiting
- blood or clear fluid coming from the ears or nose
- memory loss (amnesia)

If any of these symptoms occur after a head injury whilst the child is at school, staff will call 999 immediately and inform parents/carers immediately.

## **First Aid and Medicine files**

These files are kept in the medical room. The contents of these files are collected at the end of the academic year, by the appointed person, and kept together for a period of 3 years after the individuals 18<sup>th</sup> birthday as required by law. For Major accidents/ incidents a further form must be completed within 24 hours of the accident/ incident. (Any accident that results in the individual being taken to hospital is considered a Major accident/ incident official report forms). These forms are obtainable from the office and once completed a copy of it must be kept on file. All children's medical/care plans are kept in the filing cabinet in medical room.

## **Administering medicine in school**

At the beginning of each academic year, any medical conditions are shared with staff and a list of these children and their conditions are kept in the First Aid-Medicine Record files and on file in the office. Children with Medical conditions have to have a care plan provided by the school nurse, signed by parents/ guardians. These need to be checked and reviewed regularly. Medications kept in the school for children with medical needs, are stored in the medical room, in a white cabinet, clearly marked with the green cross. Each child's medication is clearly labelled and placed in their year group box with their care plan and kept in the medical cupboard. All medicines in school are administered by the appointed First Aider following the agreement of a care plan.

## **Asthma**

All children with asthma require a school care plan. Children diagnosed with asthma also require an asthma care plan from the hospital or GP. Children who are not diagnosed with asthma but can become breathless during or following exercise may need to use an asthma pump to help them with their breathing, in this case the child will only need a school plan supported by the school nurse.

If a child has asthma, it is important the parents provide an asthma pump to the school in a box prescribed by their GP with a spacer with the child's full name on it. Parents are required to complete a form which can be obtained from the front reception which states all prescribed medication. It is the parents/carers responsibility to provide the school with up-to date Asthma Pumps for their children. Appointed First Aider will regularly check the expiry date on the pumps and inform parents, should the pumps expire or run out.

The Appointed First Aider administers all asthma pump usage to children in EYFS and key stage 1. Key stage 2 children are allowed to administer their own pumps under the supervision of the medical officer. Asthma sufferers should not share inhalers. All pumps are clearly labelled with children's full names. A class list is provided to all teachers showing all asthma, allergy and medical information. An emergency asthma pump is on site in the medical room and first aiders are allowed to administer if needed with parents' permission.

## **Allergies**

If a child has been diagnosed with an allergy, supporting medical evidence must be provided. The school cannot administer any allergy relief medication without medical evidence of diagnosis. Children with epi pens must have 2 in school: one located in the classroom and the other in the medical room. Training for administering epi pens takes place annually. If any staff members, who have not received training, have to administer the epi pen, the emergency services must be notified at the same time as the medication is administered.

## **Other Medicines**

Prescribed medications such as the short term use of antibiotics or painkillers can be administered only if the parent /guardian fill out the 'Parental consent form for administering medicine' form. Parents can obtain the form from the office on the first day of requesting the medicine to be

administered at school. The office is to pass the forms and medication to the person responsible for Medicine at school, currently Mrs Ying Lumbera, who will inform adults in the named child's class room regarding the administration of the medicine in question. The copy of the Administering Medicine at Schools Form must be kept in the child's medical file, also one copy needs to be kept with the medication. Medication may be administered in school if it is required to be taken four (4) times a day. Classroom staff should encourage parents to administer all other medicine at home. All medication administered at school must be prescription medicine, prescribed by a doctor and obtained from the pharmacy, clearly labelled with the child's name and address. Medications that need to be kept in the fridge will be stored in the medical room.

The Appointed Person 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 Designated Safeguarding lead will also notify local child protection agencies of any serious accident or injury to, or the death of, a pupil while in the school's care.

### **Training**

All school staff have access to basic first aid training.

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).

All staff will renew their first aid training when it is no longer valid.

At all times, at least 2 staff members 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.

## **1. Monitoring arrangements**

This policy will be reviewed by the Headteacher and Appointed person annually.

At every review, the policy will be approved by the governing body.

## **2. Links with other policies**

This first aid policy is linked to the

- Health and safety policy
- Risk assessment policy

## Appendix 1: list of First aiders

Staff member's name	Role	Location
Ying Lumbera	Appointed First Aider	Ground floor medical room
Amanda Smith	Midday supervisor	Lunch hall/playground
Philippa Brewley	TA	Year 1
Valerie Butcher	TA	Year 1
Julie Jackson	TA	Reception class
Tracey Fowler	TA	Year 3
Sam Radford	Admin assistant	Front office
Tracey Miller	TA	Year 3
Pauline Nicholas	Midday supervisor	Lunch hall/Playground



## Appendix 2: accident report form

<b>Name of injured person</b>		<b>Role/class</b>	
<b>Date and time of incident</b>		<b>Location of incident</b>	
<b>Incident details</b>			
<i>Describe in detail what happened, how it happened and what injuries the person incurred</i>			
<b>Action taken</b>			
<i>Describe the steps taken in response to the incident, including any first aid treatment, and what happened to the injured person immediately afterwards.</i>			
<b>Follow-up action required</b>			
<i>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</i>			
<b>Name of person attending the incident</b>			
<b>Signature</b>		<b>Date</b>	

### 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)
<i>E.g. first aid</i>			
<i>E.g. paediatric first aid</i>			
<i>E.g. anaphylaxis</i>			