ASHURST PRIMARY SCHOOL

FIRST AID POLICY

FROM SEPTEMBER 2015

INTRODUCTION

This policy will be reviewed in response to changing circumstances in school and guidance and advice issued by LA and DfE

This policy is the responsibility of

the Full Governing Body, in consultation with the Headteacher.

The Headteacher will be responsible for the arrangements for First Aid within the school and ensuring procedures and guidance laid down in the "Educational Department First Aid Policy" are followed.

Suitable and appropriate first aid cover will be maintained at all times during the school day.

The Headteacher will identify first aiders' training needs and arrange for the appropriate training for first aiders and appointed persons.

First-aiders will be issued with guidance as to their duties and will sign to acknowledge this.

The First-Aider will check first aid boxes as appropriate.

A record of all first aid administered will be kept.

The names of first-aiders, position of boxes and general procedures will be brought to the attention of all staff.

First-Aiders must maintain effective communications.

Strict hygiene rules must be followed at all time.

Suitable and appropriate portable first aid kits must be taken on all off-site activities.

1 STATEMENT OF INTENT

This policy is supplementary to the Health and Safety Policy, and complies with the standards specified within the Health and Safety (First Aid) Regulations 1981 and the approved code of practice. It lays down the minimum requirements for provision for first aid within schools.

2 RECOMMENDED SCALE OF PROVISION

Each school/college shall have a minimum of one member of staff (whether teaching or non-teaching) who is a First Aider. In addition, according to size, further personnel shall be trained in first aid practice in order that suitable arrangements can be made to ensure that as far as is practicable, a First-Aider shall be available to administer first aid as required during every school working day. In order to achieve this standard the numbers of staff in the following chart are regarded as minima:

School Roll Size	**-100**	**100-300**	**300-1000**	**1000-2000**
Number of First Aiders*	1	1	2	3
Number of Appointed Persons	1	2	3	3

It is important to note that these minima may require supplementation according to local circumstances. All relevant factors need to be taken into account in deciding an appropriate level of cover. These include the nature of the premises and the distribution of pupils on the site. Also in certain areas, such as a workshop, laboratory, or gymnasium and at certain times of day, such as in breaks, there are heightened hazards and risks. The need to provide suitable first aid cover for off-site activities must also be considered.

2.2 Selecting Personnel

Headteachers should consider their local requirements in conjunction with the minima set out when seeking staff willing to undertake first aid duties. As a general principle it is considered by the authority advisable that whoever is appointed to act as a First-Aider (as distinct from an Appointed Person), should within reason be available to fulfil this function at all times and on every day when the school is open. This is particularly important in those establishments where the minimum recommendation is for the appointment of one First-Aider. It is permissible for two or more people to share this duty, providing that one of the people sharing the responsibility is available at all times. In large schools the available first aid personnel must be organised to ensure that there is a First-Aider available at all times, taking into account that persons recruited in these larger schools may include members of staff who in the course of their normal work leave the school site on occasion. When selecting first-aiders, it is important that the other tasks on which the first-aiders are employed should be such as to allow him or her to leave them immediately and go rapidly to the scene of an emergency. The minima should ensure that all schools, apart from the most exceptional circumstance, will have at least one member of staff available to administer first aid. The absence from school of an employee with a responsibility for first aid owing to illness or other unforeseen circumstance should normally be covered by a colleague with a similar appointment. It should be noted that foreseeable absences must not be allowed to result in there being no first-aid personnel available.

2.2.1 One factor that may be considered in recruiting personnel, teaching or non-teaching, to undertake first-aid responsibility is suitable remuneration. Staff appointed for these duties and who are employed under APT & C conditions

may be entitled to an allowance for this responsibility, one allowance being payable for each school, or each site in the case of split site schools. Account should be taken of the level of responsibility and also the amount of work undertaken when considering the level of remuneration suitable.

2.3 Amendments to Job Descriptions

2.3.1 A letter should be issued to each member of staff who is recruited to undertake first-aid responsibilities. Specimen letters are contained in Annexe E. Headteachers should send a signed copy of the letter to the Education Officer for the Area. In the case of APT & C staff appointed as First-Aiders, a copy of their certificate of qualification should be forwarded to the County Treasurer in order that the allowance to which they are entitled may be paid.

2.3.2. It is vital that any member of staff who administers first aid should have that responsibility officially recognised in this manner in order to afford them the fullest protection in terms of their employment rights.

3 FIRST AID EQUIPMENT AND FACILITIES

3.1 The First-Aid Box

First aid boxes and travelling first-aid kits should contain a sufficient quantity of suitable first-aid materials **and nothing else.**

The dispensing of medicines must not be carried out as part of the First-Aid function, nor should medicines be kept as part of the contents of a first-aid box.

NB Where it is considered that a limited supply of paracetamol should be held in school it would be issued under the existing advice of Community Health Branch, ie having ascertained that there is no known or evident underlying condition in the case of the pupil concerned, then one dose and one dose only of this painkiller may be administered "in loco parentis". If this does not relieve the pain reference should be made to the medical services.

This analgesic together with any other medicines which pupils may have been prescribed which require safe storage until they are to be **self**-administered, must be locked away in a secure manner. They must not be considered part of a First-Aid facility.

3.1.1 Contents of the boxes and kits should be replenished as soon as possible after any use is made in order to ensure that there is always an adequate supply of all materials. Items should not be used after the expiry date shown on packets.

3.1.2 First-aid boxes should be made of suitable material designed to protect the contents from damp and dust and should be clearly identified as first-aid containers: the marking used should be a white cross on a green background in accordance with the Safety Signs Regulations 1980.

3.1.3 First-aid boxes which are to form part of an establishment's permanent first-aid provision should contain only those items which a first-aider has been trained to use.

3.1.4 Sufficient quantities of each item should always be available in every first-aid box or container. In most cases these will be:

a) one set of guidance notes (see Annexe B)
b) twenty individually wrapped sterile adhesive dressings (assorted sizes) appropriate to the work environment;
c) two sterile eye pads, with attachment;
d) six individually wrapped triangular bandages;
e) six safety pins;
f) six medium sized individually wrapped sterile unmedicated wound dressings (approx 10cm x 8cm);
g) two large sterile individually wrapped unmedicated wound dressings (approx 13cm x 9cm); and
h) three extra large sterile individually wrapped unmedicated wound dressings (approx 28cm x 17.5cm).

Where mains tap water is not readily available for eye irrigation, sterile water or sterile normal saline (0.9%) in sealed disposable containers should be provided. Each container should hold at least 300ml and should not be re-used once the sterile seal is broken. At least 900ml should be provided. Eye baths/eye cups/refillable containers should not be used for eye irrigation.

3.1.5 Sterile first-aid dressings should be packaged in such a way as to allow the user to apply the dressing to a wound without touching that part which is to come into direct contact with the wound.

3.1.6 That part of the dressing which comes into contact with a wound should be absorbent. There should be a bandage or other fixture attached to the dressings. Dressings, including adhesives ones, should be of a design and type which is appropriate for their use.

3.2 Travelling First Aid Kits

3.2.1 The contents of travelling first-aid kits should be appropriate for the circumstances in which they are to be used. At least the following should be included:-

a) card giving the general first-aid guidance set out in Annexe B;
b) six individually wrapped sterile adhesive dressings;
c) one large sterile unmedicated dressing;
d) two triangular bandages;
e) two safety pins;
f) individually wrapped moist cleansing wipes.

3.3 Supplementary Equipment

3.3.1 The following items do not form part of a statutory First-Aid Box but may be used by trained first-aiders, and as such may be stored nearby.

a) Blankets
It is recommended that where blankets are provided, they should be stored alongside the equipment and in such a way as to keep them free from dust and damp.
b) Protective Wear
Disposable plastic gloves and aprons and suitable protective equipment should be provided near the first-aid materials and should be properly stored and checked regularly to ensure that they remain in good condition.
c) Scissors
Blunt-ended stainless steel scissors (minimum length 12.70cm) should be kept where there is a possibility that clothing might have to be cut away.

d) Plastic Disposable Bags
Plastic disposable bags for soiled or used first-aid dressings should be provided. First Aiders should ensure that used dressings etc are safely disposed of in sealed bags.
e) Crepe and Roller Bandages
f) Cotton wool
g) Forceps or tweezers
h) Kidney dish
i) 14" diameter plastic bowl
j) Tie-on labels
k) Notebook and pencil

3.4 First-Aid Rooms

3.4.1 When it is not possible to dedicate a specific area for the administering of First aid, consideration must be given to which "quiet" area is most suitable for use as a safe place for casualties awaiting specialist treatment.

3.4.2 For establishments wishing to dedicate a room for First Aid the following advice is extracted from the Approved Code of Practice.

a) a First-Aider should be responsible for the room and its contents.

b) a dedicated first-aid room should be readily available at all times, and to be so described should not be used for any purpose other than for the tendering of first aid or health screening.

c) the room should contain suitable facilities and equipment, have an impervious floor covering and should be effectively ventilated, heated, lighted and maintained. All surfaces should be easy to clean.

The room should be cleaned each working day and suitable arrangements for refuse disposal should be provided.

In practice rooms which are clean, comfortable, quiet and sited in a place that is convenient for quick external communication with the emergency services would be suitable to be dedicated as a "quiet room".

4 COMMUNICATIONS

4.1 A vital part of planning First Aid in all establishments is an effective internal and external communications system. All establishments should prepare and publish information showing the following:

a) A rota of First Aiders and Appointed Persons indicating where they may be contacted.

b) How to contact the emergency services, hospitals and local GPs.

c) The siting of First-Aid Rooms or Areas and First-Aid Boxes.

Also, a display should be arranged which illustrates procedures for dealing with emergencies. Annexe B is a copy of the guidance approved by the Health and Safety Executive; it may be reproduced as appropriate.

The information above should be sited close to every internal and external telephone, in addition to other key sites throughout the establishment.

It is important that visitors to an establishment can immediately recognise that First-Aid arrangements have been made and are adequate. In choosing sites for the display of information consideration should also be given to the areas which present special risks, eg playgrounds, sports fields, PE areas, swimming pools, workshops, laboratories, kitchens.

5 TREATMENT

5.1 There are a number of publications which offer more detailed information on the treatment of casualties (see Annexe D): however nothing can adequately replace having available staff with the necessary training to administer first aid.

5.1.1 Concern has been expressed about the implications of Aids for first aid in education establishments. The DES WO booklet published in 1986 on "Children at School and Problems Related to AIDS" offered detailed guidance on the care and treatment of pupils who are known to be infected. The 1987 publication "AIDS: Some Questions and Answers", which has been sent to all teachers, lecturers and youth workers, provides full background information. In addition schools have recently received a copy of "AIDS and the Workplace – a Guide for Employers".

The Government's advice to all employers on the precautions which should be followed by first-aiders to avoid the risk of infection with the AIDS virus is set out in the paragraphs below which are drawn from the 1986 publication "AIDS and Employment" issued jointly by the Department of Employment and the Health and Safety Executive.

In any situation requiring first aid, precautions always need to be taken to reduce the risk of transmitting other infections,

including hepatitis. These standard precautions will be equally effective against the AIDS virus. For example, first-aiders should always cover any exposed cuts or abrasions they may have with a waterproof dressing before treating a casualty, whether or not any infection is suspected. They should wash their hands both before and after applying dressings.

Whenever blood, semen or other body fluids* have to be mopped up, disposable plastic gloves and an apron should always be worn and paper towels used; these items should then be disposed of in plastic bags. Clothing may be cleaned in an ordinary washing machine using its hot cycle. The AIDS virus is killed by household bleach and the area in which any spills have occurred should be disinfected using one part of bleach diluted with ten parts of water; caution should be exercised as bleach is corrosive and can be harmful to the skin.

** The AIDS virus is carried in blood, semen and vaginal fluid. There are no well-documented cases of the AIDS virus being transmitted via saliva, or tears or during the course of normal social activity.*
If direct contact with another person's blood or other body fluids occurs the area should be washed as soon as possible with ordinary soap and water. Clean cold tap water should be used if the lips, mouth, tongue, eyes or broken skin are affected and medical advice sought.

First-Aiders who may be called upon to give mouth-to-mouth resuscitation should be aware that mouthpieces are available for use when carrying out this procedure, but they should only be used by properly trained persons. Mouth-to-mouth resuscitation should never be withheld in any emergency because a mouthpiece is not available since so far is currently known no case of infection has

been reported from any part of the world as a result of giving mouth-to-mouth resuscitation.

5.1.2 This policy statement can give only general guidance, if there are pupils with disabilities, longstanding medical conditions or allergies which require special attention, individual advice should be sought about their treatment in the case of accidents. Relevant notes must be given to all who may administer first aid in an establishment.

5.2 Recording First Aid Treatment

Records of all cases treated should be made and kept in a suitable place eg alongside first aid equipment. A form which may be used for this purpose is to be found in Annexe C.

6 OUT OF HOURS WORKING

6.1 It is important that all establishments have arrangements to ensure that first aid provision for such situations is adequate and that the arrangements are known to those concerned. As a minimum an appointed person** and a first aid box should be available and there must be access to a telephone in case of emergency. These arrangements must embrace any youth or adult education activity which takes place. In those establishments where out of hours working is common it is advisable to supplement the minimum requirements outlined in paragraph 2.1 accordingly.

*** In this context it is accepted that an appointed person may be a responsible adult who is equipped to take charge of a casualty and who would administer First Aid accordingly to their own level of knowledge and skill and obtain assistance from the emergency services if*

necessary; eg an Adult Education Tutor who has been briefed about First Aid procedures.

7 VISITORS/CONTRACTORS

7.1 It is expected that the provision made for First Aid within each establishment will embrace those individual members of the public whose temporary presence on the school site has been approved, eg an electrician is present, etc. Where a number of non-employees, other than pupils, are working on a school site on a regular basis, it is reasonable to expect the first aid provision will have been made by their employer in accordance with the regulations; it would be reasonable, however, to act as a "good neighbour" should particular occasions arise when first aid facilities are requested.

7.2 First aid provision should be considered an important requirement when hiring out premises and account should be taken of any costs incurred when making a suitable charge. The school should ensure that the hirer has access to a First Aid Box and is informed of the nearest available telephone which enables the hirer to obtain assistance from the emergency services should this be required.

8 OFF SITE ACTIVITIES

8.1 The duty of care in terms of first aid must be taken into account when planning activities away from a main establishment. Travelling first aid kits should be a part of this consideration. Reference should be made in addition to the Regulations and Notes of Guidance for Off Site Activities. It is recommended that a supervisor is appointed to be responsible for First Aid who has the knowledge and First Aid skills appropriate to the activities to be undertaken.

9 ACCIDENT PREVENTION

9.1 It is of vital importance that all employees are vigilant with regard to potential hazards. First Aid preparedness is important, however systems that assist in reducing the need to administer first aid are equally so.

ANNEXE A

FIRST AID PERSONNEL – DEFINITIONS

A First Aider refers to an adult who currently holds a First aid at Work Certificate, approved by the Health and Safety Executive*** or to adults who hold a certificate in First Aid, issued by a recognised organisation, whose training and qualifications are approved by the Health and Safety Executive, the certificate being proof that the duration and coverage of the course is substantial – an example is a Public First Aid Certificate.

An Appointed Person refers to an adult who is appointed to take charge of an accident or illness when a First Aider is temporarily not available. It is recommended that appointed persons should receive training in First Aid practice.

****Practising registered medical practitioners and practising nurses whose names are entered on Part 1, 2 or 7 of the single Professional Register maintained by the UK Central Council for Nursing, Midwifery and Health Visiting may be regarded as First Aiders.*

NB In larger establishments where the number of employees exceeds 50 persons there is a recommendation in the Approved Code of Practice for a First Aider to be qualified in a First Aid at Work Certificate.

CONTENTS OF "BUM BAGS"

2 X sterile water
1 x triangular calico bandage
1 x eye pad
1 x large wound dressing
1 x medium wound dressing
1 x micropore tape
1 x small primapore dressing
1 x medium primapore dressing
2 x melolin wound dressing
assorted hypogenic plasters
1 x resusci face shield
1 Waspeez
1 pair of scissors
protective gloves
safety pins
plastic bags
spare whistle

Display in Kitchen designated First Aid "Area":

i) Pictorial instruction for implementation of "Recovery Position".

ii) Pictorial instruction for implementation of emergency techniques and general first aid.

iii) First Aid storage cupboard:

a) General information
b) Procedures
c) Known asthmatics
d) First aid bum bags together with additional supplies
e) Named inhalers kept in school for emergencies which in some cases include "spacers" for additional assistance