



First Aid Statement & Policy

Policy Code:	HS6
Policy Start Date:	March 2023
Policy Review Date:	March 2025

Community Inclusive Trust – **First Aid Statement & Policy**

CIT is committed to ensuring the health and safety of all staff, pupils and visitors and expects all staff and volunteers to share this commitment.

Each school within the Trust has separate First Aid Procedures which can be found on the individual schools' website.

The aims of our schools' first aid procedures are to:

- Ensure the health and safety of all staff, pupils and visitors.
- Ensure that staff, Trust Members, Directors 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.

Please visit our individual schools' websites to view their First Aid Procedures.

A model First Aid Policy is set out below and is available for all of our schools to use as a template to ensure an effective First Aid Procedure is established.



Boston Endeavour Academy

First Aid Policy

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Statement of intent

Boston Endeavour Academy is committed to providing emergency first aid provision in order to deal with accidents and incidents affecting staff, pupils and visitors. The arrangements within this policy are based on the results of a suitable and sufficient risk assessment carried out by the school in regard to all staff, pupils and visitors.

The school will take every reasonable precaution to ensure the safety and wellbeing of all staff, pupils and visitors. Details of such precautions are noted in the following policies:

- Health and Safety Policy
- Behavioural Policy
- Child Protection and Safeguarding Policy
- Lone Working Policy
- Supporting Pupils with Medical Conditions Policy
- Educational Visits and School Trips Policy

The school's administrative team/or individual/group determined by the Head Teacher has overall responsibility for ensuring that the school has adequate and appropriate first aid equipment, facilities and personnel, and for ensuring that the correct first aid procedures are followed.

1. Legal framework

1.1 This policy has due regard to legislation and statutory guidance, including, but not limited to, the following:

- Health and Safety at Work etc. Act 1974
- The Health and Safety (First Aid) Regulations 1981
- The Management of Health and Safety at Work Regulations 1999
- DfE (2015) 'Supporting pupils at school with medical conditions'
- DfE (2000) 'Guidance on First Aid for Schools'
- DfE (2018) 'Automated external defibrillators (AEDs)'

2. Aims

2.1 All staff will read and be aware of this policy, know who to contact in the event of any illness, accident or injury, and ensure that this policy is followed.

2.2 Staff will always use their best endeavours to secure the welfare of pupils.

2.3 Anyone on the school premises is expected to take reasonable care for their own and other's safety.

2.4 The aims of this policy are to:

- Ensure that the school has adequate, safe and effective first aid provision for every pupil, member of staff and visitor to be well looked after in the event of any illness, accident or injury, no matter how major or minor.
- Ensure that staff and pupils are aware of the procedures in the event of any illness, accident or injury.
- Ensure that medicines are only administered at the school when express permission has been granted for this.
- Ensure that all medicines are appropriately stored.
- Promote effective infection control.

2.5 Nothing in this policy will affect the ability of any person to contact the emergency services in the event of a medical emergency. For the avoidance of doubt, staff should dial 999 in the event of a medical emergency before implementing the terms of this policy and make clear arrangements for liaison with ambulance services on the school site.

2.6 To achieve the aims of this policy, the school will have suitably stocked first aid boxes in line with the assessment of needs. Where there is no special risk identified, a minimum provision of first aid items will be as follows:

- A leaflet giving general advice on first aid
- 20 individually wrapped sterile adhesive dressings, of assorted sizes
- 2 sterile eye pads
- 4 individually wrapped triangular bandages, preferably sterile
- 6 safety pins
- 6 medium-sized (approximately 12cm x 12cm) individually wrapped sterile unmedicated wound dressings
- 2 large-sized (approximately 18cm x 18cm) individually wrapped sterile unmedicated wound dressings
- 1 pair of disposable gloves

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- Equivalent or additional items are acceptable
 - All first aid containers will be identified by a white cross on a green background
- 2.7 The lead first aider is responsible for examining the contents of first aid boxes, including any mobile first aid boxes for offsite use – these will be frequently checked and restocked as soon as possible after use. Items will be safely discarded after the expiry date has passed.
- 2.8 First aid boxes are in the following areas:
- The school office
 - In every classroom
 - Hydrotherapy pool
 - Kitchen
 - Minibuses
 - Premises Managers office
 - Physiotherapy & Nurses rooms

3. First aiders

- 3.1 The main duties of first aiders will be to administer immediate first aid to pupils, staff or visitors, and to ensure that an ambulance or other professional medical help is called, when necessary.
- 3.2 First aiders will ensure that their first aid certificates are kept up-to-date through liaison with the Head Teacher or member of staff with responsibility for CPD
- 3.3 Each lead first aider or person appointed by the Head Teacher will be responsible for ensuring all first aid kits are properly stocked and maintained. The first aid appointed person(s) will be responsible for maintaining supplies.
- 3.4 The current first aid appointed person(s) are:

Name	Contact	Location	Date of first aid qualification
<u>Name</u>	<u>Email address</u>	<u>Location</u>	<u>Date</u>
<u>Aaron Bloodworth-Flatt</u>	<u>Aaron.bloodworth@bea-cit.co.uk</u>	<u>Ground Floor</u>	<u>23/06/2021</u>
<u>Sophie Ground</u>	<u>Sophie.ground@bea-cit.co.uk</u>	<u>Ground Floor</u>	<u>23/06/2021</u>
<u>Sharon Sculthorpe</u>	<u>Sharon.sculthorpe@bea-cit.co.uk</u>	<u>Ground Floor</u>	<u>26/06/2021</u>

4. Automated external defibrillators (AEDs)

- 4.1 A defibrillator must be available for easy access in or near the school office.
- 4.2 Where the use of the AED is required, individuals will follow the step-by-step instructions displayed on the device.

4.3 A general awareness briefing session, to promote the use of AEDs, will be provided to staff on an annual basis, and usually during the first INSET session of the academic year.

4.4 Use of the AED will be promoted to pupils during PSHE lessons.

4.5 Staff trained to use the AED's include, Aaron Bloodworth-Flatt, Sophie Ground, Sharon Sculthorpe, Kayleigh Tooby, Jack Boden, Georgia Stokes and Michael Reilly. During the event of a AED needing to be used, staff will inform the office via the nearest phone. The office staff will make a tanoy call, 'Code yellow' and highlight the area of school needing medical attention. The office staff member will take the AED to that area and hand over to the person leading on the medical support.

5. Emergency procedures

5.1 If an accident, illness or injury occurs, the member of staff in charge will assess the situation and decide on the appropriate course of action, which may involve calling for an ambulance immediately or calling for a first aider.

5.2 If called, a first aider will assess the situation and take charge of first aider administration.

5.3 If the first aider does not consider that they can adequately deal with the presenting condition by the administration of first aid, then they will arrange for the injured person to access appropriate medical treatment without delay.

5.4 Where an initial assessment by the first aider indicates a moderate to serious injury has been sustained, one or more of the following actions will be taken:

- Administer emergency help and first aid to all injured persons. The purpose of this is to keep the victim(s) alive and, if possible, comfortable, before professional medical help can be called. In some situations, immediate action can prevent the accident from becoming increasingly serious, or from involving more victims.
- Call an ambulance or a doctor, if this is appropriate – after receiving a parent's clear instruction, take the victim(s) to a doctor or to a hospital. Moving the victim(s) to medical help is only advisable if the person doing the moving has sufficient knowledge and skill to move the victim(s) without making the injury worse.
- Ensure that no further injury can result from the accident, either by making the scene of the accident safe, or (if they are fit to be moved) by removing injured persons from the scene.
- See to any pupils who may have witnessed the accident or its aftermath and who may be worried, or traumatised, despite not being directly involved. They will need to be escorted from the scene of the accident and comforted. Younger or more vulnerable pupils may need parental support to be called immediately.

5.5 Once the above action has been taken, the incident will be reported promptly to:

- The Head Teacher or most senior member of staff available
- The victim(s)'s parents.

6. Reporting to parents

6.1 In the event of incident or injury to a pupil, at least one of the pupil's parents/carers will be informed as soon as practicable.

6.2 Parents/carers will be informed in writing of any injury to the head, whether minor or major, and be given guidance on the action to take if symptoms develop.

6.3 In the event of a serious injury or an incident requiring emergency medical treatment, the school will telephone the pupil's parents as soon as possible.

6.4 A list of emergency contacts will be kept at the school office.

7. Offsite visits and events

7.1 Before undertaking any offsite visits or events, the teacher organising the trip or event will assess the level of first aid provision required by undertaking a suitable and sufficient risk assessment of the visit or event and the persons involved.

7.2 For more information about the school's educational visits requirements, please see the Educational Visits and School Trips Policy.

8. Storage of medication

8.1 Medicines will always be stored securely and appropriately in accordance with individual product instructions, save where individual pupils have been given responsibility for keeping such equipment with them.

8.2 All medicines will be stored in the original container in which they were dispensed, together with the prescriber's instructions for administration, and properly labelled, showing the name of the patient, the date of prescription and the date of expiry of the medicine.

8.3 All medicines will be returned to the parent/carer for safe disposal when they are no longer required or have expired.

8.4 An emergency supply of medication will be available for pupils with medical conditions that require regular medication or potentially lifesaving equipment, e.g. an EpiPen.

8.5 Parents/carers will advise the school when a child has a chronic medical condition or severe allergy so that an IHP can be implemented and staff can be trained to deal with any emergency in an appropriate way. Examples of this include epilepsy, diabetes and anaphylaxis. A disclaimer will be signed by the parents/carers in this regard.

9. Illnesses

9.1 When a pupil becomes ill during the school day, the parents/carers will be contacted and asked to pick their child up as soon as possible.

9.2 A quiet area will be set aside for withdrawal and for pupils to rest while they wait for their parents to pick them up. Pupils will be monitored during this time.

10. Allergens

10.1 Where a pupil has an allergy, this will be addressed via the Trust's Supporting Pupils with Medical Conditions Policy

11. Consent

- 11.1 Parents/carers will be asked to complete and sign a medical consent form when their child is admitted to the school, which includes emergency numbers, alongside details of allergies and chronic conditions
- 11.2 Staff do not act 'in loco parentis' in making medical decisions as this has no basis in law – staff will always aim to act and respond to accidents and illnesses based on what is reasonable under the circumstances and will always act in good faith while having the best interests of the pupil in mind – guidelines will be issued to staff in this regard.

12. Monitoring and review

- 12.1 This policy is reviewed annually by the school and any changes communicated to all members of staff.
- 12.2 Staff will be required to familiarise themselves with this policy as part of their induction programme. Staff will be informed of the arrangements that have been made in connection with the provision of first aid, including the location of equipment, facilities and personnel.

Appendix 1

Bumps to the Head Policy

Minor head injuries often cause a bump or bruise. As long as the person is awake (conscious) and with no deep cuts, it's unlikely there will be any serious damage.

Other symptoms of a minor head injury may include:

- a mild headache
- nausea (feeling sick)
- mild dizziness
- mild blurred vision

It is important that the pupil is closely monitored, until such times as they are ready to re-join their class.

If these symptoms get significantly worse or if there are other, more serious symptoms (detailed below), go straight to the accident and emergency (A&E) department of the nearest hospital or call 999 to request an ambulance.

Where possible the pupil should also be seen by one of the appointed First Aiders who will decide if any further action needs to be taken.

- unconsciousness, either briefly or for a longer period of time
- difficulty staying awake or still being sleepy several hours after the injury
- clear fluid leaking from the nose or ears – this could be cerebrospinal fluid, which normally surrounds the brain
- bleeding from one or both ears
- bruising behind one or both ears
- any sign of skull damage or a penetrating head injury
- difficulty speaking, such as slurred speech
- difficulty understanding what people say
- reading or writing problems
- balance problems or difficulty walking
- loss of power or sensation in part of the body, such as weakness or loss of feeling in an arm or leg
- general weakness
- vision problems, such as significantly blurred or double vision
- having a seizure or fit (when your body suddenly moves uncontrollably)
- memory loss (amnesia), such as not being able to remember what happened before or after the injury
- a persistent headache
- vomiting since the injury
- irritability or unusual behaviour

Recording and Reporting

1. Record the head injury of a child on CPOMS and use the medical form in the Library Tab of CPOMS.
2. All medical incidents should be recorded on the Medical incident area on CPOMS.
3. Parents/carers will be informed in writing of any injury to the head, whether minor or major, and be given guidance on the action to take if symptoms develop, or informed of ambulance/hospital visit

