



First Aid Policy

Last Reviewed	February 2020
Next Review Date	February 2022
Ratified by the Trustee Board	February 2021

HORSFORTH SCHOOL

First Aid Policy

1. Aim

The health and safety of all Horsforth School stakeholders (students, parents/carers, staff and visitors) is of the utmost importance. This policy is created with the aim of ensuring everyone is aware of the standard first aid procedures that will be followed in the event of any major or minor illness, accident or injury, and how it can assist in effective resolution of such incidents.

2. Context

The School recognises that under section 100 of the Children and Families Act 2014 it has an additional duty to make arrangements for supporting students at their school with medical conditions. This is done through individual health care plans, which are drawn up in consultation with health and social care professionals, students, parent/carer to ensure these needs are effectively supported and that no student is excluded from full access to education, including school trips, and PE on the grounds of a medical condition.

3. Linked Policies

Please read this policy in conjunction with the following policies/guides:

- Attendance Policy
- Education of Children with Medical Needs who Cannot Attend School
- Supporting Students with Medical Conditions

4. Evaluation

This policy will be evaluated annually by the Board of Trustees to ensure it is still fit for purpose.

5. Authors

This policy has been updated by CBR and TRH in January 2021.

6. Appendices

Procedures to support this policy are appended as follows:

Appendix 1	Parental Agreement for School to Administer Medicine
Appendix 2	Record of Medicine Administered to all Students
Appendix 3	First Aid/Sickness Record
Appendix 4	Horsforth School Accident/Incident Report Form

Roles and Responsibilities

a) The Trustee Board

The Trustees of Horsforth School hold overall responsibility for ensuring that the school has an up-to-date First Aid Policy, effective first aid provision, personnel and equipment in place and will ensure that arrangements are in place to support students with medical conditions. In so doing they will ensure that these children can access and enjoy the same opportunities at school as any other child. Trustees will also ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions.

b) The Headteacher

The Headteacher is responsible for ensuring the first aid provision is up to standard. Where this responsibility is delegated to another member of staff, the Head is responsible for ensuring that member of staff is adequately equipped, qualified and willing to carry out the role.

The Head (or nominee) will ensure that all individual healthcare plans are regularly reviewed, remain relevant and are kept up to date. The plans will be reviewed at least annually or earlier, if evidence is presented that the student's needs have changed. Healthcare plans will be developed with the child's best interests in mind and address any risks to a child's education, health and social wellbeing thus minimising disruption.

It is the responsibility of the Head for ensuring that all staff are aware of the policy for supporting students with medical conditions and understand their role in its implementation. The Head will also ensure that all staff who need to know are aware of the child's condition, that sufficient numbers of staff are trained and available to implement this policy in order to deliver all individual healthcare plans, including any contingencies and in emergency situations.

c) Director of HR

The Director of HR or her Deputy is responsible for ensuring that the first aid provision in school is up to standard and that any shortfalls in provision are identified and dealt with immediately.

d) First Aiders

The school has 19 first aiders, 3 of whom are Emergency First Aiders. All First Aiders receive updated training every 3 years and must ensure their certificates do not lapse. First Aiders are required to give immediate first aid to stakeholders of the school when required and to ensure that the emergency services are called when necessary. However, First Aiders are not paramedics or medical professionals.

The current school first aiders are:

Caroline Sharland-Ott Emergency First Aider	Mohammed Jamil Emergency First Aider	Viv Kennedy Emergency First Aider
Linda Squire	Lauren Robinson	Tracy Hartley
Emma Dowson	Ben Steele	Eileen Storey
Marieke Lockwood	Aimee Brown	Joe Fraser
Beth Hutchinson	Tom McLoughlin	Alasdair Barnard
Jade Jenkinson	Andrea Cathro	Susan Kitching
Isaac Endersby		

There will be at least one First Aider on the school site whenever students are present.

e) School staff

School staff who are not designated first aiders still have responsibility for first aid provision throughout school. All staff must be aware of this policy, the school's **Health and Safety Policy**, and basic first aid, and should:

- be familiar and up to date with the school's First Aid Policy and standard procedures;
- keep managers informed of any developments or changes that may impact on the school's first aid provision, including any incidents that have already occurred;
- ensure that all the correct provisions are assessed and in place before the start of any activity;
- ensure that activities in school are risk assessed in line with the school's Health and Safety Policy to reduce the risk of accident or injury;
- cooperate fully with the school in order to fulfil legal obligations;
- ensure that any equipment used is properly, cared for and in the proper working order, including first aid boxes around the school. Any defects should be immediately reported to the Leadership Team and should not be used;
- be aware of the needs of students with medical conditions that they teach;
- know what to do and respond accordingly when they become aware that a student with a medical condition needs help;
- attend to the needs of stakeholders and may be asked to provide support, including administering medicines to students with individual healthcare plans. Where this is the case, staff will receive sufficient and suitable training to achieve the necessary level of competency before taking on such responsibility;
- not be asked to administer prescription medicines or undertake healthcare procedures without appropriate training (updated to reflect any individual healthcare plans).

The SENDCO is responsible for ensuring that all staff members are fully briefed as to the needs of any student with individual healthcare plans if they are likely to encounter these students.

Volunteers at the school have the same responsibilities for health and safety as any other staff, and will be expected to be familiar with the school's health and safety policy and procedures.

f) Students

Students at the school are familiar with medical procedures and how to seek first aid. They are aware of who the school first aiders are. If unsure they should ask a member of staff. Students can help the school ensure first aid provision is effectively put into practice by:

- reporting any medical emergencies or incidents to a member of staff immediately;
- reporting anything hazardous to health and safety on or near the school site to a member of staff;
- taking care for their own safety and the safety of others. Students who put themselves, staff, or any other members of the school community or visitors in danger through reckless behaviour may be dealt with under the school's Positive Behaviour Policy;
- ensure staff members are aware of any health conditions or ailments that may require first aid assistance This is particularly important in circumstances where Students are likely to be travelling away from school premises, for example for a sports match or a school trip.

Where a Student has a health condition which requires an individual healthcare plan the Student will be involved wherever practicable in discussions requiring medical support and will be required to act in a way which is compliant with the plan.

All students are expected to demonstrate a positive awareness to the needs of those with medical conditions and be aware of their responsibility for informing a member of staff if a fellow student is unwell.

g) Parent/carers

Parent/carers can help the school to maintain an effective first aid provision by:

- Alerting the school to any ongoing or temporary medical conditions their child has that may require first aid. This is extremely important, and parent/carers are required to notify the school in writing of such circumstances;
- completing the Parental Agreement to Administer Medicine Form for any prescribed medicines that their child needs administering. Ensuring that the prescribed medicines are in date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage;
- carrying out any action which has been agreed as a part of the plan, e.g. provision of prescription medicines and equipment, ensuring that they or a nominated adult are contactable at all times;
- working with the school to instill a sense of first aid responsibility in their children. This means being alert of health and safety practicalities, and promoting safe behaviour at home;
- making the school aware of anything that they feel to be a hazard to health and safety on or near the school premises;
- familiarising themselves with this policy in order to understand the steps that will be taken if their child requires emergency first aid for any reason.

h) Visitors

Visitors to the school are expected to take care around school and have reasonable responsibility for the safety of themselves and other members of the school community. All visitors can request a copy of the First Aid Policy, as well as the school's Health and Safety policy.

7. **Equipment**

First aid boxes are situated in Reception. It is the responsibility of the first aiders to ensure that the first aid boxes are fully stocked at all times with items that are in date.

First aid boxes should be taken from the medical room and returned back to the same place. These should be signed out and in from the medical room.

There will be first aid boxes permanently kept on board school mini buses and coaches. These must be maintained by a First Aider and should be kept in good condition, ready for use at all times.

The School has a defibrillator on site to be used as required. This is located behind student reception. The device is checked weekly by a First Aider and batteries being replaced every 2 years. The following first aiders have been trained to use this device:

Viv Kennedy
Lauren Robinson
Ben Steele

8. **Confidentiality**

The school takes student privacy and confidentiality very seriously. First Aiders are responsible for sharing medical information with other staff on a need-to-know basis only.

All staff will be made aware of which students have access to asthma inhalers, EpiPens, injections, or similar medical equipment and for whom individual healthcare plans have been created.

9. After school events and lettings

As a school we are not responsible for providing first aid to lettings, after school or weekend events. It is the event leader's responsibility to ensure they have first aid provision during their event or letting.

10. Managing Medicine on School Premises

The school is only responsible for administering medicines when not to do so would be detrimental to the students' health or school attendance. The school requires parents/carers to notify the school of any side effects of any medication to be administered. The following is a key points guide regarding the school's policy on managing medicines in accordance with the statutory guidelines:

A record of all medication administered will be kept with dosages and times logged in each instance. This will also show who administered the dose and to whom.

Other than under exceptional circumstances where medication has been prescribed to a child without the parent/carer's knowledge, a student under the age of 16 may be given prescription or non-prescription medicines without written parental consent. In such an eventuality the school will encourage the young person to involve their parent/carers, but will respect their right to confidentiality.

No student under the age of 16 will be given medicine containing aspirin unless prescribed by a doctor. Where such medication is administered, the time of previous dosage and the maximum dosage will be checked prior to administering the medication and parent/carers will be informed that the medication has been administered.

Wherever clinically possible, the school requests that medicines should be prescribed in dose frequencies which enable them to be taken outside school hours.

The school will only accept prescribed medicines that are in-date, labelled, provided in the original container as dispensed by a pharmacist. They must include instructions for administration, dosage and storage. It is accepted that insulin will be provided in pen/pump form.

Medicines will be stored safely at all times but students will have immediate access to their own medication at all times and will be given the name of the key-holder in order for these to be accessed swiftly. Items such as inhalers, blood glucose meters and adrenaline pens should always be readily available and will not be locked away.

Where a child has been prescribed a controlled drug, this will be administered by a member of staff in accordance with the prescriber's instructions. Staff administering medicines should do so in accordance with the prescriber's instructions.

Parents will be asked to collect any medication which is no longer required or out of date to arrange for safe disposal.

Sharps boxes will always be used for the disposal of needles and other sharps.

The school recognises that a student who has been prescribed a controlled drug may legally carry it with them provided they are competent to administer it themselves, however, passing it to another child for use is an offence.

The school will keep a record of any controlled drugs that have been prescribed for students and these will be stored in a locked, non-portable, container, which will be accessible only to nominated staff and easily accessible in an emergency. A record will be kept of all dosages administered and the amount held in school.

11. Illnesses

If a student falls ill during a lesson they should immediately tell the member of staff in charge, who will assess the situation and decide the best course of action. The student will be accompanied to the medical room if appropriate.

The First aider will administer appropriate first aid, and the parent/carer will be contacted and asked to collect their child where the child is too unwell to complete the rest of the school day. If a parent/carer is unable to collect their child, they can give permission for their child to go home independently or the child will remain in the medical room until the parent/carer collects them at the end of the school day or another family member collects them.

Where a child who is sent home early is still too unwell to attend school the next day, parent/carer should follow the procedure outlined under attendance procedure. The school aims to reduce the risk of a spread of infection or illness and asks parent/carer to keep their child at home where there is risk. Staff will work with students who have missed classes to ensure that they are able to catch up on all the classwork that has been done in their absence.

If a member of staff is unwell, he or she may seek advice from a First Aider, who will notify the Director of HR or her Deputy. If a member of teaching staff is unwell during the school day they should ensure that the Director of HR or her Deputy is aware in order for any cover to be arranged. The Director of HR or her Deputy will also ensure the correct protocols are followed regarding contacting next of kin if required.

12. Reporting continued absence due to illness

Most cases of absence due to illness are short term, but parents/carers should make a phone call to alert the school on the first day/each day of absence.

When a child returns to school they should bring a note from their parent/carer explaining the absence, for the school records.

For prolonged absence due to illness, parents/carers may be asked to provide the school with medical evidence such as a note from the child's doctor, an appointment card, or a prescription.

13. Procedure in the event of an accident or injury

In the case of an accident or injury, the member of staff in charge should be informed immediately. They will assess the situation and determine whether or not emergency services

need to be called. A First Aider should be called for as soon as possible and should be informed of the injury, even if their assistance is not required.

15 Emergency services

An ambulance should always be called by staff in the following circumstances:

- a significant head injury
- fitting, unconsciousness, or concussion
- difficulty in breathing and/or chest pains
- a severe allergic reaction
- a severe loss of blood
- severe burns or scalds
- the possibility of a serious fracture

First aiders are not paramedics, and if the first aider feels they cannot adequately deal with an injury they will arrange for access to appropriate medical care without delay.

Where an ambulance is called, the member of staff in charge should ensure that access to the school site is unrestricted and that the casualty can be easily accessed by emergency services when they arrive.

Students who are taken to hospital in an ambulance will be accompanied by a member of staff unless a parent/carer is able to reach the school site in time to accompany their child. Ambulances will not be delayed waiting for parents/carers to arrive at the school. Parents/carers will be informed immediately of any medical emergency along with details of the hospital to go to.

All accidents and injuries must be reported.

14. Procedure in the event of contact with blood or other bodily fluid

The school understands the importance of ensuring risk of cross-contamination is kept to an absolute minimum, and First Aiders undertake training which outlines best practice. It is important that First Aiders at the scene of an accident or injury take the following precautions to avoid risk of infection to themselves and others:

- cover any cuts and grazes on their own skin with a waterproof dressing;
- wear suitable disposable gloves when dealing with blood or other bodily fluids;
- wash hands after every procedure.

When a First Aider suspects they or anyone else may have been contaminated with blood and/or other bodily fluids, the following actions should be taken without delay:

- wash splashes off skin with soap and running water;
- wash splashes out of eyes with tap water or an eye wash bottle;
- wash splashes out of nose or mouth with tap water, taking care not to swallow the water;
- record details of the contamination;
- Report the incident to the Director of HR or her Deputy and take medical advice, if appropriate. The Facilities Team will then make arrangements for the proper containment, clear-up and cleansing of the spillage site.

15. First aid in PE and off-site provision

The risk of injury is increased during increased physical activity. It is the responsibility of the Head of PE to ensure that first aid boxes in the department are kept fully stocked. All staff in the department must be aware of where these boxes are stored, what should be in them, and appropriate use.

First aid boxes may be taken from the medical room provided they are returned to the same place. The first aid boxes within the school's PE Department are for use in school only and should not be removed from site in case of an emergency.

It is good practice for staff who are in charge of away fixtures and off-site activities to check with the host school that there is adequate first aid provision in place and risk assessments should be carried out. If an accident or injury does occur, first aid should be sought from the host school's first aiders. If the student must visit the host-school's medical room or be given first aid treatment elsewhere, a member of Horsforth School will be with them at all times. Where necessary in an emergency situation, students should be taken to the nearest hospital Accident and Emergency Department.

Injuries that occur off-site should be reported to the Director of HR upon return to the school, who will provide first aid follow-up care where necessary.

Where students have individual healthcare plans, sufficient active support will be provided to permit them to take part within sporting and off-site activities as fully as possible. Students will be encouraged to participate according to their own abilities and reasonable adjustments will be made ensure this is practicable. A separate risk assessment will be carried out as appropriate prior to off-site activities and consultation will take place with appropriate parties during this process.

16. Reporting accidents, emergencies, and first aid administration

Any first aider who has administered first aid or medication should log this in the first aid/sickness record or the record of medicine administered to pupils. A separate **incident report form should also be completed for any accidents or incidents (appendix 4)**. These are stored in reception and are used to record **all** incidents, both major and minor. Each page is used for a separate incident and stored securely according to the Data Protection Act 1998. All members of staff supervising at the time of the incident should make a separate report. The date, time and place, what happened, actions taken, injuries or a brief outline of the illness, and first aid administered must be recorded.

Accidents that fall under health and safety issues should also be reported in line with procedures outlined in the school **Health and Safety Policy**.

All injuries that have occurred, and first aid that has been carried out both on and off-site should be reported to a First Aider, no matter how minor the injury. The Director of HR is responsible for ensuring that all incident report forms are completed accurately, and stored appropriately. A written record must also be kept of all medicines administered to children, including those prescribed for students with individual healthcare plans.

First Aiders in consultation with the Pastoral Team are responsible for ensuring parents/carers are kept up to date as is appropriate regarding the health of their child in school, injuries that they

have sustained, and medical treatment received. In an emergency situation or in the case of a serious injury, parents/carers will be informed as soon as is practicably possible.

17. Serious incidents

Serious incidents are monitored by the Director of HR or her deputy. Serious incidents will also be recorded, and reviewed by senior leaders. The Headteacher will review cases of serious incidents and determine what, if any, steps are taken in order to ensure that the same accident does not reoccur. The types of minor accidents reported (no personal details discussed) will be reviewed at Leadership Team Meetings to determine any accident trends and address how these can be avoided in the future.

18. Reporting to the HSE

The school is legally required to report certain injuries, diseases and dangerous occurrences to the HSE. Where there is a death or major injury this should be reported by calling the Incident Contact Centre (ICC) on **0845 300 9923** (opening hours Monday to Friday 8.30am to 5pm). All other reportable injuries should be reported online [<http://www.hse.gov.uk/riddor/report.htm>].

It is the responsibility of the Headteacher/Director of HR to report to the HSE when necessary. Incidents that need to be reported include but are not limited to:

a) Staff

- work related accidents resulting in death or major injury (including as a result of physical violence) must be reported immediately (major injury examples: dislocation of hip, knee or shoulder; amputation; loss of sight; fracture other than to fingers, toes or thumbs);
- work related accidents that prevent the injured member of staff from continuing to work for more than 7 days must be reported within 15 days (note that even though over-3-day injuries do not need to be reported, a record must still be retained);
- notification from a doctor of cases of work related diseases (for example: certain poisonings; lung diseases; infections such as tuberculosis or hepatitis; occupational cancer)
- certain dangerous occurrences (near misses – reportable examples: bursting of closed pipes; electrical short circuit causing fire; accidental release of any substances that may cause injury to health).

b) Students

- accidents which result in the death of school stakeholder that arose out of or in connection with the school's activities;
- accidents which result in an injury that arose out of or in connection with the school's activities and where the person is taken from the scene of the accident to hospital.

19. Incident investigations

An investigation may be launched by external authorities in the case of accidents or incidents that fall under Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR). Accident reports will be reviewed and witnesses may be interviewed.

The Leadership Team or Trustees may decide to conduct internal investigations into less serious incidents to ensure that policy and procedure is being used correctly, effectively, and that future incidents of a similar nature can be avoided.



Appendix I
Parental Agreement for School to Administer Medicine

Please note: Horsforth School will not give your child medicine unless you complete and sign this form

Name of child	
Date of birth	
Form	

Medicine

Name/type of medicine <i>(as described on the container)</i>	
Expiry date	
Dosage and method	
Timing	
Special precautions/other instructions	
Are there any side effects that the school needs to know about?	
Self-administration – y/n	
Procedures to take in an emergency	

NB: Medicines must be in the original container as dispensed by the pharmacy

Contact Details

Name	
Daytime telephone no.	
Relationship to child	
Address	
I understand that I must deliver the medicine personally to	[agreed member of staff]

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school staff administering medicine in accordance with the school policy. I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature(s) _____

Date _____

Appendix 4

PART A – ABOUT THE PERSON WHO HAD THE ACCIDENT

Full Name:	Department (if applicable)
Job Title:	Other (pupil, member of public)

Home address (inc postcode):

Home Telephone No:		Mobile No:	
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PART B – ABOUT THE ACCIDENT/INCIDENT

Date of accident/incident		Time (use 24hr format)	
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Where did the accident/incident occur? Please state room of place	
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Address and location of accident if it did NOT take place on school premises

How did the accident/incident happen? Give cause if you can
<i>Continue on a separate sheet if necessary</i>

If the person suffered any injury say what the injury was (i.e. cut, graze, strain and what part (s) of the body were injured?)

Was the person absent from work/school as a result of the accident?

What was the accident/incident? Please tick only one	
A fatality	
A major injury or condition i.e. fracture or loss of consciousness	
An injury to a pupil or member of the public where they had to be taken from the scene of the accident to hospital for treatment	
A minor injury or condition	
A violent incident (physical assault, verbal abuse, threatening behaviour)	
A near miss	

PART C – ACTIONS TO PREVENT A RECURRENCE

Risk Assessment completed or reviewed?

YES

NO

Please state action taken to prevent recurrence

PART D – ABOUT YOU, THE PERSON COMPLETING THE FORM

NAME (print)

Address (inc
postcode)

Designation

Signature:

Date:

Manager
/Headteacher
Signature:

Date:

Please return completed form to Lauren Robinson, HR Director

FOR OFFICE USE ONLY

Date received:

Data entry date:

Data entry by
(initial)

RIDDOR
reportable?

YES/NO

RIDDOR reference