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Statement and Vision

This document is to provide guidance on the policy and procedures for dealing with First Aid emergencies. First Steps Together recognises the duty of care and legal requirement for First Aid provision in our Schools and Learning Centres to provide care after an injury or accident until professional medical assistance is available.

This policy is to be read in conjunction with the Infection Control policy.

In Response to

- Health and Safety at Work Etc. Act 1974
- Health and Safety (First Aid) Regulations 1981
- The Management of Health & Safety at Work Regulations 1999 (SI 1999 No.3242)
- The Reporting of Injuries, Disease and Dangerous Occurrences Regulations 2013 (RIDDOR) (S12013 No.1471)
- Care Standard Act 2000, Residential Special School Minimum Standard 2015.
- Special Care England Children and Young Persons; Children's Homes Regulations 2015
- Independent School Standards Compliance 2015

Aims

Who does the policy cover?

This policy applies to all young people in our care and members of staff in all working environments, teaching staff, senior staff, administrative and ancillary staff, temporary workers, and visitors. (There are no requirements under the Health and Safety (First Aid) Regulations 1981 to provide members of the public with first aid treatment, but HSE strongly recommends we include them).

Definitions

First aid is the treatment of minor injuries that happen on the premises that would otherwise receive no treatment or do not require treatment by a medical practitioner. In cases where a person will require help from a medical practitioner, First Aid aims to preserve life and minimise the consequences of injury or illness until such help is obtained.

A first aider is someone who has undergone a training course in administering first aid at work and holds a current first aid certificate.

Emergency First Aid at Work

A one day course every three years. On completion of training, successful candidates should be able to:

- Understand the role of the first aider, including reference to:
- The importance of preventing cross infection.
- The need for recording incidents and actions.
- Use of available equipment.
- Assess the situation and circumstances in order to act safely, promptly and effectively in an emergency.
- Administer first aid to a casualty who is unconscious (including seizure);
- Administer cardiopulmonary resuscitation.
- Administer first aid to a casualty who is choking.
- Administer first aid to a casualty who is wounded and bleeding.
- Administer first aid to a casualty who is suffering from shock. +

- Provide appropriate first aid for minor injuries (including small cuts, grazes and bruises, minor burns and scalds, small splinters).

In the event of an accident the first trained member of staff to reach the scene will, as far as s/he is able, assess the injuries sustained by the casualty.

Any casualty judged capable of being moved by the first aider should be accompanied to the Medical room or First aid room to be treated.

Should it be deemed necessary and appropriate to call an ambulance, where possible, one member of staff is to remain with the casualty while other members of staff are mobilised to meet and direct the ambulance.

All our information and guidance concerning First Aid (including accident records and forms) are kept in each of our schools until such time they are archived.

Statement

The Head Teacher in consultation with their appointed Quality Assurance Manager will:

1. Undertake an annual risk assessment to review arrangements in relation to first aid. These will include the arrangements for covering all off site activities and trips and extraordinary events e.g. open days.
2. Ensure that adequate training is put in place for staff.
3. Include first aid arrangements for staff and students as part of the induction programmes.
4. Ensure suitable first aid boxes are kept within nominated areas and are kept safe at all times.
5. Ensuring that there are suitable and sufficient facilities and equipment available to administer first aid.
6. Ensuring the above provisions are clear and shared with all who may require them.
7. Appoint a designated person (s) to regulate the stock contained within the various first aid containers and to ensure they retain sufficient stock in reserve to replenish such containers. These checks are to be completed and recorded monthly.
8. Ensure parents/carers and young people are aware of the arrangements for first aid within each setting.
9. Make sure there is at least one qualified first aider working on each shift.
10. Maintain clear and consistent records of any first aid treatment given by first aiders and appointed persons. This record is to include the young person's name, date, time, why you are administering first aid – i.e. state the injury and what first aid has been given. This record is to be signed by a responsible person and all records to be monitored weekly by an appropriate designated senior member of staff.
11. In an emergency establish procedures for contacting the young person's parents/ carers and named local authority contact (*if appropriate*) as soon as possible.
12. Establish procedures for routinely reporting all serious or significant incidents which require first aid treatment to parents/carers and named local authority contact (*if appropriate*).
13. All incidents should be similarly recorded in writing and a copy retained in the young person's file on IRIS (MIS)

Guidelines for First Aid Kits

RECOMMENDED CONTENTS LIST

FIRST AID KIT

Guidance Card

50 Wash proof plasters
2 Eye pad dressings with sterile bandages
2 Foil blanket
2 Large HSE dressing 18cm x 18cm
4 Medium HSE dressing 12cm x 12cm
6 Nitrile gloves pair
1 Mouth to mouth resus device
4 Finger dressing
2 Conforming bandage 7.5cm x 4m
1 Micro porous tape 2.5cm x 5m
40 Cleansing wipes
12 Safety pins
4 Triangular bandage 90cm x 127cm
1 Universal Shears

BURNS KIT

1 Burn Dressing 20cm X 20cm
2 Burn Dressing 10cm X 10cm
8 Burn Gel Sachet 3.5g
1 Burn Dressing 5cm X 15cm
1 Burn Gel Bottle 125ml
1 Form Conforming Bandage 10cm X 4cm
1 Form Conforming Bandage 7.5cm X 4cm
1 Pair Large Universal Shears
1 Pair Nitrile Gloves

EYE WASH KIT

3 Bottles of Saline Solution

BIOHAZARD KIT

Disinfectant Spray
HypaClean Pack Display
Absorbent Granules

First Aid – Sequence of events

In the event of an accident the first aider takes charge of the first aid emergency treatment, commensurate with their training. Following their assessment of the injured person, they are to administer appropriate first aid and make a balanced judgement as to whether there is a requirement to call an ambulance. (If unsure at any time the first aider could call NHS Choices [dial 111 for further advice])

If an ambulance is called, the caller must speak to the emergency services and give the following information:

1. State what has happened
2. The casualty's name
3. The age of the casualty
4. Whether the casualty is breathing and/or unconscious
5. The location of the School or Learning Centre including the postcode

The member of staff with responsibility of calling the ambulance, must report back to the staff member with the casualty.

Staff within the school, whilst waiting for an ambulance should gather information about the casualty. E.g. Medication they are currently taking, any allergies, any health conditions, social worker/next of kin contact details etc.

Once the ambulance crew arrives on site, they immediately will take responsibility for the situation and FST staff should step back unless directed by the ambulance crew.

The guidance for a lone member of staff with a casualty, is that the staff member will need to make an informed decision on whether it is necessary to leave the casualty to get help.

Off- site Activities

In the event of children needing first aid on trips out:

- All staff have first aid packs and mobile phones with them.
- The first aiders deal with minor ailments.
- For major ailments the School is informed and advice sought.
- For any incident that the first aider is unsure of, a second opinion from another first aider is sought, or by calling NHS Choices (dial 111).
- Gloves are ALWAYS worn when treating injuries.
- Any accident or incident is reported back to the School and an accident form filled in as soon as possible on return, within 48 hours.
- In the event of a serious incident an ambulance is ALWAYS called.

Record Keeping

All accident records MUST be written in **BLACK INK** in accordance with the Nursing and Midwifery Council guidelines for record-keeping.

All accidents requiring treatment are recorded with the following information:

- Name of injured person
- Name of qualified/emergency/first aider/employee number [found on payslips] instead of home address
- Date and time of the accident
- Type of accident (eg. bump on head etc.)
- Where it happened
- Treatment provided and action taken
- Doctor (GP)/ Hospital visit required, date and time, treatment, diagnosis and advice given
- 'IR' numbers added to the accident form if required
- Inform a member of Senior staff, there may be a need to make a telephone call to a parent/guardian/social worker

First Aid kits are located in the medical room.

Plastic gloves are in all first aid boxes. Staff should use the protective plastic gloves when treating open wounds, to prevent the spread of any possible infection, e.g. hepatitis, HIV etc.

All off-site activities must take a first aid box with them; this is the responsibility of the activity/party leader.

Hygiene/Infection control

All staff should take precautions to avoid infection and must follow basic hygiene procedures. Staff should also have access to Bio-Hazard Body Fluid Clean Up Kits, PPE and hand washing facilities when dealing with bodily fluids for example – blood, faeces, vomit, saliva, nasal and eye discharge.

Spills of Bodily fluids should be considered infected and must be dealt with immediately.

If the need arises to deal with bodily fluids, then a bio-hazard body fluid clean up kit needs to be used and wearing of PPE [gloves and aprons] and all abrasions covered.

All contaminated materials should be disposed of in a yellow clinical waste bag or double bagged.

Wash hands thoroughly with soap and water after the incident.

Reporting Injuries

Statutory requirements under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR) state some accidents must be reported to the HSE (Health & Safety Executive). The Health and Safety Officer must keep a record of any reportable injury, disease or dangerous occurrence. This must include the date and method of reporting, the date and place of the event, personal details of those involved and a brief description of the nature of the event or disease.

Reports to the HSE are to be submitted within 15 days of the accident (not counting the day of the accident, but including weekends and other rest days). The duty to notify and report such accidents/incidents, rests with a 'responsible person' at each setting.

Risk Management are also to be notified of any RIDDOR's filed.

Guidance regards 'Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013' (RIDDOR) can be found at 'Incident reporting in schools (accidents, diseases and dangerous occurrences. Guidance for employers. Education Information Sheet No. 1 (Revision 3).

changes.