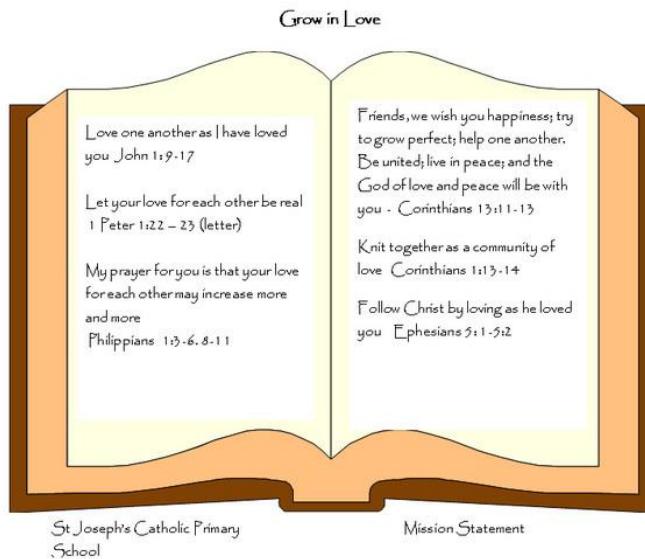


## 35. First Aid Policy

**Policy Valid until Summer 2024**  
**Policy owned by Head teacher**



**For and on behalf of the**  
**Board of Governors** .....

**Headteacher** .....

**Date:**

## **FIRST AID POLICY – STATEMENT**

The school has three qualified first aiders who will offer initial assistance. All other staff at the school are trained regularly in First Aid procedures. The school will ensure that there are always sufficient qualified first aiders and provide regular updating courses.

Pupils feeling unwell must report to their class teacher. First Aid staff will offer appropriate treatment. If necessary parents will be contacted although no pupil may go home without the consent of the Headteacher or Deputy Head. If an ambulance is needed again the Headteacher, or Deputy Head must be informed prior to the phone call being made. If an injury is the result of an accident, an accident form must be completed and forwarded to the Headteacher.

## **ACCIDENT REPORTING**

### **RECORD KEEPING**

#### **Pupils**

All accidents and injuries at school are recorded in the accident book which is held in the staff room and a note is sent home with the child informing parents of the injury. Injuries are referred to a First-Aider. Accidents that happen during a lesson must be recorded in the same way by the teacher or teaching assistant supervising in the class at the time. Where an injury requires the child to be sent home or further medical attention, the injury is recorded on the LA accident form and then entered on the Conwy CAMMS system. All accidents will be investigated and an internal record kept. The Headteacher or Deputy Head will be notified of all accidents. Parents will be notified of any serious injury requiring further treatment.

#### **Staff**

All accidents and injuries at work must be dealt with by a First-Aider and recorded on an accident form and passed to the Headteacher.

### **THE HEALTH & SAFETY EXECUTIVE:**

All accidents resulting in death, certain types of serious injury or more than three days incapacity for work are subject to the provisions of the Reporting of Injuries, Diseases & Dangerous Occurrences Regulations 1985 (RIDDOR). Any such accident should be reported on the relevant form.

## **FIRST AID PROCEDURES**

In the event of an injury to a pupil, then dependant upon the severity of the injury, the following procedure will be adopted by the notified first aider.

### **IMMOBILE SERIOUS INJURY REQUIRING HOSPITAL TREATMENT**

The First Aider will:

- call an ambulance 999
- give the necessary first aid
- inform the parents
- inform the headteacher and/or Deputy head
- inform the class teacher

### **MOBILE SERIOUS INJURY REQUIRING HOSPITAL TREATMENT**

The First Aider will:

- give the necessary first aid to the pupil
- call an ambulance/arrange transport to the hospital
- inform the parents
- inform the headteacher and/or Deputy head
- inform the class teacher

### **INJURY NOT REQUIRING HOSPITAL TREATMENT**

The First Aider will:

- give the necessary first aid
- if necessary inform the parents who may collect the pupil or arrange for other transport arrangements to be made. Consent for the pupil to go home can only be given by the Headteacher or Deputy Head.
- the pupil will be sent back to lessons if he/she has had the necessary first aid and is well enough
- inform the class teacher

## **FIRST AIDERS**

All accidents requiring treatment must be reported to a First Aider and to the Headteacher or Deputy Head. The First Aider will give any treatment necessary and will record the details of the accident on the accident form. Failure to report an accident is a breach of the school rules.

The following personnel are qualified First Aiders:

**Mr J Wilkinson**

**Miss E Copp**

**Mrs E Roberts**

## **ADMINISTRATION OF MEDICATION**

- Pupils who are unwell are to be brought to the First Aider or the staff room
- No medication will be administered unless it has been prescribed by a GP and parents have completed the necessary documentation (see Healthcare Needs Policy).
- Pupils with allergies that require the use of an AAI, or who have other serious conditions need to bring the appropriate medication into school.
- Controlled substances are stored in the school office in a locked cabinet.
- AAIs are stored in the Secretary's Office
- Medication that requires storing in a refrigerator are stored in the Secretary's Office refrigerator.
- Emergency salbutamol inhalers and AAIs are held by the school and will only be administered in the absence of the child's own medication, where prior parental consent has been obtained
- The school nurse will support the school in providing appropriate care plans, and in the initial training of staff regarding the administration of such medicines.
- Ice packs are available for sports injuries or minor injuries.

## **COVID-19 GUIDANCE ON FIRST AID IN SCHOOLS**

### **General**

- The First Aid needs risk assessment for the site has been reviewed (how many First Aiders are required to cover the number of persons working at the site, taking into account the type of work, need to cover staggered working, sickness, etc.)
- List of First Aiders has been reviewed to ascertain who and how many are likely to be present in the workplace (some may be working at home/shielding).
- First Aider Notices have been amended as necessary and displayed at suitable locations.

- Contents of First Aid kits and Personal Protective Equipment for First Aiders have been reviewed

### **Guidance for First Aiders**

- Be aware of the risks to yourself and others.
- Keep yourself safe and maintain the social distancing measures (minimum distance of 2m/6ft) whenever possible.
- Where this is not possible, other measures should be implemented such as the use of physical barriers, alternative working practices and the use of personal protective equipment (PPE).
- COVID 19 infects people through contact with the mucous membranes (eyes, nose and mouth) it does not infect through the skin.
- The greatest risk for a first aider is the transfer of the virus to their mucous membranes by contact with their potentially contaminated hands. It is essential to manage this risk by maintaining the recommended social distancing measures where possible, minimising hand contamination, avoiding touching your face and washing your hands frequently with soap and water or alcohol based hand gel.
- There is also a significant risk of direct transfer of the virus onto the mucous membranes by droplet transmission. This is the direct impact of larger infectious virus droplets generated by the person's respiratory tract landing directly in your eyes nose or mouth. The risk is managed by the use of appropriate (PPE -mask and eye protection). The person who is displaying symptoms should also be provided with a mask/face covering to cover their nose and mouth when coughing or sneezing (respiratory hygiene and cough etiquette).
- Where practicable, the First aider should avoid close contact with persons with minor injuries (cuts, abrasions, minor burns etc.) and advise the injured person what steps to take in treating their own injury.
- For the First Aider, avoiding close contact will not be possible in the event of having to provide emergency lifesaving measures to an incident of cardiac arrest, heart attack, choking or stroke.

### **Updated guidance (13.5.20) on CPR (during COVID19) issued by the Resuscitation Council UK states that:-**

1. Recognise cardiac arrest by looking for the absence of signs of life and the absence of normal breathing. Do not listen or feel for breathing by placing your ear and cheek close to the patient's mouth. If you are in any doubt about confirming cardiac arrest, the default position is to start chest compressions until help arrives.
2. Make sure an ambulance is on its way. If COVID 19 is suspected, tell them when you call 999.
3. If there is a perceived risk of infection, rescuers should use the Bag 2 Resuscitator (provided by CCBC to all schools) to perform CPR
4. Early use of a defibrillator significantly increases the person's chances of survival and does not increase risk of infection. If the rescuer has access to any form of personal protective equipment (PPE) this should be worn.
5. After performing CPR, all rescuers should wash their hands thoroughly with soap and water; alcohol-based hand gel is a convenient alternative. They should also seek advice from the NHS 111 coronavirus advice service or medical adviser.

### **Paediatric advice**

We are aware that paediatric cardiac arrest is unlikely to be caused by a cardiac problem and is more likely to be a respiratory one, making ventilations crucial to the child's chances of survival. However, for those not trained in paediatric resuscitation, the most important thing is to act quickly to ensure the child gets the treatment they need in the critical situation.

For out of hospital cardiac arrest, the importance of calling an ambulance and taking immediate action cannot be stressed highly enough. If a child is not breathing normally and no actions are taken, their heart will stop and full cardiac arrest will occur.

It is likely that the child/infant having an out-of-hospital cardiac arrest will be known to you. We accept that doing rescue breaths will increase the risk of transmitting the COVID-19 virus, either to the rescuer or the child/infant. However, this risk is small compared to the risk of taking no action as this will result in certain cardiac arrest and the death of the child. The Bag 2 Resuscitator (provided by CCBC) is also available for use in CPR

First aiders must make sure that they are familiar with the symptoms of COVID19. In addition to Coronavirus, there are many seasonal illnesses in the workplace such as colds, flu, hay fever and allergies which may have similar symptoms. You will need to perform a dynamic risk assessment based on the scenario you are presented with.

### **Key control measures**

- Maintain the social distancing measures whenever possible.
- Standard infection control precautions must be applied when responding to any first aid incident in the workplace. Hand washing with warm water and soap or alcohol based hand gel must be performed before and after and first aid treatment.
- Any person presenting with symptoms consistent with COVID19 should be treated as a suspected case. In such cases (and if safe to do so), move an individual to an isolated room to minimise the risk of infection to others.
- Only one first aider should provide support/treatment where practicable.
- Additional PPE (disposable gloves, eye protection and fluid repellent surgical mask) should be worn by a First Aider when responding to all first aid incidents where close contact cannot be avoided. Also have a mask available to give to the sick person if they are displaying symptoms of COVID19, to limit droplet dispersion.
- Following first aid treatment, the incident area should be thoroughly cleaned and disinfected with waste disposed of appropriately.
- No re-usable equipment should be returned to service without being cleaned/disinfected appropriately.

### **Personal Protective Equipment (PPE) Requirements**

The following PPE must be available for responding to First Aid Incidents

- Disposable gloves (nitrile/latex free)
- Fluid repellent surgical masks
- Eye protection (face visor/goggles).

- Disposable plastic apron

The First Aider must ensure that any mask covers both their mouth and nose and is fitted correctly to create an adequate barrier to the face. Any disposable PPE and any other waste should be disposed of appropriately and any reusable PPE cleaned/disinfected thoroughly (see Guidance for schools on the use of Personal Protective Equipment). Wash hands thoroughly with soap and water before putting on and after taking off PPE. Replenish PPE stocks as appropriate after use.

**This policy is available on the school website an in translation, on request.**