



# FIRST AID POLICY – 2022-2023

## RESPONSIBILITIES FOR FIRST AID

### **The Governing Body**

Health and safety legislation places duties on the Governing Body for the health and safety of their employees and anyone else on the premises - this includes responsibility for the Headteacher and teachers, non-teaching staff, students and visitors including contractors.

### **The Headteacher**

The Headteacher is responsible for putting the Governing Body's policy into practice. The Headteacher will also make sure that parents are aware of the health and safety policy, including arrangements for First Aid – this is done during induction, by information in the newsletter as well as the prospectus.

### **Teachers and other Staff**

Teachers' conditions of employment do not include giving First Aid or medication or supervising students taking medication. Teachers and other staff are, however, expected to use their professional judgement at all times, particularly in emergencies. In general, the consequences of taking no action are likely to be more serious than those of trying to assist in an emergency.

The College has an appointed person to take charge of first-aid arrangements – the First Aid Officer.

At SJP medication – anaphylactic shock (severe reaction to a substance e.g. bee sting; nut allergy); ADHD medication and other ongoing medication - is only administered by the First Aid Officer and all medication is securely kept by the First Aid Officer in the First Aid room in a lockable cupboard and a safe.

The parent/carer of any student on medication which is required to be taken during the school day must complete the attached Medication at College Form (APPENDIX C).

There are no rules on exact numbers. However, the number of trained First Aiders will be reviewed annually to fit in with staff turnover and at any such time when a trained first-aider is due to leave or is on long term absence.

## **DUTIES OF FIRST-AIDERS**

The main duties of a first-aider are to:

- give immediate help to casualties with common injuries or illnesses and those arising from specific hazards;
- when necessary to make arrangements to call an ambulance.

All trained first-aiders complete a first-aid training course approved by the Health and Safety Executive (HSE). Staff are also trained in the use of automated external defibrillators by an approved training organisation, Primary First Aid.

Staff who agree to become first-aiders do so on a voluntary basis. However, when selecting first-aiders, the College will consider the individual's:

- reliability and communication skills;
- aptitude and ability to absorb new knowledge and learn new skills;
- ability to cope with potentially stressful and physically demanding emergency procedures;
- normal duties. A first-aider must be able to leave to go immediately to an emergency.

## **QUALIFICATIONS AND TRAINING**

A first-aider must hold a valid certificate of competence, issued by an organization whose training and qualifications are approved by the HSE.

*First-aid at work* certificates are only valid for three years. The H&S Officer will arrange refresher training (2 days) and re-testing of competence before certificates expire. The H&S Officer will keep a record of first-aiders and certification dates and ensure that they and departments receive any relevant information that is frequently circulated by the Authority – through the internal email system.

Automated External Defibrillator certificates are provided after retesting when required due to staff changes. The H&S Officer will arrange refresher training and re-testing.

The College can use the four day HSE approved first-aid courses which are run throughout the year by the Local Authority or others provided by an organization approved by the HSE e.g. Cornerstones Consultancy Services.

The First Aid Officer holds a list of trained first-aiders as well as the H&S Officer. This list is also emailed to all staff as and when changes are made to it.

## **Contacting first-aid personnel - lessons**

Students who feel unwell and in the professional opinion of staff require medical attention are advised to seek medical attention from the First Aid officer. The First Aid officer will assess the student and if necessary contact home to make arrangements for their collection. The Head of Learning will also be informed. Any medication provided requires parental consent. Long term medication requires written consent and will form part of the Health Care Plan written by the SENCO, school nurse and the First Aid officer and involving the parent/carer. Health Care Plans are securely kept by SENCO and the First Aid officer. This medication should be brought into College by a parent/carer where they will be asked to complete a form by a qualified First Aider - see attached letter - APPENDIX C.

Concerning the administration of non-prescription 500mg Paracetamol tablets on site. Letters of consent are required from parent/carer – APPENDIX A & B. A record of replies is held on Arbor . Verbal confirmation is also required at the time of dispensing.

The Emergency Use of Salbutamol Inhalers in College requires written consent from parent/carer – APPENDIX D. A record of replies is held centrally in the main office and passed to the First Aider Officer.

A situation that gives rise to the need for First Aid will lead to a member of staff raising a first aid call-out on Arbor.. If they feel the incident to be worthy of hospital treatment they should phone 999. If a member of staff does not have access to a phone then:

- in the first instance they will seek help from nearby colleagues who can arrange for a first-aider to be present by phoning ext 505 or contacting reception for assistance, or
- they will send a student to reception where a call will be made to the First Aid room or the mobile phone of the First Aid officer. Should the First Aid Officer not be contactable the reception staff will contact a member of staff from the list of trained First Aid staff – such a list is kept at reception.

The H&S Officer will then immediately report the incident to the Headteacher.

## **On the yard during break / lunch time**

An incident leading to the emergency services being on site during this period of time relies on effective communication at all levels to ensure accessibility for the emergency services and high quality care for the person concerned.

1. Staff at the scene of the incident to assess the situation and if necessary contact the emergency services. They then need to contact the First Aid Officer – this may be a mobile phone or student runner, whichever is the quickest. Students should be made comfortable but movement should be absolutely minimized until a trained First Aid person is on the scene.
2. First Aid Officer to assess the situation and inform the Health and Safety Officer if the emergency services have been called.

3. H&S Officer/Site Manager will inform the Headteacher to outline the incident so far. H&S Officer will also phone Caretaker on duty to unlock the gates for the emergency services and to remain on the yard.
4. The H&S Officer informs the Office Manager.
5. SLT responsible for gates during Fire Evacuation should be in attendance at the gates for the arrival of the emergency services or PE staff if available
6. Pastoral AHT should inform their appropriate HOLs who will then be able to allay rumours around the College through their staff
7. First Aid Officer or another member of staff present to contact:
  - Admin Office to acquire arbor details of the injured party – Office Staff to deliver to site of injured party
  - Parent/Carer of the injured party to ensure they can meet the injured party at the Hospital
8. SLT ensures the injured party is accompanied to hospital by the most appropriate member of staff with Arbor information
9. Line Managers need to stand in for key staff when they are absent

First Aid Officer – alternative personnel always available on site  
 Health and Safety Officer/Site Manager – SLT  
 Headteacher – First DHT  
 Pastoral Leader - Learning Coach  
 Caretaker – always on site

## **INSTRUCTIONS TO STUDENTS AND STAFF**

1. Any incident involving the emergency services on site during morning break should lead to the wet break bell being rung and all students and staff must return to their previous lesson i.e. period 2 – the yard will remain empty – SLT presence required to ensure this.
2. Any incident involving the emergency services on site **before** 12.00pm but leading into lunch should lead to the wet lunch bell being rung to ensure that the yard is empty and facilitate Y8, Y11 and Yr 12 going into lunch year by year - SLT presence required to ensure this. Y7, Y9, Y10 and Y13 in Personal Development or assembly.
3. Any incident involving the emergency services on site during lunch time from 12.00pm to 1.20pm (Y8,11,12) should lead to the wet lunch bell being rung to empty the yard and facilitate Y8 and Y11 going into lunch year by year - SLT presence required to ensure this. Y7, Y9, Y10 and Y13 in Personal Development or assembly.

## **FOR INCIDENTS INVOLVING EMERGENCY SERVICES INSIDE THE BUILDING**

The same communication procedures will apply.

However if the incident happens on for example a staircase; class room; then:

- The yard does not need to be emptied **UNLESS** access across it is needed for the emergency services – in this case the situation will be as above - FOR INCIDENTS INVOLVING EMERGENCY SERVICES ON THE YARD - SLT presence required to ensure this.
- If access is not needed across the yard then students will need to be re-directed around / prevented from accessing the specific site of the incident and the exit route – SLT should be present for this. There is no need to instruct students to go to their wet break or lunch areas.
- One way systems will be suspended if necessary.

### **Stock control**

The College uses the following guidelines when stocking its main First Aid boxes:

The Health and Safety Executive (HSE) recommend that, where there is no special risk identified, a minimum stock of first-aid items would be:

- a leaflet giving general advice on first-aid
- 20 individually wrapped sterile adhesive dressings (assorted sizes);
- two sterile eye pads;
- four individually wrapped triangular bandages (preferably sterile);
- six safety pins;
- six medium sized (approximately 12cm x 12cm) individually wrapped sterile unmedicated wound dressings;
- two large (approximately 18cm x 18cm) sterile individually wrapped unmedicated wound dressings;
- one pair of disposable gloves.

The contents of the first-aid box in the First Aid room are examined yearly and on an *as they are used basis* and re-stocked as soon as possible after use. Items are discarded safely after the expiry date has passed. All swabs used on open wounds will be disposed of correctly in the clinical waste bin, provided by the contractor.

### **Defibrillators**

There are three defibrillators on site located at Reception, First Aid Office and the PE Office. Staff trained in the use of the defibrillator are identified on the telephone extension list. In addition, all the PE department are also trained. Each defibrillator is checked before each term as part of the half-termly Fire Marshall inspection completed by the Health & Safety Officer. In addition, the First Aid Officer checks all defibrillators on the first school day of each month.

### **Travelling first-aid kits**

Before undertaking any off-site activities, the party leader will assess what level of first-aid provision is needed as part of the risk assessment procedure. It is good practice to have a trained First-Aider to accompany the party – if this is not possible First-Aid at the venue itself is a suitable alternative. Any activity involving the minibus requires the member of staff to collect a First Aid box from the First Aid officer. The HSE recommend that, where there is no special risk identified, a minimum stock of first-aid items for travelling is:

- a leaflet giving general advice on first-aid;
- six individually wrapped sterile adhesive dressings;
- one large sterile unmedicated wound dressing - approximately 18cm x 18cm;
- two triangular bandages;
- two safety pins;
- individually wrapped moist cleaning wipes;
- one pair of disposable gloves.

These items are provided in the First Aid kits.

### **Disposal of Clinical Waste**

The College secures a contract for the safe disposal of clinical (first-aid) waste, medical waste and sharps. The First Aid officer ensures that all first-aid and incontinence waste is disposed of in the bins provided and located in the First Aid office.

### **Hygiene/Infection Control**

All First Aid staff are reminded to take precautions to avoid infection and must follow basic hygiene procedures. Staff have access to single-use disposable gloves and hand washing facilities, and should take care when dealing with blood or other body fluids and disposing of dressings or equipment.

## **REPORTING ACCIDENTS AND RECORD KEEPING**

Statutory Requirements: Under RIDDOR 1995 (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations) some accidents must be reported to the HSE.

A summary is as follows:

- injury to either the College's employees or people working on the premises;
- accidents resulting in death or major injury;
- accidents which prevent the injured person from working for more than three days.
- unconsciousness resulting in hospitalisation for 24 hour period.
- any injury.

The teacher who witnesses the accident completes the accident form on CPOMs.. The H&S officer brings the incident to the attention of the Headteacher who signs the

form. The H&S Officer ensures this is sent to RIDDOR electronically if required. Copies of the accident records are stored electronically on CPOMS and analysis of the accident reports by the H&S Officer provide statistics for:

- the identification of accident trends and possible areas for improvement in the control of health and safety risks;
- reference for future first-aid needs assessments;
- insurance and investigative purposes.
- risk assessment purposes and potentially staff training.

Student Accident Reports are kept until the student has reached the age of 21. For injuries to employees, visitors, contractors, members of the public over the age of 21, copies are kept for a period of three years. Under The Data Protection Act it is an offence to disclose personal information to a third party without the prior permission in writing of the individual or their parent/carer.

The HSE will be notified of fatal and major injuries without delay (eg by telephone) by the H&S officer . This would be followed up within ten days with a written report online to RIDDOR. Other accidents do not need immediate notification, but they would be reported to the HSE within ten days online .

An accident during an activity must be reported if it relates to:

- the organisation of the activity (eg the supervision of a field trip);
- lifts, machinery or substances;
- the condition of the premises;
- equipment, machinery or substances.

### **Accident Statistics**

Accident statistics can indicate the most common injuries, times, locations and activities at the College . These can be a useful tool in risk assessment, highlighting areas to concentrate on and tailor first-aid provision – such statistics are accessed by the First aid Officer, and are reviewed with the assistance of the H&S Officer on a termly basis leading to any appropriate action points.

### **Information to Parents/Next of Kin**

In an emergency, the First Aid Officer will contact an individual's next of kin as soon as possible. In fact all incidents requiring first-aid treatment are reported – this is crucial particularly when a child has sustained a bump to the head.

### **Taking Pupils to Hospital**

Parents or carers are always informed if their child is being taken to hospital for treatment. Depending on the injury or illness, arrangements are made for the parents to either take the child to hospital themselves or to meet the child at hospital. A member of staff will always accompany a student to the hospital unless parents/carers

are present . If under the unlikely circumstances a student needs emergency treatment and the parents cannot be contacted, then the hospital would, under normal situations hold full responsibility for authorising treatment. Follow up procedures include a member of staff staying with the student until a parent/carer is in attendance.

The First Aid officer makes a follow up call as soon as appropriate, but no later than 24 hours after the incident during normal working hours.



## **APPENDIX A**

Date

Dear Parent/Carer

### **Medication at College**

The Department for Education have issued some new guidance for supporting pupils at school with medical conditions.

I would be grateful if you could sign the attached form which concerns the administration of non-prescription 500mg Paracetamol tablets on site.

By signing the attached, you agree that your son/daughter/ward can be given over the counter, non-prescription 500mg Paracetamol, in College, following verbal consent from you by telephone. Please understand that a qualified first aider will contact you in the event of such a necessity, having assessed the situation.

Aspirin and ibuprofen should not be given to a child under 16 and will only be administered in school if prescribed by a medical practitioner.

All other medication which are required to be taken during the school day should be brought into College by a parent/carers where they will be asked to complete a form by a qualified First Aider giving permission. All medicines should be in date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage.

Yours sincerely

Ms M Sharratt  
Headteacher

**APPENDIX B**

**Parental Consent for Paracetamol**

**Administration of Paracetamol in College**

**Please complete in block letters and hand in to College Reception:**

St John Plessington Catholic College holds a supply of 500mg Paracetamol, which can be given to your child to relieve headache, toothache or period pain provided that you have completed and signed the parental consent form below.

You will also need to request and complete a different form whenever your child brings any kind of medicine into school. Administration of other medicine forms can be obtained from Reception.

Aspirin and ibuprofen should not be given to a child under 16 and will only be administered in school if prescribed by a medical practitioner.

I agree that my son/daughter/ward\* (*\*delete as applicable*) can be given over the counter, non-prescription 500mg Paracetamol, in school, following verbal consent from me by telephone.

I understand that a qualified first aider will contact me in the event of such a necessity, having assessed the situation.

I give my consent for my child to be given 1 / 2 \* Paracetamol tablets (*\*Delete as applicable to specify the maximum number of tablets that can be given at any one time*).

**Please complete in block letters and hand in to College Reception:**

Pupil Name ..... Form .....

Parent/Carer Signature ..... Date .....

Parent/Carer Name .....

Relationship to Pupil ..... Pupil Date of Birth .....

Pupil Address .....

Parent/Carer Address if different from child .....

Doctor's Name ..... Surgery Name & Address .....

I can be contacted at the following telephone numbers during school hours

Mobile ..... Work Tel .....

Home Tel .....

## APPENDIX C

### Parental Consent for College to Administer Medicines

**Please complete in block letters and hand back to the College First Aider:**

St John Plessington Catholic College will not give your child medicine unless you complete and sign this form. The information given below is, to the best of my knowledge, accurate and I give consent to SJP staff administering medicine in accordance with the SJP policy. I will inform SJP immediately, in writing, if there is any change in dosage/frequency of the medication or if the medication is stopped.

Today's date	
Date for Review	
Pupil Name	
Form	
Parent/Carer Name	
Parent/Carer Signature	
Relationship to Pupil	
Pupil Date of Birth	
Medical Condition/Illness	
<b>Medicine</b> Name/Type of medicine (as described on the container)	
Expiry date	
Dosage and method	
Timing	
Special precautions/other instructions	
Are there any side effects that the College needs to know about?	
Self-administration – Yes/No	
Procedures to take in an emergency	
<b>NB Medicines must be in the original container as dispensed by the pharmacy</b>	

Pupil Address	
Parent/Carer Address if different from child	
Doctor's Name	
Surgery Name & Address	
Parent/Carer Contact Telephone Numbers Mobile Tel Work Tel Home Tel	

## APPENDIX D

Date

Dear Salutation

### **Emergency Use of Salbutamol Inhalers in College Forename Surname - Reg**

From 1st October 2014 the Human Medicines (Amendment) (No. 2) Regulations 2014 allow schools to obtain, without a prescription, salbutamol inhalers and spacers, if they wish, for use in emergencies. This will be for any pupil diagnosed with asthma, or who has been prescribed an inhaler as reliever medication. The inhaler can be used if the pupil's own prescribed inhaler is not available (for example, because it is lost, broken, or empty).

It is very important to ensure your child always has their own salbutamol inhaler and spacer in school and the presence of the emergency inhaler does not replace the need to provide this.

Please note the following advice that we have been given: most children with well controlled asthma should rarely need to use salbutamol and can lead a full and active life. Children needing to use salbutamol more than two or three times per week, when they are well, are not as well controlled as they should be and have a higher risk of asthma attack. In this case it is important to see their GP to ensure they are on the right preventative treatment. This could prevent an unnecessary and traumatic trip to hospital for a child and potentially save their life.

The emergency salbutamol inhaler should only be used by children, for whom written parental consent for use of the emergency inhaler has been given, who have either been diagnosed with asthma and prescribed an inhaler, or who have been prescribed an inhaler as reliever medication for occasional symptoms or emergencies.

**In the unlikely event that your child has an asthma attack and they do not have an inhaler in school we need your written consent to administer an emergency inhaler.**

Please complete the attached reply slip and return it school.

## APPENDIX D Contd

Thank you for your continued support.

Yours sincerely

Ms M Sharratt  
Headteacher

✂ .....

St John Plessington Catholic College

**Reply slip to be returned to Reception**

**Emergency Use of Salbutamol Inhalers in College**

The emergency salbutamol inhaler should only be used by children, for whom written parental consent for use of the emergency inhaler has been given, who have either been diagnosed with asthma and prescribed an inhaler, or who have been prescribed an inhaler as reliever medication for occasional symptoms or emergencies.

**In the unlikely event that your child has an asthma attack and they do not have an inhaler in school we need your written consent to administer an emergency inhaler.**

I give permission that in the event of an emergency, and no inhaler being available, an emergency salbutamol inhaler can be used by my child in school.

Pupil Name ..... Form .....

Parent/Carer Signature ..... Date .....

Parent/Carer Name .....

## Individual Health Care Plans

Individual Health Care Plans may be written in conjunction with parents/carers and any professionals involved if a pupil has a complex medical condition which impacts on the school day. A plan may be deemed necessary if:

- Pupils need to take medicines during the school day
- Modifications are required in lessons
- Emergency protocols/procedures need to be in place

The plan will be developed with the child's best interests in mind to ensure that the school assesses and manages risks to the child's education, health and social wellbeing, and minimises disruption. The plans include the following types of information and are shared with all staff at SJP.

- the medical condition, its triggers, signs, symptoms and treatments;
  - the pupil's resulting needs, including medication (dose, side effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues, e.g. crowded corridors, travel time between lessons;
  - specific support for the pupil's educational, social and emotional needs – for example, how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons
  - the level of support needed (some children will be able to take responsibility for their own health needs) including in emergencies.
  - who will provide the support
  - arrangements for written permission for medication to be administered by a member of staff, or self-administered by the pupil during school hours;
  - separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the child can participate, e.g. risk assessments;
  - where confidentiality issues are raised by the parent/child, the designated individuals to be entrusted with information about the child's condition; and
  - what to do in an emergency, including whom to contact, and contingency arrangements.
- Roles and responsibilities

Supporting a child with a health care plan during school hours is not the sole responsibility of one person. At SJP we work co-operatively with all staff and any outside agencies involved, using professional advice to guide our protocols at all times.