

Swallowtails
First Aid
Policy

SWALLOWTAILS



Company number 16229932
Registered In England and Wales

Approved by	Director
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Aims

The aims of our first aid policy are to:

- ensure the health and safety of all staff, children and young people and visitors
- ensure that staff and governors are aware of their responsibilities with regards to health and safety
- provide a framework for responding to an incident and recording and reporting the outcomes
- ensure that first aid is administered in a timely and competent manner as explained in this first aid policy

Legislation

The Health and Safety (First Aid) Regulations 1981, which state that employers must provide adequate and appropriate equipment and facilities to enable first aid to be administered to employees, and qualified first aid personnel.

The Management of Health and Safety at Work Regulations 1992, which require employers to make an assessment of the risks to the health and safety of their employees.

The Management of Health and Safety at Work Regulations 1999, which require employers to carry out risk assessments, make arrangements to implement necessary measures, and arrange for appropriate information and training.

The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013, which state that some accidents must be reported to the Health and Safety Executive (HSE), and set out the timeframe for this and how long records of such accidents must be kept.

Social Security (Claims and Payments) Regulations 1979, which set out rules on the retention of accident records.

The School Premises (England) Regulations 2012, which require that suitable space is provided to cater for the medical and therapy needs of pupils.

Roles and responsibilities

The Directors have ultimate responsibility for health and safety matters in the organisation They will also

- Make sure that training and resources are kept up to date
- Ensure all staff are aware of first aid procedures
- Ensure that each group is accompanied by a first aider
- Undertake, or ensure that leaders undertake, risk assessments, as appropriate, and that the measures outlined in them are put into place

- Ensure all staff are aware of first aid procedures
- Report specified incidents to the HSE when necessary

Other day-to-day tasks are delegated to the staff members.

All lead practitioners are appropriately trained and are responsible for ensuring their off site bag is adequately supplied with medical materials in first aid kits, replenishing the contents of these kits when necessary. Each group, whether on or off site will be accompanied by a trained first aider.

The first aider will:

- Take charge when someone is injured or becomes ill acting as first responder
- Ensure that an ambulance or other professional medical help is summoned when appropriate
- Assess the situation where there is an injured or ill person, and provide immediate and appropriate treatment
- Send children and young people home to recover, after informing the directors and parents/carers
- Fill in an accident report on the same day, or as soon as is reasonably practicable, after an incident
- Keep their contact details up to date

Staff generally are responsible for:

- Ensuring they follow first aid procedures in a timely and competent manner
- Ensuring they know who the first aiders in organisation are
- Completing accident reports for all incidents they attend to where a first aider or appointed person is not called
- Informing the directors or manager of any specific health conditions or first aid needs

First aid procedures

In the event of an accident resulting in injury:

- The closest member of staff present will assess the seriousness of the injury and seek the assistance of a qualified first aider, if appropriate, who will provide the required first aid treatment
- The first aider, if called, will assess the injury and decide if further assistance is needed from a colleague or the emergency services. They will remain on scene until help arrives
- If the first aider judges that a pupil is too unwell to remain in organisation, parents will be contacted and asked to collect their child. Upon their arrival, the first aider will recommend next steps to the parents
- If emergency services are called, a member of staff will contact parents immediately

- The first aider will complete an accident report form on the same day or as soon as is reasonably practical after an incident resulting in an injury

First aid equipment

A typical first aid kit will include the following:

- A leaflet with general first aid advice
- Regular and large bandages
- Eye pad bandages
- Triangular bandages
- Adhesive tape
- Safety pins
- Disposable gloves
- Antiseptic wipes
- Plasters of assorted sizes
- Scissors
- Cold compresses
- Burns dressings

No medication is kept in first aid kits.

Additional first aid kits are available on site, provided by the village hall, first aid kits are carried in first aiders off site bags.

Reporting to the HSE

A record will be kept of any accident which results in a reportable injury, disease, or dangerous occurrence as defined in the RIDDOR 2013 legislation (regulations 4, 5, 6 and 7). These will be reported to the Health and Safety Executive as soon as is reasonably practicable and in any event within 10 days of the incident.

Reportable injuries, diseases or dangerous occurrences include:

- Death

Specified injuries, which are:

- 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)
- 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
- Injuries where an employee is away from work or unable to perform their normal work duties for more than 7 consecutive days (not including the day of the incident)
- Where an accident leads to someone being taken to hospital
- Near-miss events that do not result in an injury, but could have done.

Examples of near-miss events relevant to organisations include, but are not limited to:

- 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

Information on how to make a RIDDOR report is available here: 6 How to make a RIDDOR report, HSE <http://www.hse.gov.uk/riddor/report.htm>

Administration of Medicines

The administration of medicines to children is the responsibility of parents/carers and there is no requirement for Swallowtails staff to undertake these responsibilities. Should a request for the administration of medicine be received from parents/carers that is agreed by Swallowtails, this policy outlines the procedure for its administration, storage, disposal and documentation.

Swallowtails should be informed of any medical condition, allergy or medical history which may affect their child whilst at the site either by the commissioning body or the parent/carer directly.

Parent/carers should administer medication to their children unless they wish for Swallowtails staff to do this. A form must be signed stating which option they will follow.

Parent/carers should also ensure the child is familiar with the dosage, subject to age and physical and mental capacity, and is able to self-administer the medicine under adult supervision where appropriate.

Administration of Non-prescribed medicine

Written permission from the parents is required in order to give a non-prescribed medicine to a child. This permission must state whether the child has had an adverse reaction to the medication in the past.

Administration of Prescribed Medication

Swallowtails should be informed of the correct medication and dose to be administered. All prescribed medication administered in Swallowtails must be recorded along with the date, pupil's name, medication name, dosage and any other instructions.

Staff issuing medication should always check that the child's name and dose of medication match what is printed on the medication container.

Staff should supervise the self-administration of medication and ensure that it has been taken.

Asthma inhalers are available for immediate use and kept with the child or lead practitioner.

Storage, Recording and Disposal of Medication

All medication that comes into Swallowtails should be brought in in its original packing with the dosage sticker visible and handed over to the lead practitioner. If taken off site the practitioner keeps the medication safe and secure.

Medication kept on site should be stored in a locked cabinet. Once removed from the cabinet, medication should be administered immediately and never left unattended.



First Aid Record Form

Child / Young Person Name:		Commissioning School / Local Authority:	
Date of Incident:		Time:	
Location of Incident:		Staff Member Reporting:	
Description of incident and nature of injury/illness:			
Action Taken at the Time:			
Time Treatment given:		First Aider Name:	
Was the commissioning school / local authority informed? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Name & role of person contacted:		Method of contact (email/phone):	
Date & Time of contact:			
Were parents/carers informed? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Date & Time			
Action after treatment			
Meets RIDDOR reporting criteria (Yes/No)		Date reported to HSE (if applicable)	
First Aider signature		Date	



Appendix 2 : Medication Administration Record (Medication Log)

Child Details

Child full name

Date of birth

School / group

Medical condition (if relevant)

Medication Details

Medication name

Strength / form

Dose prescribed

Time(s) to be given

Special instructions

Original container seen with pharmacy

label (YES / NO)

Administration Record

Date	Time	Dose given	Given by (name)	Signature	Notes / reaction
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Parent / Carer Consent

Parent / carer name

Signature

Date