



Reevy Hill Primary School

Policy Documentation

First Aid

OUR VISION

To ensure that the school complies with the statutory provision for first aid, so that all members of the School have adequate protection.

Responsibility for Review: Business Manager

Relationship to other Policies	Date	Status
<ul style="list-style-type: none">• None	March 2016	Approval
	March 2019	Review

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Statement of Intent

The governing body of Reevy Hill Primary School acknowledge and accept its responsibilities under the Health and Safety (First Aid) Regulations 1981, to provide equipment and facilities as are adequate and appropriate for enabling first-aid to be rendered to employees, pupils and visitors in the school.

Our First Aid Policy will be successfully implemented through the delivery of the following aims and objectives:

- Undertaking a First Aid Needs Assessment to determine the requirements for the provision of first-aid within the school premises.
- Ensuring that there are suitable facilities and equipment to administer first-aid, where necessary.
- Ensuring that there is a sufficient number of staff trained in first-aid on duty at all times.
- Ensuring that the requirements of this policy are clear and appropriately circulated, including the location of first-aid equipment, facilities and personnel.

The appointed person, responsible for first-aid, is: School Business Manager

Where the appointed person is unavailable, the following person(s) will deputise in his/her stead:
Headteacher/Deputy Headteacher

Signed by

_____ **Headteacher**

Date: _____

_____ **Chair of Governors**

Date: _____

Next review date: March 2019

1. Legal framework

1.1. This Policy will have consideration for, and be in compliance with, the following legislation and regulations:

- Health and Safety at Work Act 1974.
- Health and Safety (First Aid) Regulations 1981.
- The Management of Health and Safety at Work Regulations 1992.
- The Education (School Premises) Regulations 1999.
- Health and Safety (The Reporting of Injuries, Diseases and Dangerous Occurrences (RIDDOR)) Regulations 2013.

1.2. This Policy will also have regard to the following statutory and non-statutory guidance:

- First Aid for Schools (August, 2000).
- Advice on Standards for School Premises (May, 2013).
- Incident reporting in schools (accidents, diseases and dangerous occurrences) (October, 2013).

2. Risk assessment

2.2. The Business Manager will ensure that an annual risk assessment of first-aid needs is undertaken, appropriate to the circumstances of the school.

2.3. Where a minimum number of trained first-aiders is set, this will be monitored to ensure that the needs identified in the risk assessment are met.

3. Facilities

3.2. First-aid will be administered in a room that meets the requirements of the DfE guidance. Specifically, to:

- Be large enough to hold the necessary equipment.
- Have washable surfaces and adequate heating, ventilation and lighting.
- Be kept clean and tidy at all times.
- Be positioned as near as possible to a point of access for transport to hospital.
- Display a notice on the door advising of the names, locations and telephone numbers of first-aiders.
- Have a sink with hot and cold water, if possible.
- Have drinking water and disposable cups.
- Have soap and paper towels.
- Have a suitable container with disposable waste bags.

3.3. The Creative Zone is the school's designated medical room.

4. Fixed and portable first-aid containers

- 4.2. First-aid containers are identified by a white cross on a green background.
- 4.3. The school has a first-aid cabinet, which can be found in the creative zone. This cabinet contains a sufficient number of suitable provisions to enable the administration of first-aid.
- 4.4. The school has two travelling first-aid containers for use during school trips and off-site visits, which are stored in the main office along with a separate first aid container in the Nursery Classroom's kitchen.
- 4.5. No medicinal substances or materials are permitted within a first-aid container.
- 4.6. Blunt-ended stainless steel scissors should be kept in the container in case clothing needs to be cut away prior to treatment.
- 4.7. Inventories are kept of all first-aid supplies including expiry dates. Full lists can be found in each first-aid container.

Fixed

- 4.8. Fixed first aid-containers will contain, at a minimum:
 - 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.

Portable

- 4.9. Portable first-aid boxes will contain, at a minimum:
 - A leaflet giving general advice on first aid.
 - Six individually wrapped sterile adhesive dressings.
 - One large (approximately 18cm x 18cm) sterile unmedicated wound dressing.
 - Two triangular bandages.
 - Two safety pins.
 - Individually wrapped moist cleaning wipes.
 - One pair of disposable gloves.

Minibuses

- 4.10. The school minibus will have on board a first-aid container with the following items:
 - Ten antiseptic wipes, foil packaged.
 - One conforming disposable bandage (not less than 7.5cm wide).
 - Two triangular bandages.

- One packet of 24 assorted adhesive dressings.
- Three large (no less than 15cm x 15cm) sterile unmedicated ambulance dressings.
- Two sterile eye pads, with attachments.
- Twelve assorted safety pins.
- One pair of rust free blunt-ended scissors.

4.11. First-aid containers will be:

- Prominently marked as a first-aid container.
- Maintained in a good condition.
- Suitable for the purpose of keeping the items referred to above in good condition.
- Readily available for use.

5. Selection of first-aiders

5.2. When selecting first-aiders, the Business Manager should consider an individual's:

- 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 immediately in an emergency.

5.3. Unless first-aid cover is part of a staff member's contract of employment, people who agree to become first-aiders should do so on a voluntary basis.

6. Training

6.2. The Business Manager is responsible for organising first-aid training.

6.3. New staff members are offered first-aid training as part of their induction training.

6.4. Lunch time supervisors will also undertake first-aid training.

6.5. The school keeps a record of who is trained in first-aid and the date that their certificates expire.

6.6. First-aiders will be re-trained within 3 months prior to the end of the third year, when their first-aid certificates expire.

6.7. All staff should ensure that they have read the school's First Aid Policy and sign the training record to say they have done this.

7. Roles and responsibilities

7.2. The main duties of the appointed person are to:

- Take charge of first-aid arrangements, including looking after equipment and calling the emergency services, where necessary.

- Bear in mind that they are not first-aiders. They should not give first-aid treatment for which they have not been trained, although it is good practice to ensure that they have emergency first-aid/refresher training, including:
 - What to do in an emergency.
 - Cardiopulmonary resuscitation.
 - First-aid for the unconscious casualty.
 - First-aid for the wounded or bleeding.
- Liaise with the Business Manager, where necessary, to facilitate the replacement of out-of-stock or expired first-aid material or equipment.
- Remain on-site throughout the school day.

7.3. The main duties of first-aiders are to:

- Complete a training course approved by the Health and Safety Executive (HSE).
- Give immediate help to casualties with common injuries and those arising from specific hazards at the school.
- Ensure that an ambulance or other professional medical help is called, where appropriate.

8. Reporting incidents and record keeping

Reporting

8.1. The Business Manager will ensure that procedures are in place to report any major or fatal injuries without delay (e.g. by telephone), as required by RIDDOR. Other reportable injuries will be reported within 10 days.

Record keeping

8.2. The Business Manager will ensure that records are kept of any reportable death, specified injury, disease or dangerous occurrence that requires reporting under RIDDOR.

8.3. Reportable injuries include:

- Fractures, other than to fingers, thumbs and toes.
- Amputations.
- Any injury likely to lead to permanent loss of sight or reduction in sight.
- Any crush injury to the head or torso causing damage to the brain or internal organs.
- Serious burns (including scalding), which cover more than 10 percent of the body or cause significant damage to the eyes, respiratory system or other vital organs.
- Any scalping requiring hospital treatment.
- 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.

8.4. Reportable occupational diseases include:

- Carpal tunnel syndrome.
- Severe cramp of the hand or forearm.
- Occupational dermatitis e.g. from work involving strong acids or alkali, including domestic bleach.
- Hand-arm vibration syndrome.
- Occupational asthma e.g. from wood dust or soldering.
- Tendonitis or tenosynovitis of the hand or forearm.
- Any occupational cancer.
- Any disease attributed to an occupational exposure to a biological agent.

8.5. Work-related stress and stress-related illnesses (including post-traumatic stress disorder) are not reportable under RIDDOR, as a reportable injury has to have resulted from a work-related incident.

8.6. Dangerous occurrences include:

- 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.

8.7. Injuries to pupils and visitors who are involved in an accident at school, or an activity organised by the school are only reportable if the accident results in:

- The death of a person which arose out of or in connection with a work-related activity.
- An injury that arose out of or in connection with a work-related activity and the person is taken directly from the scene of the accident to hospital for treatment (examinations and diagnostic tests do not constitute treatment).

8.8. Records will be also be kept of all occupational injuries where a staff member is away from work or incapacitated for more than three consecutive days, although this doesn't need to be reported.

8.9. The school does not have to report injuries where the pupil remains at school, is taken home or is simply absent from school for a number of days.

8.10. First-aiders will ensure that they comply with the reporting procedures of the school after administering treatment, including recording:

- The date, time and place of the incident.
- The name (and class) of the injured or ill person.

- Details of the injury/illness and what first aid was given.
- What happened to the person immediately afterwards? (E.g. went home, resumed normal duties, went back to class, went to hospital).
- Name and signature of the first aider or person dealing with the incident.
- For injuries to the head, a phone call home will be made to parents informing them.
- All completed first aid slips must be taken to the class teacher and given out to parents at the end of the day.

8.11. Records will be maintained for no less than three years after the incident.

8.12. The accident reporting books are kept in the creative zone for pupils and on teachershare drive/accident report forms for employees, visitors, agency staff, contractors etc.

9. Circulation

9.1. The Business Manager will inform all staff, including those with reading and language difficulties, of the first-aid arrangements. This should include:

- The location of the first-aid equipment, facilities and personnel.
- The procedures for monitoring and reviewing the school's first-aid needs.

9.2. Copies of this policy will be made available on the notice boards of each school building, in the staff room, and published on the school's website.

Appendices

A) First-aid box supply checklist

Item	Suggested stock	Current stock	Ordered if required?
A leaflet giving general advice on first-aid.	1		
Individually wrapped sterile adhesive dressings (assorted sizes).	20		
Sterile eye pads	2		
Individually wrapped triangular bandages (preferably sterile).	4		
Safety pins.	6		
Medium-sized (12cm x 12cm) individually wrapped sterile unmedicated wound dressings.	6		
Large (18cm x 18cm) individually wrapped sterile unmedicated wound dressings.	2		
Disposable gloves.	1 pair		

B) Travel first-aid box supply checklist

Item	Suggested stock	Current stock	Ordered if required?
A leaflet giving general advice on first aid.	1		
Individually wrapped sterile adhesive dressings.	6		
Large sterile unmedicated wound dressing (18cm x 18cm).	1		
Triangular bandages.	2		
Safety pins.	2		
Individually wrapped moist cleansing wipes.	10		
Disposable gloves.	1 pair		

C) Minibus first-aid box supply checklist

Item	Suggested stock	Current stock	Ordered if required?
Foil packaged antiseptic wipes.	10		
Conforming disposable bandage (not less than 7cm wide).	1		
Triangular bandages.	2		
Assorted adhesive dressings.	24		
Assorted safety pins.	12		
Large sterile unmedicated ambulance dressings (no less than 15cm x 15cm).	3		
Rustless blunt-ended scissors.	1 pair		
Sterile eye pads with attachments.	2		