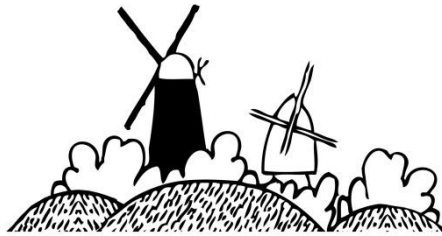


The Windmills Junior School



First Aid Policy

May 2020

Next Review: May 2021

1. Introduction

This policy outlines the Schools' responsibility to provide adequate and appropriate first aid to pupils, staff, parents and visitors and the procedures in place to meet that responsibility. It takes account of guidance from West Sussex County Council Policies and Procedures.

The School recognises its responsibility to ensure that first aid provision is available at all times while people are on school premises and also off the premises whilst on school visits.

2. Responsibilities

The School is fully aware of its responsibility to:

- Appoint the appropriate number of suitable trained people as Appointed Persons and First Aiders which meet the needs of the school.
- Provide relevant training and ensure monitoring of training needs.
- Provide sufficient and appropriate resources and facilities.
- Inform staff and parents of the Schools First Aid arrangements.
- To keep accurate and up to date accident records and to report these to WSCC where required in accordance with policy.

3. First Aid Training and Provision

The School will ensure that trained first aid provision is in line with, or hopefully exceeds, expected levels for the size of the school. Guidance from the DFE states that there must be a sufficient number of first aiders strategically located to ensure that first aid treatment will be provided quickly in an emergency. The number must also be sufficient to ensure provision will be maintained during both planned and unplanned absences such as leave and sickness, and to accommodate off-site activities such as educational visits and sporting fixtures. First aid duties can be shared between qualified staff provided the appropriate level of provision is maintained. WSCC

In the document "GUIDANCE ON FIRST AID FOR SCHOOLS, DFE " states:

"45. The Health & Safety Commission provide guidance on numbers of first-aid personnel based on employee numbers. As a general guide, they recommend that:

- *a lower risk place of work (eg shops, offices, libraries), with fifty to one hundred employees, should consider having at least one first aider;*
- *a medium risk place of work (eg light engineering and assembly work, food processing) with twenty to one hundred employees, should consider having at least one first aider for every fifty employees (or part thereof).*

46. Schools will generally fall into the lower risk category, but some schools or areas of activity may fall into the medium risk category. Schools should base their provision on the results of their risk assessment."



guidance_on_first_aid_for_schools.pdf

Number of First Aiders – The Windmills Junior School

In order to comply fully with these recommendations and to always ensure that there are sufficient members of staff trained to cover all eventualities the school has decided to appoint:

Medical Officers - 3 Full First Aid at Work (FAW) – (2 TAs and 1 office member – appointed First Aid Manager)

- First Aid at Work (FAW) - A 3-day course in first aid delivered by a Health and Safety Executive (HSE) approved training provider. Certificates are valid for 3 years and the qualification can be maintained by

attending a 2-day FAW renewal course. Renewal courses must be completed within 28 days of expiry of the previous certificate.

Medical Assistants - 12 Emergency First Aid at Work (EFAW) = 7 TAs trained & 2 SLT & 2 CT & 1 admin assistant

- Emergency First Aid at Work (EFAW) - A 1-day course in first aid delivered by an HSE approved training organisation or a training organisation that have gained accreditation from one of the awarding bodies offering. Certificates are valid for 3 years.

15 trained First Aiders in total

Training is updated in line with regulatory time frames and is only administered by fully authorised organisations

4. First Aid Procedure

4.1. Principles

First Aiders are responsible for assessing injury or ill health and using their training to decide upon the most appropriate response. This can involve treating the casualty if the injury is within the scope of their training, referring them to hospital for an assessment or further treatment, or making an emergency call to summon an ambulance. In non-urgent situations, where the guidance from training is insufficient, they can also contact NHS Direct.

If the first aider is in any doubt whether a casualty requires professional medical assistance, he or she should refer to the First Aid Manual, call 999 or phone NHS 111.

Urgent treatment should not be delayed in order to consult with parents or carers.

The current first aid manual is the 9th edition published by Dorling Kindersley Limited in 2009 (ISBN 978 1 4053 3537 9). First aiders should adhere to the procedures in the First Aid Manual. The schools manual is in the main first aid book.

4.2. Procedure

Procedure When Dealing With an Accident or Injury:

1. Assess the seriousness of the injury and seek the assistance of a qualified first aider, if appropriate, who will provide the required first aid treatment.
2. For more serious incidents one of the three fully trained members of staff must be called for and they then take over the management of the situation (Medical Officers - Mrs Goldfinch, Ms Elkins, Mrs Major).
3. First aider to assess seriousness of the injury and decide if further assistance from a colleague or the emergency services is needed. It is their decision to call an ambulance and they do not need to seek approval from a senior leader to do so. First aider to also decide if child should be moved or placed in a recovery position. As soon as is possible the Headteacher or Deputy need to be informed of the situation but treating the accident or injury comes first.
3. If a child has bumped their head, protocol for assessing a child, recommended by WSCC, is followed. If the child's bump is deemed mild, a school head bump leaflet is to be sent home and the class teacher informed of the incident who will continue to monitor the child's condition throughout the rest of the school day. For head bumps Low Risk, the child's parents will be contacted via a phone call to advise them of the incident and to decide whether they want to collect the child from school for further monitoring. For head bumps deemed High Risk, the emergency services and parents would be notified (**Appendix 1 – Head Bump Letter**).
4. School medical officer, or a person who she designates if dealing with the casualty, will phone to inform parents of the injury.

5. If the school judges that a pupil is too unwell to remain in School, the parents will be contacted and asked to collect their child.
6. All accidents/injuries, excluding minor injuries on the playground, are to be recorded using accident reporting sheet.
7. If parents are required to collect a child due to the seriousness of an injury, the office staff are to recommend the parent seeks medical advice.
8. If emergency services are called, parents must also be contacted immediately.

If accident/injury occurs to a member of staff/adults working in the school the above procedures should be followed. Investigation by External Agencies – S47 and Police Investigations.

4.3 Hygiene and infection control

First aiders must follow their training and maintain good standards of infection control. Whenever small amounts of body fluids have to be cleaned up, disposable plastic gloves should be worn and disposable paper towels and a detergent solution should be used to absorb and clean surfaces. These items should be disposed of in black plastic bin bags, tied up and placed directly into waste bins with other inert waste. The Bodily Fluids Clean Up Box is kept in the First Aid Room on the top of the fridge marked 'Clean Up Bucket'. Detergent solutions for sick are in the bucket. These should be sprinkled over the area which absorbs the liquid and takes away any odors.

Human hygiene waste that is produced in places like schools and offices is generally assumed not to be clinical waste because the risk of infection is no greater than for domestic waste. However, this should be verified in the risk assessment on a case-by-case basis.

If there is any concern about infection control reference and information should be sought from the publication by the DFE:

Guidance on Infection Control in Schools and other Childcare Settings – May 2016



Guidance_on_infection_control_in_schools.pdf

4.4 Record keeping

All first aiders should ensure that a record is made of all first aid treatment they give.

This must include:

- the date, time and place of the injury or illness occurring;
- the name of the injured or ill person and their status, such as employee, pupil, client, visitor;
- details of the injury or illness and what first aid was given;
- what happened to the person immediately afterwards, for example, sent home, sent to hospital, returned to normal duties; and
- the printed name of the first aider or person dealing with the casualty.

Records should be kept according to the following schedule:

- pupils - 6 years from the date of 18th birthday
- employees and others - 6 years from the date of the accident

This first aid records for pupils must be kept separately from that provided to employees and others. Records must be kept secured and protected from unauthorised access.

5. Pupils with Long Term Medical Conditions

All pupils with a long term medical condition will have a Health Care Plan (Please see - Medicines in School Policy). This should be referred to when undertaking first aid procedures. This information is referred to in the event of the pupil requiring first aid and should be passed onto a paramedic should an Ambulance be called upon.

6. Emergency Procedures

The emergency services will be contacted by the Medical Officer or an appropriately trained medical assistant. The Headteacher or Designated Deputy may also perform this duty. There are circumstances whereby staffing or location circumstance may require other members of staff to perform this duty. As such, all staff will be aware of correct procedure and this will be clearly visible in both the medical room and the school office.

Contacting Emergency Services:

Speak clearly and slowly and be ready to repeat information if asked

Request for an Ambulance - Dial 999, ask for ambulance and be ready with the following information:

1. Your telephone number - Tel: 01273 842421
2. Give your location as follows - Dale Avenue, Hassocks, West Sussex.
3. State that the postcode is - BN6 8LS
4. Give exact location in the school/setting – half way down Dale Avenue next turning past downlands Secondary school if coming from Hassocks Village
5. Give your name -
6. Give name of child and a brief description of child's symptoms
7. Give child's date of birth from appropriate class file in the medical room
8. Inform Ambulance Control of the entrance and state that the crew will be met and taken to the scene of the incident.

As a guide the most senior member of staff, who is also a qualified first aider on the premises or on the school excursion, should make the decision to contact emergency services. However, all adults should feel confident to contact the emergency services where their attendance is time critical – if we are wrong then we will apologise later, if we are right a child's life may be saved.

- The Medical Officer, or the office staff, or a member of SLT is responsible for reporting the incident to the child's parents in a calm, factual manner.
- If a child needs to be taken to hospital, a member of staff will stay with the child until the parents arrive, or accompany a child taken to hospital by ambulance. If contact has not been able to be made.
- Consent is generally not required for any life-saving emergency treatment given in Accident and Emergency Departments. However, awareness is required for any religious/cultural wishes i.e. blood transfusions which should be communicated to the medical staff for due consideration. In the absence of the parents to give their expressed consent for any other non-life threatening (but nevertheless urgent) medical treatment, the medical staff will carry out any procedures as deemed appropriate. The teacher accompanying the child cannot give consent for any medical treatment, as he/she does not have parental responsibility for the pupil.

7. First Aid Kits

First aid kits and boxes must be stored in a robust container designed to protect the contents from damp and dust and marked with a white cross on a green background. The contents of the first aid boxes and kits should be checked regularly by the Medical admin. Officer to ensure there is adequate stock and to replenish out of date items.

WSCC recommended contents based on the British Standard should be applied. This is as follows:

- one leaflet giving general guidance on first aid
- one leaflet giving a list of first aid kit components included in kit
- 6 pairs of Nitrile disposable gloves (conforming to BS EN 455-1 and BS EN 455 -2, Large size (8- 9))
- 40 individually wrapped sterile adhesive dressings (water resistant, sterile, an island design and blue ones for food technology or kitchen areas)
- 2 sterile eye pad dressing with bandage
- 2 individually wrapped sterile triangular bandages
- 1 conforming bandage
- 6 safety pins
- 4 medium-sized individually wrapped sterile unmedicated wound dressings (approximately 12cm x 12cm)
- 1 large individually wrapped sterile unmedicated wound dressings (approximately 18cm x 18cm)
- 1 foil blanket 130cm x 210 cm
- 1 mouth to mouth resuscitation device which includes a one-way valve
- 1 micro porous adhesive tape
- 2 finger sterile dressing with adhesive fixing
- 1 burn relief dressing
- Scissors

The contents of a travelling first aid kit for off-site visits must be appropriate to the type and duration of visit, but should contain the following as recommend:

- 1 leaflet giving general advice on first aid
- 1 contents list giving the first aid components in the kit
- 1 pair of Nitrile disposable gloves (Conforming to BS EN 455-1 and BS EN 455 -2, Large size (8- 9))
- 10 individually wrapped sterile adhesive dressings (water resistant, sterile, an island design and blue ones for food technology or kitchen areas)
- 1 sterile eye pad dressing with bandage
- 1 individually wrapped sterile triangular bandages
- 1 conforming bandage
- 2 safety pins
- 1 medium-sized individually wrapped sterile unmedicated wound dressings (approximately 12cm x 12cm)
- 1 large individually wrapped sterile unmedicated wound dressings (approximately 18cm x 18cm)
- 1 foil blanket 130cm x 210 cm
- 1 mouth to mouth resuscitation device which includes a one-way valve
- 4 alcohol-free moist cleansing wipes individually wrapped (sterile)
- 1 micro porous adhesive tape
- 1 burn relief dressing
- Scissors
- Water and eye wash cup

Do not keep antiseptic creams, lotions, or any type of medication or drug in a first aid kit.

8. First Aid Accommodation

The school medical room is located within the main school building near. It is near the main entrance and has good access to the car park.

The room is equipped with:

- First aid equipment, a sink with hot and cold running water, soap and paper towels
- Disposable gloves
- Drinking water
- First aid box and materials
- Clinical waste bin lined with disposable yellow waste bag
- A bench that can be used for children to lie on and chairs
- Clean blanket and pillows
- A fridge
- Record book
- A copy of the Health Protection Poster 'Guidance on Infection Control in Schools and other Child Care Settings

9. Playtime & Lunchtime

The appropriate adult supervision is organised by the Inclusion Manager & Deputy Head to ensure all areas of the outside environment are covered by responsible staff. There will always be a first aider on duty outside in the predetermined location on the playground. Minor incidents will be dealt with by the team outside, however if a more serious injury occurs, the team will be assisted by a first aider from the Admin team, either being taken in or, if the injury does not permit this, then they will come outside to assist.

A clear poster of who the Medical Officers and Medical Assistants are should be on display on the notice board in the staff room alongside the duty rotas.

During the school day TAs should be the first port of call for supporting children who feel unwell – they should speak to them about how they feel and make an assessment about whether they need to be seen by a first aider. Every year group has at least one first aider attached to them and if it is assessed that a child is really unwell the First Aider should be found to assess whether the child needs to receive any first aid (i.e. have their temperature taken). Most incidents that occur during the day require reassurance and kindness to the child and no first aid. This should be done by a TA in the class, or year group, rather than needing to involve a first aider. Plasters for small cuts and grazes can be applied by any adult in the classroom (this does not need first aid treatment or to be done by a first aider). ALL head bumps need to be reported to a first aider and recorded.

10. Educational Visits

All offsite activities will be staffed by at least one first aider and the appropriate first aid kit will be taken every time pupils leave the school site. If the school holds medicines for a pupil, these will be taken together with the appropriate forms.

11. Indeminty

West Sussex County Council employees who hold a valid first aid qualification are indemnified by the County Council's insurance against any claims for negligence or injury, provided they relate to first aid provided in the course of their employment and they acted in good faith and in accordance with their training. The indemnity is regardless of where and to whom the first aid was provided. Some training providers also provide indemnity cover for the period of the certificate to protect the first aider from claims when providing first aid in any situation and not restricting its use to the workplace.

12. Monitoring and Review

This policy will be used in conjunction with the 'Supporting Children with Medical Conditions' Policy. Review or response to events may lead to changes being made on an on-going basis.



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HEAD INJURY

Dear Parent/ Guardian

Your Child received a bump on their head today whilst attending School.

They were treated in the medical room at (time) Date:.....

Description of how head injury occurred:

.....
.....
.....

A School First Aider assessed your child. We have put a sticker with their name onto their clothing so that they can be monitored during the day and for you to see. Although no problems were detected at the time, we request that you observe your child for the next 24 and contact your GP or the nearest Accident and Emergency Department if you notice any of the below symptoms.

- Blurred vision
- Drowsiness
- Nausea or vomiting
- Severe headache
- Confusion
- Slurred speech
- Unresponsiveness
- Clumsy, staggering or dizziness
- Bleeding from ears or nose

Yours faithfully,

(Person attending injury)

Examples of medical record sheets



Name	Sally evans
D.O.B	07/02/2008
Class	Mantaray

Date	Time	Medication given & Amount	Signature



Name	Harry Smith
D.O.B	13/03/2009
Class	Pelican

Date	Time	Reason for visit to medical room	Signature

First Aid Checklist & RISK ASSESSMENT

N°	Assessment Factor	Apply?		Impact on First Aid Provision
		Yes	No	
3	Is there adequate first aid provision close at hand for sports activities (consider curriculum and out of hours activities), and also for all off-site activities and visits?	Y		<p>You will need to ensure:</p> <ul style="list-style-type: none"> ○ Adequate numbers of EFAW or EYFAs for these lessons, events or visits. ○ Travelling first aid kits have been maintained ○ For outdoor events, there is equipment to keep casualties warm e.g. survival bag or blanket. ○ Where first aid cover is spread out with a travelling group that there is a reliable and efficient method of communication with first aiders. ○ Where an off-site visit is to a rural or remote area, where emergency services may take longer to arrive, you may need additional first aiders and with better qualifications, e.g. FAW ○ Qualified sports or adventurous activity leaders may already hold a First Aid qualification recognised by their sport or activity national governing body. Before deciding to depend upon this provision, you should check that it meets the minimum standard of EFAW and if they will supervise primary age children and that it includes the resuscitation of that age group.
4	Does your curriculum contain swimming lessons?	Y		<ul style="list-style-type: none"> ▪ Unless you use facilities with qualified lifeguards, you will need to train supervising staff to perform rescues and resuscitation.
5	Do you have pupils and visitors who have special health needs?	Y		<ul style="list-style-type: none"> ○ Individual health care plans should be undertaken with the school nurse and should include any specific emergency procedures. ○ There must be sufficient staff trained to provide emergency care to pupils with medical needs at all times.
6	What is your history of accidents and cases of ill health? What type are they and where did they happen?	Y		<p>You will need to check your records</p> <p>You may need to:</p> <ul style="list-style-type: none"> ○ locate first aid in certain areas ○ review the provision
7	Are the premises spread out, e.g. are there several buildings on the site or multi-storey buildings?	Y		<p>You will need to consider provision in each building and on several floors.</p>

N°	Assessment Factor	Apply?		Impact on First Aid Provision	
8	Is there shift work or out-of-hours working or after school activities?	Y		First-aid provision is required at all times while people are at work or in your duty of care.	
9	Do you have staff that travel a lot or work alone?		N	You will need to consider: <ul style="list-style-type: none"> o issuing personal first-aid kits and training staff how to use them; o issuing personal communications. 	
1	Do any of your staff work at sites occupied by other employers?		N	You must make sure that adequate arrangements for first aid exist at all sites used by your employees.	
1	Do you have any temporary workers, volunteers or other children on site?	Y		Your first-aid provision must cover them.	
Action				Who by	Target date
Ensure adequate first Aiders are on site whilst after school activities are running				Leila Murray	July 2017