



# **First Aid & Medical Treatment Policy**

## 1. Aim

First aid must be provided to any person to whom we owe a duty of care if they are injured or become ill while on our premises or involved in an off-site activity. There must be sufficient, suitably qualified first aiders and adequate first aid facilities to ensure that assistance will be provided quickly to casualties and a call made to the emergency services when appropriate.

The Trust ensures that the insurance arrangements provide full cover for claims arising from actions of staff acting within the scope of their employment and that there is adequate and appropriate equipment and facilities for providing first aid in the workplace.

Nominated Member of Staff: Kjesten Cullimore  
Site Manager: Sharon Roberds

The school has;

- a number of suitably stocked first-aid containers;
- qualified personnel to administer first aid as required, both on and off-site;
- information for employees on first-aid arrangements.

First aid provision is available at all times while people are on the school premises and also off the premises whilst on school visits.

## 2. Responsibilities

### The Employer

Stour Valley Educational Trust Ltd is the employer for Stour Valley Community School. Health and Safety legislation places duties on employers for the health and safety of their employees and anyone else on the premises. In the school this includes responsibility for all staff, students and visitors.

The employer is responsible for making sure that the school has a Health and Safety Policy. The following arrangements have been put in place as part of this requirement;

- The school ensures that the minimum statutory number of trained first aiders are available on site. The HSE recommends that for low hazard workplaces, with more than 50 people, at least 1 first aider trained in FAW for every 100 or part thereof.
- First aid equipment is available in the Medical Room, PE, Science, Technology.
- Insurance arrangements, reviewed annually by the Shared Services Committee, ensure there is an appropriate level of cover for claims arising from actions of staff acting within the scope of their employment.

### The Governing Body

The Governing Body has overall responsibility for health and safety matters within the school, which on a day-to-day basis are managed by the Site Manager.

### The Headteacher

The Headteacher is responsible for putting the Governing Body's policy into practice and for developing detailed procedures.

### School Staff

A database of students with pre-existing or known medical conditions is available for all staff to view on SIMS, the school's electronic management system. Students with more severe medical conditions have a SVCS Healthcare Plan which is displayed in the staffroom.

Teachers' conditions of employment do not include giving first aid, although any member of staff may volunteer to undertake these tasks. Staff in charge of students are expected to use their best endeavours at all times, particularly in emergencies, to secure the welfare of the students at the school in the same way that parents might be expected to act towards their children. In general, the consequences of taking no action are likely to be more serious than those trying to assist in an emergency.

- Staff who lead curriculum areas are responsible for the preparation of risk assessments for their areas.
- The school uses CLEAPSS guidelines when drawing up risk assessments for Science, Design Technology, PE and other specialist subject teaching areas.

### **First Aiders**

The relevant first aider is responsible for keeping a record of first aid related incidents that occur within the school. A central record of first aid treatment, given by a first aider, is held in reception. The school reception team is responsible for checking the first aid containers are stocked and re-stocked as necessary. Extra stock is held in the school.

First Aider's complete a training course approved by the Health and Safety Executive.

Within the school, the main duties of a first aider are to;

- give immediate help to casualties with common injuries or illness and those arising from specific hazards at the school;
- when necessary, ensure that an ambulance or other professional medical help is called. All staff are able to request an ambulance or other professional medical help.

Examples of when an ambulance would be called include:

- loss of consciousness
- a sudden confused state
- fits that are not stopping
- chest pain
- breathing difficulties
- severe bleeding that cannot be stopped
- severe allergic reactions (anaphylaxis)
- severe burns or scalds
- heart attack
- stroke
- severe injury or taken an overdose
- major trauma (road accident, stabbing, shooting, fall from height, serious head injury)

(NHS Advice February 2022)

Calling 999 should not be delayed, allowing the emergency services to decide the appropriate further course of action, based on the information they have been given.

If you're unsure whether to call an ambulance, dial 111 and seek urgent medical help and advice.

### 3. First Aid - Needs and Expectations

The school provides adequate and appropriate equipment, facilities and qualified first aid personnel.

During the COVID-19 pandemic, school's COVID-19 Risk Assessment must be followed regarding application of First Aid and Personal Protective Equipment (PPE) requirements.

#### **Reassessment of First Aid Provision**

The Lead First Aider reviews the school's first aid needs on an annual basis, and particularly after any changes, to ensure the provision is adequate.

#### **During the COVID-19 pandemic – guidance from HSE.gov.uk (updated 01.02.22)**

Although the UK Government has now removed social distancing in most workplace situations, first aiders should still consider the precautions set out in this guidance to reduce the risk of COVID-19 infection.

Try to assist at a safe distance from the casualty as much as you can. Minimise the time you share a breathing zone.

Although treating the casualty properly should be your first concern, you can tell them to do things for you if they are capable.

Remember the 3P model – preserve life, prevent worsening, promote recovery.

#### **Annual refresher training**

If first aiders are unable to access annual refresher training face to face during the coronavirus (COVID-19) pandemic, HSE supports the use of online refresher training to keep their skills up to date.

HSE still strongly recommends that the practical elements of actual FAW, EFAW and requalification courses are delivered face to face, so that competency of the student can be properly assessed.

#### **Interrupted first aid training**

If because of coronavirus you cannot complete training for your first aid qualification within the usual timeframe, training can restart at a later date as long as:

- a full recap of training delivered before the interruption is done before moving onto undelivered modules
- the awarding body is content that you can show:
  - a full understanding of all aspects of the course content
  - the knowledge required and competencies at the end of the training

### **Selection of First Aiders**

When selecting first aiders, the Lead First Aider considers the individual's;

- job role, along with departmental requirements;
- reliability and communication skills;
- aptitude and ability to absorb new knowledge and learn new skills;
- ability to cope with stressful and physically demanding emergency procedures;
- normal duties; a first aider must be able to leave to go immediately to an emergency.

### **Providing Information**

The school informs all members of staff of the first aid arrangements through the Staff Handbook. First aid boxes are located in the following places;

- Medical Room
- Physical Education Department
- Science Department
- Technology Department
- Spare mobile kits for school trips (by request from the Finance Office)
- School mini-bus

A central first aid record folder is located in reception.

Evacuation chairs are situated at either end of the upstairs corridor.

### **Insurance**

In the event of a claim alleging negligence by a member of the school staff, action is likely to be taken against the employer rather than the employee. SVCS has insurance arrangements to provide full cover for claims arising from actions of staff acting within the scope of their employment.

### **Risk Assessment of First Aid Needs**

The school will include staff, students, and visitors when carrying out risk assessments for first aid needs. Staff will liaise with the SENDCo in the preparation of risk assessments for students with physical or learning disabilities.

During the COVID-19 pandemic, school's COVID-19 Risk Assessment must be followed regarding application of First Aid and Personal Protective Equipment (PPE) requirements.

### **Specific Needs**

Students with special health needs or disabilities have detailed plans created in consultation with parents through SEND Reviews or SVCS Healthcare Plans. Details are provided to staff on a medical notice board and also stored electronically.

### **Accident Statistics**

Accident statistics indicate all injuries, times, locations and activities. It is the responsibility of the Site Manager to keep the accident statistics. These are reported regularly to the school's Resources Committee and Trust Resources Committee.

### **First Aid Personnel Requirement**

The Lead First Aider considers the likely risks to students, employees and visitors when deciding on the numbers of first aid personnel. HSE Guidance (2019) on numbers of first aid personnel suggests that lower risk places of work should have 1 first aider per 100 people. SVCS has approximately 600 students and 60 staff with 15 staff trained in Emergency First Aid at Work, and 8 staff trained in First Aid at Work. This provides adequate cover before school, after school, during break and lunch times, for absence, school visits and sporting activities. First aid at work certificates are valid for three years. Refresher training and retesting is arranged before certificates expire.

**First Aid & Medical Treatment Policy**

Date approved: **March 2022**

Next review date: **March 2023**

## 4. Specific Health Conditions

### **Asthma Management and Inhaler Administration**

Asthma is the most common chronic condition affecting children. Asthma is a serious and potentially life threatening respiratory condition which must be treated promptly and appropriately. Students diagnosed with asthma will be prescribed a 'reliever' inhaler by their GP (commonly Salbutamol, trade name is Ventolin) for use during an asthma attack or exacerbation of their symptoms. See SVET Asthma Policy for further details.

### **EpiPen Management & Administration**

Children (and adults) diagnosed as being at risk of anaphylaxis are prescribed adrenaline in an auto injector which is commonly known as an EpiPen. Adrenaline given through an EpiPen to the outer thigh muscle is the most effective treatment for anaphylaxis, as when injected it rapidly reverses the effects of a severe allergic reaction. It is a single use, preloaded, automatic injection and is designed to be used as a first aid device by people without formal medical training.

- If a student has been prescribed an EpiPen, a minimum of two EpiPens must be provided by the parent to the school.
- EpiPens are stored separately to other medication, in personalised boxes, in an unlocked cupboard in the Medical Room for quick access.
- Each EpiPen is clearly labelled with the student's name.
- All staff know where the EpiPens are located.
- On school visits the First Aider ensures all EpiPens are collected.
- Depending upon the speed of past reactions it may be appropriate for a student to have their EpiPen in their bag for outside use.

It is the parent/carer's responsibility to supply the student's EpiPen to the school and to replace it before it expires. On a regular basis a first aider checks the EpiPens to ensure they are in date. When nearing their expiry date, reception staff contact the parents/carers to replace the EpiPen.

### **Head Injuries**

Where any student has sustained a head injury, the parents/carers will be notified by telephone and a head injury letter will be completed by the First Aider dealing with the incident. The incident will be recorded in the accident book and on SIMS.

### **Children with Special Medical Conditions**

The school should be made aware of children who have allergies or that require any special medical attention. In these cases a SVCS Healthcare Plan should be completed by parents. Children with life-long conditions, such as diabetes, muscular dystrophy or cerebral palsy will have a named member of staff as a link person in school.

## 5. First Aid Materials, Equipment and Facilities

The school's first aid equipment is clearly labelled and easily accessible. All first aid containers are marked with a white cross on a green background.

The school has a defibrillator installed which is kept in the reception area. Staff have had training on how to use the machine, although the machine gives full audible instructions in the event it is required.

### **Travelling First Aid Containers**

Before undertaking any off-site activities, the Educational Visits Co-ordinator assesses what first aid provision is required.

### **Public Service Vehicles**

Transport regulations require that all minibuses and public service vehicles used either as an express carriage or contract carriage have on a board a first aid container.

### **First Aid Accommodation**

The school medical room, which provides suitable and sufficient accommodation, is situated next to reception.

### **Hygiene/Infection Control**

First aiders follow their training and maintain good standards of infection control. Whenever small amounts of body fluids have to be cleaned up, disposable plastic gloves are worn and disposable paper towels and a detergent solution is used to absorb fluids and clean surfaces. These items are disposed of in black plastic bin bags, tied up and placed directly into waste bins with other inert waste. Sharps are disposed of in yellow sharps containers, or are managed directly by the student in line with their own management techniques.

### **Reporting Accidents and Record Keeping**

Under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR) the following accidents will be reported to the HSE, when they result from a work-related accident (including acts of physical violence):

- **The death of any person**
- **Specified Injuries** to workers (Regulation 4)
- Injuries to workers which result in their **incapacitation for more than 7 days**
- Injuries to non-workers which result in them **being taken directly to hospital for treatment**, or specified injuries to non-workers which occur on hospital premises.
- **Occupational diseases** likely to have been caused or made worse by their work (Regulations 8 & 9)
- **Dangerous occurrences** which fall into one of 27 specific categories
- **Gas incidents** unsafe gas appliances via online form if applicable

### **The School's Central Record**

The school keeps a record of any first aid treatment given by first aiders on paper records and electronically on SIMS.

### **Prescribed Medicines**

Medicines should only be taken in school when essential; that is where it would be detrimental to a child's health if the medicine were not administered during the school day. The school will only accept medicines that have prescribed by a doctor, dentist, nurse prescriber or pharmacist prescriber. Medicines should always be provided in original container as dispensed by pharmacist and include prescriber's instructions for administration. The school will not accept medicines that have been taken out of the container as originally dispensed nor make any changes to dosages on parental instructions.

### **Non-Prescribed Medicines**

Staff will not give non-prescribed medicine to a child unless there is a specific prior written permission from parents.

### **Controlled Drugs**

All controlled drugs are to be kept locked in a non-portable container and only first aiders have access to the locked medical cabinet.

### **Refusing Medicine**

If a child refuses to take medicine, staff will not force them to do so but will note this in the records.

## **6. Monitoring**

This policy will be reviewed annually or before this as appropriate.

Ratified by Governing Body	SVCS LGB
Date	15 March 2022

**Appendix 1 (side 1 of page)**



## Head Injury Report

Date: \_\_\_\_\_

Student name: \_\_\_\_\_

He/she bumped their head at \_\_\_\_\_ a.m./p.m and information about the injury is as follows:

- Hit by a ball
- Hit head on bars/equipment/ground
- Hit head on/by another student
- Hit head on desk/table
- Enroute to class
- During break/lunchtime
- During P.E. class
- In the classroom

Your child was observed for \_\_\_\_\_ minutes in the Medical Room and was alert and oriented to time, place and person

Ice pack applied to area     Eyes checked and rechecked     Child felt well enough to return to class

Any comments: \_\_\_\_\_

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## Appendix 1 (side 2 of page)

Dear Parent/Carer

All head injuries should be watched closely for at least 24 hours. You may allow your child to sleep, but check your child periodically that first night. He/she should wake up, walk and talk normally. After 48 hours, treat your child normally again.

Contact NHS 111 or your family doctor immediately if your child:

- ◆ Complains of a headache that continues or increases in severity
- ◆ Does not seem to respond or does not act as he or she usually does. Your child should be aware of the day and date, etc.
- ◆ Complains of a strange tastes in his/her mouth or you see a fluid or blood that continually drains from his/her ears or nose
- ◆ Vomits more than two or three times
- ◆ Has difficulty in seeing, sees double, unusual movements of the eyes or if one pupil becomes larger than the other
- ◆ Is dizzy and difficulty in walking
- ◆ Complains of weakness or is unable to move one or both of his/her arms or legs
- ◆ Has twitching movements of the body or convulsions
- ◆ Becomes very sleepy and cannot easily be awakened NOTE: it is not necessary to keep the child awake during regular sleep hours, but **it is advisable to check the child every two hours**
- ◆ Before giving your child any medication for pain, please contact your doctor

A few children will get sick from a head injury 7 to 10 days after the accident. Please keep this slip and show it to your doctor if any of the above things happen to your child at any time during the next 10 days. If your child has received two or more serious head injuries within the last year, please contact your doctor.

Yours faithfully

Stour Valley Community School  
Trained First Aider

**Appendix 2**



**Permission to Give Medicine.**

**Please hand to Reception with the medication.**

Name of student: ..... Date of Birth: .....

Name of medicine: .....

I give permission for a member of school staff to give this medicine, as stated on the label.

Signed: ..... Date: .....

Print Name: .....