



## **First Aid Policy**

### **Key Points**

All staff are expected to use their best endeavours in the event of a first aid emergency.

All staff must know:

1. How to call the emergency services – dial 999 and ask for an ambulance. If there is any doubt that an ambulance is required, call an ambulance straight away.
2. The location of the nearest first aid box (see Appendix 1) which will contain:
  - a. The names of and how to contact the School First Aiders (see Appendix 1)
  - b. A basic aide memoir for dealing with first aid emergencies (see Appendix 2)
  - c. Basic first aid equipment (see Appendix 3)

**First Aiders** are responsible for:

- Taking charge when someone is injured or becomes ill
- Ensuring that an ambulance or other medical help is summoned if appropriate
- Giving immediate help to casualties with common injuries or illnesses and those arising from specific hazards at School
- Looking after and restocking the first aid box

First Aiders must complete a training course approved by the HSE. Refresher training is required every three years.

A paediatric first-aider will be on the school site whenever children are present.

### **Appointment of First Aiders**

The number of First Aiders required at the School shall be determined by the Governors and shall be reviewed annually or more frequently when required, for example following an accident or emergency.

When determining the appropriate number of First Aiders, the Governors will take into account the following:

- The number of staff and pupils present at any one time
- The distribution of staff
- The number and locations of the first aid boxes
- The number of staff and pupils with disabilities or specific health problems
- Arrangements for off-site activities
- Arrangements for out of school hour activities such as parent evenings
- Parts of the school premises with different levels of risks
- The types of activity undertaken
- The proximity of professional medical and emergency services
- Any unusual or specific hazards
- Accident statistics which will indicate the most common types of injuries, times and locations.

### **Reporting Accidents and Record Keeping**

All members of the school community should report any accident or incident, however, minor, as soon as possible after it has occurred. When an injured person is unable to complete their own details of the accident, then the First Aider and/or witness should do it on their behalf.

All accidents or injuries to pupils, along with any treatment administered, will be reported to the pupil's parents/guardians on the day of the accident or as soon as is reasonably practicable.

### **Procedures when accidents occur on the School Site**

#### **Pupils:**

A child is brought into the First Aid area in the back room.

An adult assists with first aid and if necessary a First Aider is called.

A note is completed for the parents/guardians showing where the injury occurred.

A log is kept of minor injuries

In the case of a head injury an additional note with head injury information is completed and handed to parents

If the injury causes concern the parents are informed immediately.

If the injury is serious an ambulance will be called.

A report is made to HSE if the child is taken to hospital or sustains a serious accident and a risk assessment is carried out

Provision is made in the back room for a child who is sick or injured, while they wait for a parent to collect them. A camp bed and blankets are stored in the upstairs room. The room will be partitioned to provide privacy and quiet for the child, although the room will not be used by others whilst the child is waiting. An adult will remain nearby, in case the child needs help.

#### **Adults:**

An adult is brought into the First Aid area in the back room.

An adult assists with first aid and if necessary a First Aider is called.

A log is kept of all injuries

If the injury is serious an ambulance will be called.

A report is made to HSE if the adult is taken to hospital or sustains a serious accident and a risk assessment is carried out

Provision is made in the back room for an adult who is sick or injured, while they wait for someone to collect them. A camp bed and blankets are stored in the upstairs room. The room will be partitioned to provide privacy and quiet, although the room will not be used by others whilst they are waiting.

The log must contain: (See Appendix 4)

- The date, time and place of the event

- Details of those involved
- A brief description of the accident/illness and any first aid treatment given
- Details of what happened to the casualty immediately afterwards – for example, went to hospital, went home, resumed normal activities, returned to class.

The Head Teacher should be informed about any incident if it is at all serious or particularly sensitive, for example when a pupil has had to go to hospital or if one pupil has caused deliberate harm to another or where negligence might be suggested.

If, as the result of an accident, a member of staff is taken to hospital, is unable to work or subsequently becomes absent from work, the Head Teacher should be notified immediately.

The Head Teacher will report all serious accidents to the HSE as required. The Governing body is aware of its statutory duty under RIDDOR in respect of reporting the following to the Health and Safety executive as it applies to employees:

- An accident that involves an employee being incapacitated from work for more than three consecutive days.
- An accident which requires admittance to hospital for in excess of 24 hours.
- Death of an employee.
- Major injury such as fracture, amputation, dislocation of shoulder, hip, knee or spine.

For non-employees and pupils an accident will only be reported under RIDDOR:

- Where it is related to work being carried out by an employee or contractor and the accident results in death or major injury; or
- It is an accident in school which requires immediate emergency treatment at hospital.

### **Hygiene Control Guidelines**

It is advisable to follow the Hygiene Control Guidelines recommended by the DfE listed below in all instances to provide protection against a range of infections to which staff may be exposed. The following is a basic hygiene procedure which should be put into operation in all instances against a range of infections which members of the school community may be exposed to:

#### **Personal Hygiene**

- Minor cuts, open or weeping skin lesions and abrasions should be covered with a suitable dressing.
- Sanitary towels and tampons should be placed in the disposal bins provided.
- Hands are to be washed with soap after going to the toilet and before food.
- Separate cleaning equipment is to be used for toilets.

#### **Accidents Involving External Bleeding/Bodily Fluids**

- Normal First Aid procedures should be followed, which should include the use of disposable gloves.
- Wash the wound immediately and copiously with water. Apply a suitable sterile dressing and pressure pad if needed.
- Cotton Wool should not be used in cleaning wounds since it is not sterile and could cause infection.
- As soon as possible seek medical advice should the bleeding continue.

### Splashes of Blood from One Person to Another

- Splashes of blood on the skin should be washed off immediately with soap and water.
- Splashes of blood into the eyes or mouth should be washed out immediately with copious amounts of water.
- After accidents resulting in bleeding, contaminated surfaces, eg tables or furniture should be disinfected. Contaminated surfaces must be cleaned using the dedicated cleaning equipment located on the top shelf of the store cupboard.

### Allergic Reactions and Other Medical Conditions

Where the school is made aware of Emergency Medication needs of a pupil as per the provisions of the Managing Medical Needs Policy, all staff who teach the pupil will be trained on administering any medical assistance that might be needed should the emergency occur.

### Contagious Illnesses

If a child has any of the contagious illnesses listed in the table below they must be kept away from the School for the specified period of time.

If a child is brought to the school with a contagious disease or illness the staff will not accept them until the minimum exclusion period has elapsed and they have recovered fully.

In addition:

- If it is suspected that a child is suffering from one of the illnesses listed below they will be isolated and their parents contacted immediately and asked to pick the child up as soon as possible.
- If the child requires treatment for an on-going condition (i.e. asthma) the parent must sign the medicine consent form.
- Children who require antibiotics will only be allowed back 48 hours after the treatment has commenced unless medical advice is provided to the contrary.
- Parents must ensure that school staff can contact them in an emergency.
- A parent/carer must notify school staff if a child who has been attending the school becomes ill with a contagious disease.

The table below gives the incubation period parents/carers must adhere to:

<i>Disease</i>	<i>Minimum period of exclusion</i>
Chicken Pox	5 days from appearance of rash
Conjunctivitis	None unless evidence of spread, then exclusion until healed
Dysentery	Until clinically fit with no diarrhoea for at least 48 hours
Ear Infection	48 hours after starting antibiotics
Food Poisoning	Until clinically fit with no diarrhoea for at least 48 hours
German Measles (Rubella)	5 days from appearance of rash
Head Lice	Only following treatment
Jaundice	Until clinical recovery
Measles	5 days from appearance of rash
Meningitis	Until clinical recovery
Mumps	5 days from onset of swollen glands
Scarlet Fever	5 days after starting antibiotic treatment
Thrush	Until lesions have gone

Vomiting	Until 48 hours after the last sickness and the child is back on a normal diet.
Whooping cough	21 days from start of cough. Or 5 days if antibiotic treatment has commenced

**Ambulance Emergency**

In an emergency a First Aider must be informed, a person trained in first aid must attend to the casualty and an ambulance called for without delay. The parents/carers will then be contacted. A member of staff must then accompany the child to hospital and wait for the parents to arrive. A First Aider must always be left in school. Every attempt to contact the parents will be made by the school. Should parents be unable to be contacted the relevant member of staff, usually the Headteacher, or in her absence another First Aider, will act on the parents behalf, providing parents have signed consent forms to this effect. Consent forms will be signed prior to a child’s admission to the school.

**Early Years Foundation Stage Provisions**

A paediatric first aider will be on site whenever EYFS children are present.

A paediatric first aider will always accompany EYFS children on school outings.

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Immanuel Christian School  
 First Aid Policy – version 3  
 Adopted by the Governors on 09/12/2017.  
 Reviewed January 2019  
 Amended and reviewed 25.2.22

## **Appendix 1**

### Location of First Aid Boxes

The main first aid box is located in the kitchen cupboard above the sink.

A separate first aid kit will be located in the EYFS classroom.

First aid kits for off-site activities are located in the kitchen cupboard above the sink.

### First Aiders

The current trained First Aiders (as at January 2022) are:

- Joanna Gulliford (Paediatric) (expires 18<sup>th</sup> March 2023)
- Kate Harding (Paediatric) (expires 18<sup>th</sup> March 2023)
- Sarah Salkald (Paediatric) (expires 18<sup>th</sup> March 2023)
- Alan Homersley (Paediatric) (expires 18<sup>th</sup> March 2023)
- Kirsty Judge (Paediatric) (expires 22<sup>nd</sup> November 2024)
- Naomi Havell (Paediatric) (expires 22<sup>nd</sup> November 2024)
- Jonathan Gulliford (Outdoor First Aid) (expires 13<sup>th</sup> February 2022)

## Appendix 2

### Basic First Aid

Knowing what to do in an emergency is vitally important. If someone is injured, the following steps will keep them as safe as possible until help arrives:

- Keep calm
- If people are seriously injured call 999 immediately
- Contact a First Aider
- Make sure you and the injured person are not in danger
- Assess the injured person carefully and act on your findings using the basic first aid steps below
- Keep an eye on the injured person's condition until help arrives

<b>Unconsciousness</b>
If the person is unconscious with no obvious sign of life, call 999 and ask for an ambulance. If you or any bystander has the necessary skills, give them mouth-to-mouth resuscitation while you wait for the emergency services.

<b>Bleeding</b>
Control severe bleeding by applying firm pressure to the wound using a clean, dry dressing and raise it above the level of the heart. Lay the person down, reassure them, keep them warm and loosen tight clothing.

<b>Burns</b>
For all burns put under cool running water for at least 10 minutes. Do not apply dry dressings, keep the patient warm and call an ambulance.

<b>Broken Bones</b>
Movement should be kept to a minimum.

## Appendix 3

### Contents of First Aid Boxes

The minimum contents of the on-site first aid box will be:

- A leaflet giving general advice on first aid
- 20 individually wrapped sterile adhesive dressings (assorted sizes)
- Two sterile eye pads
- Six individually wrapped triangular bandages
- Six safety pins
- Six medium sized individually wrapped sterile unmedicated wound dressings
- Two large sterile wrapped unmedicated wound dressings
- Disposable gloves
- Plastic disposable bags for soiled dressings

The minimum contents of the first aid kits for off-site activities will be:

- A leaflet giving general advice on first aid
- 6 individually wrapped sterile adhesive dressings (assorted sizes)
- Two individually wrapped triangular bandages
- Two safety pins
- Individually wrapped moist cleansing wipes
- One large sterile wrapped unmedicated wound dressing
- Disposable gloves
- Plastic disposable bags for soiled dressings



