First Aid Policy

Aims

The aim of this policy is to set out guidelines for all staff of Graduately Developing Futures (GDF) in the administering of First Aid to children, employees or visitors. This policy shall be shared with all to ensure they are familiar with the organisations first aid procedures. The Governors are committed to the Local Authority's procedure for reporting accidents and recognise their statutory duty to comply with the Reporting of injuries, diseases and dangerous occurrences regulations 1995.

What is first aid?

First aid can save lives and prevent minor injuries becoming major ones. Under health and safety legislation employers have to ensure that there are adequate and appropriate equipment and facilities for providing first aid in the workplace.

First aid and medication

At least one member of staff with current first aid training is on the premises at any one time. Posters displaying the names and locations of first aiders are on display around the site. First Aid kits are available in the first aid room and key locations within the site and are re-stocked regularly.

Accident books

These are kept safely but accessible to first aiders. All staff know where they are kept and how to complete them. All accident books are reviewed half termly by a member of the first aid team to identify any potential or actual hazards. Our accident books keep a record of any first-aid treatment given by first aiders and other members of staff. These accident books MUST be written in pen, completed on the same day of the incident, and include:

- The date, time and place of the incident
- The name of the injured or ill person
- Details of the injury or illness and first-aid given
- What happened to the person immediately afterwards (for example, whether they went home, went back to class, or went to hospital)

The information in the accident books can:

- Help the organisation identify accident trends and possible areas for improvement in the control of health and safety risks
- Be used for reference in future first-aid need assessments
- Be helpful for insurance and investigative purposes

All completed accident books should be given to the Principal, who will store them for reference in future.

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Ofsted requirement to notify parents and the Data Protection Act
Parents must be informed of any accidents, injuries sustained and/or first aid treatment given to their child whilst in school. The first-aider who treated the injury will be the person who contacts the parent to inform them of what happened and recommended next steps.

Staff must be aware of the Data Protection Act and not allow parents to view personal information other than that relating to their child and must not allow parents to take photographs other than of their own child. It is not standard practice to give parents copies of the school's accident record. However, if a parent requests a copy of the accident form then this will need to be authorised by a member of the senior leadership team.

Administration of Medicines
Please refer to the Health and Wellbeing of Students Policy

Medical Emergencies
All members of staff who have contact with pupils who have medical conditions will be informed about the best course of action if a child becomes seriously ill and needs emergency treatment.

The child and the parents will be informed about the organisations arrangements and there will be details in the plan if appropriate. GDF will call an ambulance before contacting parents if a child becomes seriously ill – this applies to all children and not only those with health care plans. GDF will arrange for a competent member of staff to travel to hospital in an ambulance and act in loco parentis until the parents arrive. The member of staff in loco parentis will have the right to sanction emergency procedures as advised by medical staff in the ambulance or at the hospital.

Sickness
Our policy for the exclusion of ill or infectious children is discussed with parents. This includes procedures for contacting parents – or other authorised adults – if a child becomes ill while in the school.

- We do not provide care for children, who are unwell, e.g. have a temperature, or sickness and diarrhoea, or who have an infectious disease
- Children with head lice are not excluded, but must be treated to remedy the condition
- Parents are notified if there is a case of head lice in the school
- Good hygiene practice concerning the clearing of any spilled bodily fluids is carried out at all times by the Emergency First Aiders.

Treatment of injuries
Following an accident, the First Aider is to take charge of the first aid administration/emergency treatment commensurate with their training. Following their assessment of the injured person, they are to administer appropriate first aid and make a balanced judgement as to whether there is a requirement to call an ambulance. The First Aider should call an ambulance on the following occasions:

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- In the event of a significant injury or head injury
- If bleeding cannot be controlled
- In the event of a period of unconsciousness
- Whenever a fracture or break is suspected
- Whenever the first aider is unsure of the severity of the injuries
- If an Epipen has had to be administered to a child

Treatment of head injuries to children

Children often fall and bang themselves, and thankfully most bangs to the head are harmless events and can be dealt with by the supervising adult by applying a cold compress (wet tissue or cloth) for the child's own comfort. Parents/Carers must be contacted if the child has a visible or grazed bump to the head. All head bumps must be recorded into the accident book and a letter sent home informing parents of possible symptoms to look out for. It is the responsibility of the first aider dealing with the head bump to contact the parent and also inform the class teacher. Head bump letters will be texted to parents electronically so the school can be sure the parent receives the information. Under no circumstances, should ICE PACKS be applied to head bumps. It will reduce swelling but it can actually do more harm if there is a hairline fracture this could result in the child needing additional emergency hospital treatment.

Emergency First Aiders should be sought if the child:

- becomes unconscious
- is vomiting or shows signs of drowsiness
- has a persistent headache
- complains of blurred or double vision
- is bleeding from the nose or ear; and/or
- has pale yellow fluid from the nose or ear

If any of the above symptoms occur in a child who has had a bang to the head, urgent medical attention is needed. Parents should be contacted and the emergency services too. In the event of an accident in which the child cannot stand up unaided, he/she should be left in the position that he/she was found (even if this is in the toilets or outside area) so long as it is safe to do so and the emergency first aider must be called immediately to assess the situation.

Treatment of suspected breaks/fractures

The seven things to look for are:

1. Swelling
2. Difficulty moving
3. Movement in an unnatural direction
4. A limb that looks shorter, twisted or bent
5. A grating noise or feeling
6. Loss of strength
7. Shock

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- If it is an open fracture, cover the wound with a sterile dressing and secure it with a bandage. Apply pressure around the wound to control any bleeding. Support the injured body part to stop it from moving. This should ease any pain and prevent any further damage
- Once you've done this, call 999 or 112 for medical help. While waiting for help to arrive, don't move the injured person unless they're in immediate danger
- Keep checking the casualty for signs of shock

First Aid training states that clothing should only be removed if absolutely necessary. Where clothing needs to be removed which could cause a safeguarding issue then two members of staff should be present. Only one needs to be first aid trained. However, if waiting for a second member of staff puts a child's life in danger then the first aider should not withhold treatment.

Splinters
Splinters can be removed if they are small and you can see the angle it went in but not if they are embedded or in a joint. They must be extracted in the same direction they went in. Sterile single-use tweezers are stored in the main first aid box located in the school office.

Ice Packs
Instant ice packs are single-use only and for the treatment of sprains, strains and bruises and must be kept out of children's reach. Guidance on the use of ice packs: Ideally an ice pack should be applied within 5 -10 minutes of the injury occurring. The pack must be wrapped in a cloth to prevent cold burns and applied to the injured area for 20 - 30 minutes and repeated every 2 to 3 hours for the next 24 – 48 hours. Emergency first aiders must check the colour of the skin after 5 minutes of applying the pack. If the skin is bright red or pink, remove the pack. With injuries older than 48 hours, a heat source can be applied to bring more blood to the injured area to stimulate the healing process.

Precautions when using ice and heat
DO NOT USE ICE OR HEAT
- If the casualty is diabetic
- Over areas of skin that are in poor condition
- Over areas of skin with poor sensation to heat or cold
- Areas with known poor circulation
- In the presence of visible or know infection(s)

Asthma
All pumps are labelled and kept secure. In the event of an attack, the inhaler must be taken to the child. All inhalers should accompany children when they are off the school grounds e.g. on a trip, swimming, visiting another school, etc. Children on the asthma register who have parental consent for the use of the emergency inhaler are clearly indicated. An emergency inhaler can be used if the

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child's prescribed inhaler is not available (for example, because it is broken, or empty). ALWAYS SEEK THE ADVICE/ATTENTION OF A QUALIFIED FIRST AIDER IN THE EVENT OF AN ASTHMA ATTACK

Epi-Pens

All Epi-Pens are labelled and kept secure. GDF have trained staff who are trained in Epi-Pen usage. Anyone can administer an Epi-Pen in an emergency if the adult/child is unable to do it themselves. If an Epipen is administered to a child, emergency services must be informed immediately. From 1 October 2017 the Human Medicines (Amendment) Regulations 2017 will allow all schools to buy adrenaline auto-injector (AAI) devices without a prescription, for emergency use in children who are at risk of anaphylaxis but their own device is not available or not working (e.g. because it is broken, or out of date).

Training

A central record of all training related to first aid is held by the Designated Safeguarding Lead and reviewed annually to ensure that certificates are renewed within timescales.

Review

This policy will be reviewed on an annual basis as a minimum. Next review date 01.09.2027

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