



Dudley House School

First Aid Policy

1 Introduction

1.1 The purpose of this policy is:

- To administer emergency treatment and life support for staff, students and visitors when in need in a competent and timely manner.
- To communicate children's health problems to parents when considered necessary.
- To provide resources and training to cater for the administering of First Aid.
- To encourage preventative measures to minimise emergencies and promote safety.

2 First Aiders & Equipment

2.1 The Headteacher will ensure that a sufficient number of staff are First Aid trained and have up-to-date qualifications.

2.2 The designated First Aider is Jenny Johnson.

2.3 The dedicated First Aid Station is in the kitchen and portable First Aid kits are available above the door in the reception area. Each teacher also has their own playtime first aid kit. A bed, blankets and pillow are available in the medical / music room if needed.

2.4 A comprehensive supply of basic First Aid materials are stored in the First Aid station in the labelled kitchen drawer by the sink, cool/ice packs in the fridge/freezer. PPE and spare supplies are stored in the cupboard above the handwashing sink.

2.5 The designated First Aider is responsible for the ordering and maintenance of First Aid supplies and First Aid Kits.

2.6 Supervision of the First Aid area will be provided by the designated First Aider or staff members.

3 Administering First Aid

3.1 Minor injuries will be treated by any staff members, while more serious injuries, including those requiring parents to be notified or suspected treatment by a doctor, require a First Aid trained staff member to provide First Aid.

3.2 For more serious injuries/illnesses, the parents/guardians must be contacted so that professional treatment may be organised. Any injuries to a child's head, face, neck or back must be reported to parents/guardian immediately.

3.3 All staff have the authority to call an ambulance immediately in an emergency. The Headteacher or senior member of staff will accompany the child in the ambulance if a parent is not available.

3.4 Pupils who receive First Aid will be given a form in order to notify their parents. This form will indicate the nature of the injury, any treatment given, and the name of the person who provided the First Aid.

4 Record Keeping

4.1 All injuries will be recorded on an Accident and Injury record sheet. The top white copy will be filed in the Accident and Incident File in the headteacher's office and the bottom yellow copy will be given to the pupil's parents.

- 4.3** A confidential up-to-date record will be kept of all injuries or illnesses experienced by children that require First Aid. This record will be kept in the school office.
- 4.4** Records held in the Accident and Incident file 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 in accordance with the Record Retention Policy, and then securely disposed of.

5 Reporting to the HSE

- 5.1** The headteacher 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 & 7).
The headteacher 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.
- 5.2** 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 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
- 5.3** Information on how to make a RIDDOR report is available here: [How to make a RIDDOR report, HSE](#)

6 Reporting to Ofsted and child protection agencies

- 6.1** 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. <https://www.gov.uk/guidance/report-a-serious-childcare-incident>
- 6.2** The headteacher will also notify Lincolnshire Safeguarding Partnership of any serious accident or injury to, or the death of, a pupil while in the school's care.

7 Medication

- 7.1** No medication (except for Asthma puffers, EpiPens and medication for diabetes), including headache tablets will be administered to children without the express permission of parents or guardians. A medication consent form is available for this and is kept in the file at the First Aid Station (spares in Forms File). Medication to be administered will be kept securely in the medicine cabinet in the Headteacher's office, unless requiring refrigeration.

8 Illness at School

8.1 Any pupil who is ill during class time will be sent to the office and parents will be contacted to take the child home.

8.2 Parents who collect children from school for any reason (other than emergency) must sign the child out of the school in a register maintained in the school office.

Coronavirus symptoms

8.2 Anyone who develops symptoms compatible with coronavirus (develops a fever, or a new continuous cough, or a loss of, or change in, their normal sense of taste or smell - anosmia), will be sent home straight away. Whilst awaiting collection, children will be isolated away from other people.

A facemask should be worn if a distance of 2 metres cannot be maintained from a child who is symptomatic and awaiting collection. If contact is necessary, then gloves, an apron and a facemask should be worn. If a risk assessment determines there is a risk of splashing to the eyes, for example from coughing or spitting, then eye protection should also be worn.

Once the child or member of staff has left the setting, we will follow [Cleaning of non-healthcare settings](#) to ensure areas they have been in are disinfected and any PPE and other waste is disposed of safely.

Where the child or staff member tests negative, they can return to their setting and the fellow household members can end their self-isolation. If the child or staff member tests positive, the rest of their immediate group within their setting should be sent home and advised to self-isolate for 14 days.

9 Off site visits

9.1 All school trips will have at least one First Aid trained staff member at all times. A comprehensive First Aid kit will accompany all trips, along with a mobile phone.

9.2 All children on trips will have provided a signed consent form on which:
medical details;
permission for teachers to administer medication;
to contact a doctor or ambulance should the child require treatment;
emergency contact details are listed.

These are stored in each class's pupil information blue file kept in the blue bag in the Headteacher's office.

The teacher responsible for the trip will take these forms on the trip.

9.3 Any necessary Inhalers, EpiPens etc. for children on managed medication will be carried by a member of staff.

10 Medical Information

10.1 The school will request medical information at the beginning of each school year. This information will be stored in the blue Student's Details file in the Headteacher's office and in each class's Pupil Information folder.

The Class Pupil Information folder should be taken each week to the swimming pool and on any visits out of school.

Medical information for each child is also recorded on Scholar Pack including treatment needed and health care plans where appropriate.

11 Training and Information

11.1 The headteacher will ensure that necessary staff receive paediatric First Aid training and that designated First Aiders are trained to a level 2 First Aid certificate.

- 11.2** All staff will receive training for individual cases of allergies (the use of EpiPens) and diabetes (testing sugar levels, what to do in hyper and hypo cases) and epilepsy.
- 11.3** All children, especially those with a documented management plan for asthma, diabetes, Cystic Fibrosis etc, will provide copies which will be shared with staff and kept with their medication in the medicine cabinet in the Headteacher's office. Each child's Health Care Plans is also stored on Scholar Pack under Medical details – Notes.
- 11.4** At the beginning of each year, requests for updated First Aid information will be sent home including requests for medical management plans, high priority medical forms, and reminders to parents of the policies and practices used by the school to manage First Aid, illnesses and medications through the year.

12 Monitoring and review

- 12.1** It is the responsibility of our governing body to agree and then monitor the school First Aid policy.
- 12.2** This policy will be reviewed in three years, or earlier if necessary.

Signed:

Date: June 2020