



Hursthead Junior School

First Aid Policy

(Approval delegated to Quality of Education Committee)

Revised and adopted by Governing Board:	Resources Committee Spring 2017 Spring 2018 Spring 2019 Spring 2020 Spring 2021 Quality of Education Committee Spring 2022 Spring 2023 Spring 2024
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Changes to document:	Spring 2024: Changes to procedures for treating a bumped head; minor amendment to Out of School guidelines; addition of Concussion Guidelines; change to name of Appointed Person Spring 2023: Reference to Covid 19 removed. Spring 2022: Minor formatting changes Spring 2021: Amendment to list of contents and of appointed persons to administer medicines; amendment to location of grab bags as a result of COVID-19 Risk Assessment; amendment of person to consult in the absence of the Headteacher; inclusion of section about AED. Spring 2020: Inclusion of reference to linked policies and of section about emergency auto injector. Spring 2019: Removal of reference to photo records in Staff Room Spring 2018: change of First Aider name Spring 2017: No changes Minor formatting
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Safeguarding Duty	“Safeguarding and promoting the welfare of children is defined for the purposes of this guidance as preventing impairment of children’s mental and physical health or development”(KCSIE Jan 2021)
UN Convention on the Rights of the Child 	Article 3- Best interests of the child Article 24- health and health services- every child has the right to the best possible health.

Rationale

First Aid is care given to an injured person (in order to minimise injury, future disability, to preserve life and to promote recovery) before professional medical care is available. Teachers and other staff are expected to use their best endeavours at all times, particularly in emergencies, to secure the welfare of pupils in the same way that parents/carers might be expected to act towards their own children. As a school, our aim is also to promote health and safety awareness in children and adults, in order to prevent first aid being necessary and to encourage every child and adult to begin taking responsibility for their health needs.

This policy should be read in conjunction with the school's Medical Conditions and Asthma policies.

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First Aid Provision

- The Headteacher is responsible for ensuring that there is an adequate number of qualified First Aiders.
- Portable First Aid kits are available and used any time our pupils are off site.
- The Appointed First Aiders will ensure the maintenance of the contents of the first aid kits and other supplies.
- All staff will be trained in any aspects of First Aid deemed necessary e.g. asthma, epilepsy, diabetes, the use of an epipen.
- All staff will ensure that they have read the school's First Aid policy.

First Aid Boxes

First Aid Boxes are located in:

- The School Office
- The main corridor

A portable First Aid kit is kept in each classroom. Refills are available from the School Office

First Aid Boxes contain:

- micropore
- scissors
- individually wrapped sterile adhesive dressings
- sterile wipes
- triangular bandages
- vinyl gloves
- nappy sacks
- handsanitiser.

No medication/tablets are kept in the first aid boxes.

Procedures

In school

- In the event of an injury or medical emergency, if possible contact a school First Aider.
- Any pupil complaining of illness or who has been injured at playtime/lunchtime is sent to the First Aider on duty (usually the class Teaching Assistant) or the Office for the qualified First Aider to inspect and, where appropriate, treat. Constant supervision will be provided if necessary. The Headteacher or, in her absence, the Assistant Headteacher, will be available to consult if

necessary. Children will be monitored to check their progress before they return to class. Children who receive a minor bump to the head will be given a printed bumped head wristband to wear and their parent(s) will be advised via text message. If a child receives a more serious head injury or their condition were to deteriorate, their parent(s) will be contacted by phone.

- If there are any doubts over the health or welfare of a pupil, the parent/carer will be contacted.
- **IF THE SITUATION IS LIFE THREATENING THEN AN AMBULANCE SHOULD BE CALLED AT THE EARLIEST OPPORTUNITY WITHOUT WAITING FOR THE APPOINTED PERSON TO ARRIVE ON THE SCENE.**
- No member of staff or volunteer helper should administer first aid unless they have had proper training.
- Where possible, hands should be washed before and after administering first aid, and if not possible, hand sanitiser used. Disposable gloves should be worn whenever possible.
- All serious accidents should be reported to the Headteacher or one of the named First Aiders who should call an ambulance and the child's parent/carer ASAP (numbers located in the Office).
- In the event of a serious incident, an ambulance is called and a member of staff will accompany a pupil to the hospital. A parent/carer is asked to go immediately to the hospital.
- If a pupil sustains a serious injury, they should not be moved.

Calling an Ambulance

The First Aider will assess the requirement for an ambulance.

Every attempt will be made to contact parents immediately.

An ambulance will always be called for a severe asthma attack, anaphylaxis, unconscious children, seizures etc.

For broken bones (e.g. wrist, fingers etc) where child is mobile and not displaying signs of shock, a visit to A and E will be recommended to parents.

If parents cannot be reached, an ambulance could be called.

Parents transporting children to hospital in their own vehicles will be offered a member of staff to accompany them.

Out of School

While on a visit, school staff will take a mobile phone and appropriate first aid resources. At least one member of staff attending a school trip will be first aid trained. Medication will be collected for the visit (see Medical Conditions Policy)

An emergency inhaler will be taken for use by those who have prior permission.

The Headteacher has responsibility for ensuring staff have adhered to the school's 'Educational Visits procedures' when organising a visit. All staff should have a copy of the Emergency Procedures documentation.

A Risk Assessment will need to be carried out as part of an educational trip.

Concussion Guidelines

The Government has published the first UK-wide Landmark concussion guidance for grassroots sport published - GOV.UK (www.gov.uk) which will help players, coaches, parents, schools, National Governing Bodies and sports administrators to identify, manage and prevent the issue.

The guidelines, developed by an expert panel of domestic and international clinicians and academics in neurology and sports medicine, set out steps to improve understanding and awareness of the prevention and treatment of concussion in grassroots sport where trained medical professionals are less likely to be routinely present. It is targeted at people of all ages.

'If in doubt, sit them out' is the strapline, making clear no-one should return to sport within 24 hours of a suspected concussion.

Players, parents, coaches, teachers and administrators are now asked to read the guidance and familiarise themselves with the necessary steps to:

- **RECOGNISE** the signs of concussion;
- **REMOVE** anyone suspected of being concussed immediately and;
- **RETURN** safely to daily activity, education/work and, ultimately, sport.

The guidelines include a recommendation to call NHS 111 within 24 hours of a potential concussion, to rest and sleep as much as needed for the first 24 to 48 hours and avoid using devices which involve screen time.

In addition, a graduated return to activity such as work, education and sport is advised to reduce the risks of slow recovery, further brain injury and longer-term problems. Individuals should be assessed by an appropriate healthcare professional if symptoms persist for more than four weeks.

Action at an Emergency

(To be undertaken by a trained First Aider)

Assess the situation: Are there dangers to the First Aider or the casualty? Make the area safe; look at injury: Is there likely to be a neck injury?

Assess the casualty for responsiveness: Does the casualty respond?

IF THERE IS NO RESPONSE:

- Open airways by placing one hand on the forehead and gently tilt the head back.
- Remove any obvious obstructions from the mouth and lift the chin.
- Check for breathing. If the casualty is breathing, assess for life threatening injuries and then place in the recovery position. If the casualty is not breathing, send for a helper to call an ambulance and give 30 chest compressions then 2 rescue breaths. Continue CPR until the paramedics arrive or until you get a response. This can be quite strenuous and it is best to have another qualified First Aider there to relieve you.

Incident Reporting

- All incidents are reported. Minor and major incidents are written in the Accident Book. This is located in the Office.
- This documentation is archived and kept within the requirements of the retention schedule.
- Parents are informed of head injury by text (for minor bumps) or phone call for more serious injuries or if the patient's condition were to deteriorate). Children who receive an injury to their head are given a printed wristband to wear to alert staff and parents.
- If a serious incident were to occur, the report would also be sent to Zygy Turek, Health and Safety Consultant.
- Staff should complete a Staff Accident Form if they sustain an injury at work. An injured member of staff or any other supervising adult should not continue to work if there is any possibility that further medical treatment is needed.

Administration of medicines

All medicines administered within school are done so in a safe and monitored environment. This is implemented through our Medical Conditions policy.

Appointed Persons to administer medicines

Mrs Wright
Mrs Farnsworth
Mrs Smith
Mrs Kendrick

Contamination / Hygiene

- No person must treat a pupil who is bleeding without wearing protective gloves.
- Protective gloves are stored in the School Office and first aid kits.
- Cover open cuts or wounds on your own skin with a waterproof band-aid or similar dressing.
- Sponges and water buckets must never be used for first aid to avoid the risk of contamination.
- If blood is spilled onto broken skin or your skin is punctured by a sharp object, wash area thoroughly with water.
- All body fluids (Vomit, diarrhoea and blood) must be cleaned immediately with hot water and disinfectant. Dry the area. Single use protective gloves should be worn and are available from the School Office. Any spillages/cleaning equipment should be bagged and placed in the medical disposal bin in the staff ladies' toilet. Hands must be washed and dried after the removal of protective gloves.

Emergency Auto Injector

There is an emergency auto injector (Epipen) located in the School Office which will only be administered under guidance from Ambulance Control. All staff receive annual refresher training in the administration of auto injectors.

Automated External Defibrillator

There is an Automated External Defibrillator (AED) located in the main entrance to the school which is registered with the North West Ambulance Service and is available to any member of school staff or the public who requires to use it. Although the defibrillator is designed to be used without prior knowledge, defibrillator training is included within First Aid training as part of the school's rolling programme for staff. Supplies and parts for the AED are monitored and replaced as necessary by the School Business Manager.

Trained First Aiders:

Mrs Wright – Appointed Person

Mrs Smith – Appointed Person

Rolling Programme of First Aid Training for Staff