

HARBINGER PRIMARY SCHOOL

First Aid Policy

Review date: February 2023

Next Review date: February 2024

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1. Aims

The aims of our First Aid Policy are to:

- Ensure the health and safety of all staff, pupils, and visitors.
- Ensure that staff and governors are aware of their responsibilities with regards to health and safety of each other.
- Provide a framework for responding to an incident and recording and reporting the outcomes.

2. Legislation and guidance

This policy is based on the <u>Statutory Framework for the Early Years Foundation Stage</u>, advice from the Department for Education on <u>first aid in schools</u> and <u>health and safety in schools</u>, and the following legislation:

- <u>The Health and Safety (First Aid) Regulations 1981</u>, which state that employers must provide adequate and appropriate equipment and facilities to enable first aid to be administered to employees, and qualified first aid personnel
- <u>The Management of Health and Safety at Work Regulations 1992</u>, which require employers to make an assessment of the risks to the health and safety of their employees
- <u>The Management of Health and Safety at Work Regulations 1999</u>, which require employers to carry out risk assessments, make arrangements to implement necessary measures, and arrange for appropriate information and training

- <u>The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013</u>, which state that some accidents must be reported to the Health and Safety Executive (HSE), and set out the timeframe for this and how long records of such accidents must be kept
- <u>Social Security (Claims and Payments) Regulations 1979</u>, which set out rules on the retention of accident records
- <u>The School Premises (England) Regulations 2012</u>, which require that suitable space is provided to cater for the medical and therapy needs of pupils

3. Statement of Intent

This school is acutely aware of its obligations under the Health and Safety (First Aid) Regulations, 1981 and guidance from the Department for Education and Skills, the Education Service Advisory Committee and the Local Education Authority to provide adequate and appropriate first aid facilities and personnel for members of staff, pupils and visitors. As a result, this statement has been drawn up to give details of the first aid arrangements which have been made in the school.

4. Principles and practice of First Aid

First Aid is the skilled application of accepted principles of treatment on the occurrence of any injury or sudden illness, using facilities or materials available at the time. It is the approved method of treating a casualty until placed, if necessary, in the care of a doctor or removed to hospital. First Aid treatment is given to a casualty to preserve life, to prevent the condition worsening and to promote recovery.

5. Roles and responsibilities

5.1 Appointed person(s) and first aiders

The school's appointed Lead First Aider is responsible for:

- Taking charge when someone is injured or becomes ill.
- Ensuring there is an adequate supply of medical materials in first aid kits and replenishing the contents of these kits.
- Ensuring that an ambulance or other professional medical help is summoned when appropriate.
- Ensuring only prescribed medication is administered to pupils that are required to take antibiotics or other forms of medication throughout the day. Making a note of date and time the medication was administered.

All other First Aiders are trained and qualified to carry out the role (see section 7) and are responsible for:

- Acting as first responders to any incidents; they will assess the situation where there is an injured or ill person and provide immediate and appropriate treatment.
- Sending pupils home to recover, where necessary (must seek agreement of a member of SLT before doing so)
- Filling in an accident report on the same day, or as soon as is reasonably practicable, after an incident (see the template in Appendix 2) ensuring that what is recorded is accurate, clear, and written in plain English.
- Keeping their contact details up to date.

Our school's first aiders are listed in Appendix 1. Their names will also be displayed prominently around the school.

5.2 The Governing Board

The Governing Board has ultimate responsibility for health and safety matters in the school, but delegates operational matters and day-to-day tasks to the Executive Headteacher, Head of School and staff members.

5.3 The Executive Headteacher & Head of School

The Executive Headteacher and Head of School are responsible for the implementation of this policy, including:

- Ensuring that an appropriate number of trained first aid personnel are always present in the school.
- Ensuring that First Aiders have an appropriate qualification, keep training up to date and remain competent to perform their role.
- Ensuring all staff are aware of first aid procedures.
- Ensuring appropriate risk assessments are completed and appropriate measures are put in place.
- Undertaking, or ensuring that managers undertake, risk assessments, as appropriate, and that appropriate measures are put in place.
- Ensuring that adequate space is available for catering to the medical needs of pupils.
- Reporting specified incidents to the HSE when necessary (see section 6).

5.4 Staff

School staff are responsible for:

- Ensuring they follow first aid procedures.
- Ensuring they know who the First Aiders in school are.
- Completing accident reports (see Appendix 2) for all incidents they attend to where a first aider is not called.
- Informing the Executive Headteacher/Head of School/Lead First Aider/a member of the SLT of any specific health conditions or first aid needs that they are aware of.

6. First aid procedures

6.1 In-school procedures

In the event of an accident resulting in injury:

- The closest member of staff present will 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.
- The First Aider, if called, will assess the injury and decide if further assistance is needed from a colleague or the Lead First Aider. The Lead First Aider, or a member of the SLT in her/his absence, will decide if assistance needs to be sought from the emergency services. All involved will remain on scene until help arrives.
- The First Aider will also decide whether the injured person should be moved or placed in a recovery position.
- If the Lead First Aider or member of the SLT judges that a pupil is too unwell to remain in school, parents will be contacted by a First Aider and asked to collect their child. Upon their arrival, a First Aider will recommend next steps to the parents.
- If emergency services are called, the Lead First Aider or a member of SLT will ensure a member of staff contact the parents immediately. A member of staff should accompany the child in the ambulance if the parents have not been able to get to school in time.
- The First Aider who has dealt with the injury will complete an accident report form on the same day ensuring that what is recorded is accurate, clear, and written in plain English. The child takes the white copy home, and the other copies stay in school.
- The First Aider/member of staff should judge when to make a courtesy phone call to the child's parents. A call home should be made if the child has incurred an injury to the head/face or a more serious bump/cut/graze or even a fall, where an injury may not be visibly obvious. Parents should be informed of the accident to

determine whether the parent is happy for their child to continue in school or not. If there is any doubt as to how serious an accident is then a senior member of staff must be consulted immediately. *See also later section on notifying parents.*

• For midday supervision, there is at least one First Aider on duty who is responsible for overseeing all lunchtime first aid.

6.2 Calling emergency services

If an ambulance is required: Dial 999 or the emergency number shown on the number label Tell the operator that you want the Ambulance Service Give the telephone number shown on the phone Wait for the Ambulance Service to answer Give the address where help is needed Give any other necessary information

6.3 Off-site procedures

When taking pupils off the school premises, there must always be at least one first aider with a current pediatric first aid certificate on school trips and visits, as required by the statutory framework for the Early Years Foundation Stage.

Staff will ensure they always have the following:

- At least one mobile phone
- A portable first aid kit
- Information about the specific medical needs of pupils
- Access to contact details

Risk assessments will be completed by the trip organiser prior to any educational visit that necessitates taking pupils off school premises. These risk assessments are authorised by the Executive Headteacher/Head of School.

7. First aid equipment

A typical first aid kit in our school will include the following:

- A leaflet with general first aid advice
- Antiseptic/non-alcohol cleaning wipes
- Plasters (hypoallergenic) of assorted sizes
- Regular and large bandages
- Triangular bandages
- Eye wash
- Adhesive tape
- Disposable gloves
- Cold compresses (ice packs are in the fridge in the isolation room and in SLT office)
- Burns dressings

- Face shield (for CPR)
- Yellow hazard bags (to dispose of anything containing blood or bodily fluids)
- Scissors

Each floor will have a 'no contact/scanning' thermometer.

No medication is kept in first aid kits. Medication is kept in the child's classroom.

First aid kits are stored in:

- All classrooms
- In the Top, Middle and Bottom hall
- The Isolation Room
- Under the shelter in the main school playground
- The School Office
- The School Kitchen

Defibrillator - The school has a defibrillator which is in the Bottom Hall.

8. Record-keeping and reporting

8.1 First aid and accident record book

- An accident form will be completed by the First Aider on the same day or as soon as possible after an incident resulting in an injury.
- As much detail as possible should be supplied when reporting an accident, including all of the information included in the accident/incident/illness form (Appendix 2). What is recorded needs to be accurate, clear, and written in plain English.
- The First Aider will arrange for a copy of this form to be given to the parents.
- Our insurers require that records held in the first aid and accident book are kept for 3 years and 3 months after the accident, before being securely disposed of, because that is the time allowed for an injured person to instruct a solicitor to serve legal proceedings. In the case of a child, such records will need to be kept until they are age 21 and 3 months because this time-period commences from the date that the child reaches maturity.

8.2 Reporting to the HSE (Health and Safety Executive)

The Executive Headteacher/Head of School 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 and 7).

The Executive Headteacher/Head of School will report these to the HSE as soon as is reasonably practicable and in any event within 10 days of the incident.

Reportable injuries, diseases or dangerous occurrences include:

- Death
- Specified injuries, which are:
 - Fractures, other than to fingers, thumbs, and toes

- o Amputations
- o Any injury likely to lead to permanent loss of sight or reduction in sight
- o 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
- o 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 collapse or failure of load-bearing parts of lifts and lifting equipment.
 - The accidental release of a biological agent likely to cause severe human illness.
 - 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.

How to make a RIDDOR report, HSE

Information on how to make a RIDDOR report is available here:

http://www.hse.gov.uk/riddor/report.htm

In Tower Hamlets we use the borough's Accident/Incident Report form (AIR) for this purpose.

8.3 Notifying parents

Notifying parents of general/minor injuries:

Class teachers have a duty to inform the parent/carer when a child is collected of any injury they may have suffered during the school day. If this cannot be done when the child is collected, the class teacher should ask the office to make a brief courtesy call.

Notifying parents/carers of other more serious injuries, including head injuries:

The first aider on duty is responsible for speaking to a member of SLT before telephoning the parent/carer and informing them of the accident, illness or injury, and what action was taken by the school as soon as possible after the event.

If the injury is such that the emergency services are called, the Lead First Aider or a member of SLT will ensure a member of staff contacts the parents immediately.

SLT must be kept informed at all times.

8.4 Reporting to Ofsted and child protection agencies

The Executive Headteacher/Head of School 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.

The Executive Headteacher/Head of School will also notify the Multi Agency Safeguarding Hub via the Child Protection Advice Line on 020 7364 5006 (option 3) of any serious accident or injury to, or the death of, a pupil while in the school's care.

9. Training

All school staff are encouraged to undertake first aid training if they would like to, subject to course availability and budget.

All First Aiders must have completed a training course and must hold a valid certificate of competence to show this. The school will keep a register of all trained First Aiders, what training they have received and when this is valid until.

Staff are encouraged to renew their first aid training when it is no longer valid.

At all times, at least 1 staff member will have a current pediatric first aid (PFA) certificate which meets the requirements set out in the Early Years Foundation Stage statutory framework and is updated at least every 3 years.

Harbinger is a recognized **Asthma and allergy friendly** school. We are an asthma friendly school and have gained asthma friendly status for our care of students with asthma. This means we advocate inclusion, are clear on our procedures and have designated asthma leads to ensure these are adhered to. 34 members of our staff are asthma trained. We commit to audit our procedures yearly. Our designated Asthma and allergy leads are Jubeda Ahmed and Fathema Khatun.

10. Monitoring arrangements

This policy will be reviewed by the Lead First Aider, Head of School and School Business Manager every year. At every review, the policy will be approved by the Executive Headteacher and Governing Board.

11. Links with other policies

This policy links to the following policies:

- Accessibility Plan
- Complaints Policy and Procedure
- Equality information and objectives
- Health and Safety Policy
- Intimate Care Policy
- Risk Assessment Policy
- Safeguarding and Child Protection Policy
- SEND Policy
- Supporting Pupils with Medical Needs at School Policy

12. Guidance on Infection Control

Posters produced by the Health Protection Agency on Guidance on Infection Control in Schools & Childcare Settings are sited throughout the school (Appendix 3).

FIRST AID LIST 2023

PAEDRIATRIC FIRST AIDERS	VALID UNTIL
Jackie Garner	12/01/2026
Zaiton Haron	12/01/2026
Alima Khanom	08/03/2024
Jubeda Ahmed	06/04/2024
Dipali Khanom	13/04/2024
Shajia Begun	12/04/2024
Nimisha Nagahawatte	30/03/2024
Emily Fawcette	01/04/2024
Fiona Keogh	30/03/2024
Shafia Khatun	16/03/2024
Fathema Khatun	10/01/2025
Lloyd Anthony Walker	10/01/2025
Vera NDonna Maa Ayossa	10/01/2025
Jeanette Myers	30/01/2025
Charlotte Hurley	08/11/2025
Jackie Hoey	08/11/2025
Shari Fifton	12/01/2026
Claire Norton-Steele	10/01/2025
Nageena Raufi	10/01/2025
Rukshana Begum	12/01/2026
Edmund Miller	12/01/2026

FIRST AID BOXES CAN BE LOCATED IN THE HALL ON EVERY FLOOR DEFIB MACHINE IS LOCATED IN THE BOTTOM HALL

Appendix 2: Accident/Incident/Illness report form

ACCIDENT/INCIDENT/		Pupil's Name	• •	Date Time Class	
ILLNESS	SS REPORT SLIP				
Location and details of a	accident/incident/illness				
Head Injury	Sprains/Twists		Parent/Carer Contacted		Γ
Asthma	Nosebleed		Unable to contact Parent		T
Bump/Bruise	Stomach Pains/Upset Tummy		Well enough to remain in school after First Aid		T
Cut/Graze	Mouth Injury/Tooth Ache/ Loose or Missing Tooth		IMPORTANT		-
Headache/High Temperature	TLC Applied		Please consult your doctor or local hospital if your suffers any drowsiness, vomiting, impaired visio excessive pain after returning home.		10
Vomiting/Nausea	Collected from school			Authorised Sig	na
Details of Treatment and	Additional Comments				

Record of administering medication

Date	Child's Name	Time	Name of medicine	Dose given	Staff Signature	Staff Name (Print in Full)

Appendix 4: Guidance on infection control in schools and other childcare settings

Guidance on infection control in schools and other childcare settings



Prevaid the special of columnary resulting institute transmission, high standards of parameter hyghwa and practice, particularly baselessificing, and manifacting a clean monocontrol. A new contact the fields cleans signify **Health Protection Duty Room (Duty Room) on 5200 555 51 18** or

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