



Kimbolton School
Cambridgeshire

FIRST AID POLICY

Policy owner: Amanda Janes – Health and Safety Manager

Governor Committee: Risk

Policy Summary Statement:

The School has a legal duty to provide first aid. This policy sets out the processes and procedures in place to comply with that duty.

LINKED DOCUMENTS

This policy should be read in conjunction with the:

- Health and Safety Policy – Statement of Intent
- Accident Reporting Procedures Policy

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First Aid Policy

INTRODUCTION

First aid can save lives and prevent minor injuries becoming major ones. This document outlines the policy for ensuring that there are adequate and appropriate equipment, facilities and qualified first aid personnel for providing first aid and medical care within Kimbolton School (including Kimbolton Preparatory School) during term time and holidays.

Definition

First Aid means:

“In cases where a person will need help from a medical practitioner, treatment for the purpose of preserving life and minimising the consequences of injury and illness until such help is obtained.”

“Treatment of minor injuries which would otherwise receive no treatment or which do not need treatment by a medical practitioner.”

Legal Position

The *Health and Safety (First Aid) Regulations, 1981* require employers to provide adequate and appropriate equipment, facilities and personnel to ensure their employees receive immediate attention if they are injured or taken ill at work.

The *Health & Safety at Work etc. Act, 1974* imposes a general duty on employers to ensure, so far as is reasonably practicable, the health, safety and welfare of all their employees. In the case of a School this extends to the pupils and visitors if they are injured or taken ill while at School.

ORGANISATION

First Aid Assessment

The *Management of Health and Safety at Work Regulations, 1992* require employers to make suitable and sufficient assessment of the risks to health and safety at work, and others affected by their undertaking, to identify what measures they need to take to prevent or control these risks.

A risk assessment for the provision of first aid in the School has been completed. As well as the minimum provision required the assessment outlines in detail any additional provision required specific to the School's needs.

First Aider

First Aiders must have completed a First Aid at Work training course. This course is initially three days but requalification takes two days. A blended learning version of the course can also be completed. After an initial e-learning section a two-day practical part needs to be completed (or one-day if requalification).

Their main duties will be:

- To provide immediate care with common injuries or illnesses and those arising from specific hazards at School.
- When necessary, ensure that an ambulance or other professional medical assistance is called.

Appointed Person

On completion of a one-day Emergency First Aid at Work training course or equivalent, staff will be given Appointed Person status. This role includes calling the emergency services when required. Appointed persons are NOT first aiders and they should not give first aid treatment for which they have not been trained

Early Years Foundation Stage (EYFS)

It is a requirement of the Early Years Foundation Stage (EYFS) that at least one Person who has a current paediatric first aid certificate must be on the premises at all



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times when children are present and must accompany children on outings. From September 2016 newly qualified staff with a childcare Level 2 and 3 qualifications must have an emergency paediatric first aid or full paediatric first certificate in order to count in the EYFS ratios. Paediatric First aid training is a minimum of 12 hours and should include specific training relating to the care of children.

PLANNING AND IMPLEMENTING

First aid provision (First Aiders, facilities and equipment) must be available at all times while people are on School premises and also off the premises whilst on School visits.

Information

Information concerning first aid arrangements will be given to staff during induction training. The First Aid Policy and all first aid arrangements (including the current list of first aid qualifications) will also be available on the School's intranet.

Insurance

It is unlikely that any action would be taken against a first aider who was using first aid training they have received. St John's Ambulance state:

"There is evidence to suggest that people are deterred from volunteering, helping others or intervening in an emergency due to the fear of risk and/or liability.

*The **Social Action, Responsibility and Heroism Act 2015** (Sarah Act) addresses these concerns and providing reassurance that if something goes wrong when people are acting for the benefit of society or intervening to help someone in an emergency, the courts will take into account the context of their actions in the event they are sued."*

However, adequate insurance arrangements are provided through the School insurance brokers. These provide full cover for claims arising from actions of staff acting within the scope of their employment.

Off-site activities

Details of the first aid provision for off-site activities are outlined in the School's Educational Visits Policy. Staff taking pupils on trips must ensure that they are aware of any health conditions of pupils.

Qualifications and training

The aim of training is to give staff sufficient understanding, confidence and expertise in first aid. Appropriate training will be given to staff who are identified as part of the first aid provision risk assessment.

The Health and Safety Manager is responsible for organising first aid training and will ensure that certificates are current and the First Aid qualifications list is kept up to date.

Anaphylaxis Training

Anaphylaxis is a severe, potentially life-threatening, allergic reaction that can affect many of the systems of the body. Anaphylaxis should always be treated as a medical emergency. An injection of an anti-allergy medicine should be given as soon as a reaction is suspected. Some people with a previous history of anaphylaxis will have an auto-injector of adrenaline. The School also has spare auto-injectors for use in emergencies.

The School includes anaphylaxis training and the use of auto-injectors as part of the first aid training.

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Asthma Inhaler

The School has spare Salbutamol Inhalers for use in emergencies.

Defibrillator Training

A defibrillator is a device that gives the heart an electric shock to attempt to re-establish its normal sinus rhythm following some cases of cardiac arrest.

The School has automated external defibrillators (AED's) on site and training on their use is included in the School's first aid training.

First Aid Materials, Equipment and Facilities

First aid containers are located throughout the School including all the School vehicles as outlined in the first aid risk assessment. A list of locations is available on the School's intranet and X-drive.



All first aid containers should be clearly marked **FIRST AID** with a white cross on a green background.

Heads of Department are encouraged to keep the containers in their area well stocked (supplies can be obtained from the Health Centre or Prep Medical Room). Twice a year the Nursing team will record that the containers are checked and restocked.

Education (School Premises) Regulations, 1999 require every School to have a suitable room that can be used for medical treatment when required and for the care of pupils during School hours. The Health Centre at the Senior School and the Prep Medical Room are provided for this purpose.

Hygiene and Infection Control

All staff should take precautions to avoid infection and must follow basic hygiene procedures. All first aid kits contain appropriate equipment to reduce the risk of infection and a guidance sheet entitled "Guidelines for Dealing with Spillage of Bodily Fluids" is provided as well. The guidance sheet is also available on the School intranet.

Extra guidelines and equipment e.g. alcohol hand gel and disinfectant wipes will be issued when the risk of infection may be increased (such as increased cases of Covid/flu etc.).

Transport to Hospital

If the First Aider considers it necessary, an injured pupil will be sent directly to hospital and parents and/or guardians should be informed. No pupil should be allowed to travel to hospital unaccompanied. The decision to call for an ambulance can be taken if the first aider or person dealing with the incident deems this action necessary

In the Event of an Accident or Injury

An outline of "Emergency Contact Numbers" and details as well as an "Emergency Flow Chart" and "Important Advice for Dealing with a Conscious Casualty" are appended to this policy. This information is also available on the intranet.

A similar list is displayed in the Bursary Reception and the Prep Office to inform visitors of the first aid and other health and safety arrangements.

In the case of a major incident, or involvement of a number of casualties, the Headmaster and Bursar must be informed.



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MONITORING

Reporting Accidents and Record Keeping

Following any incident, accident a School Accident form should be completed by the member of staff who administered first aid, or who initially dealt with the situation. Copies of the form are available from Reception and Prep School Office as well as being in all first aid kits. The form can also be downloaded from the School's intranet. A QR code in the first aid kits can be scanned to complete the form electronically.

The completed form should be returned to the Health and Safety Manager immediately who will inform HSE of any incidents reportable under the *Reporting of Injuries, Diseases and Dangerous Occurrences Regulations, 1995 (RIDDOR)*.

More details of reportable accidents can be found in the School Accident Reporting Procedures Policy.

REVIEW

The policy is reviewed and updated regularly (at least every two years), or each time that a new measure is introduced.

Further Information

HSE Books ISBN 9780717665600

Guidance leaflet L74 (third edition) "*The Health and Safety (First Aid) Regulations 1981*"

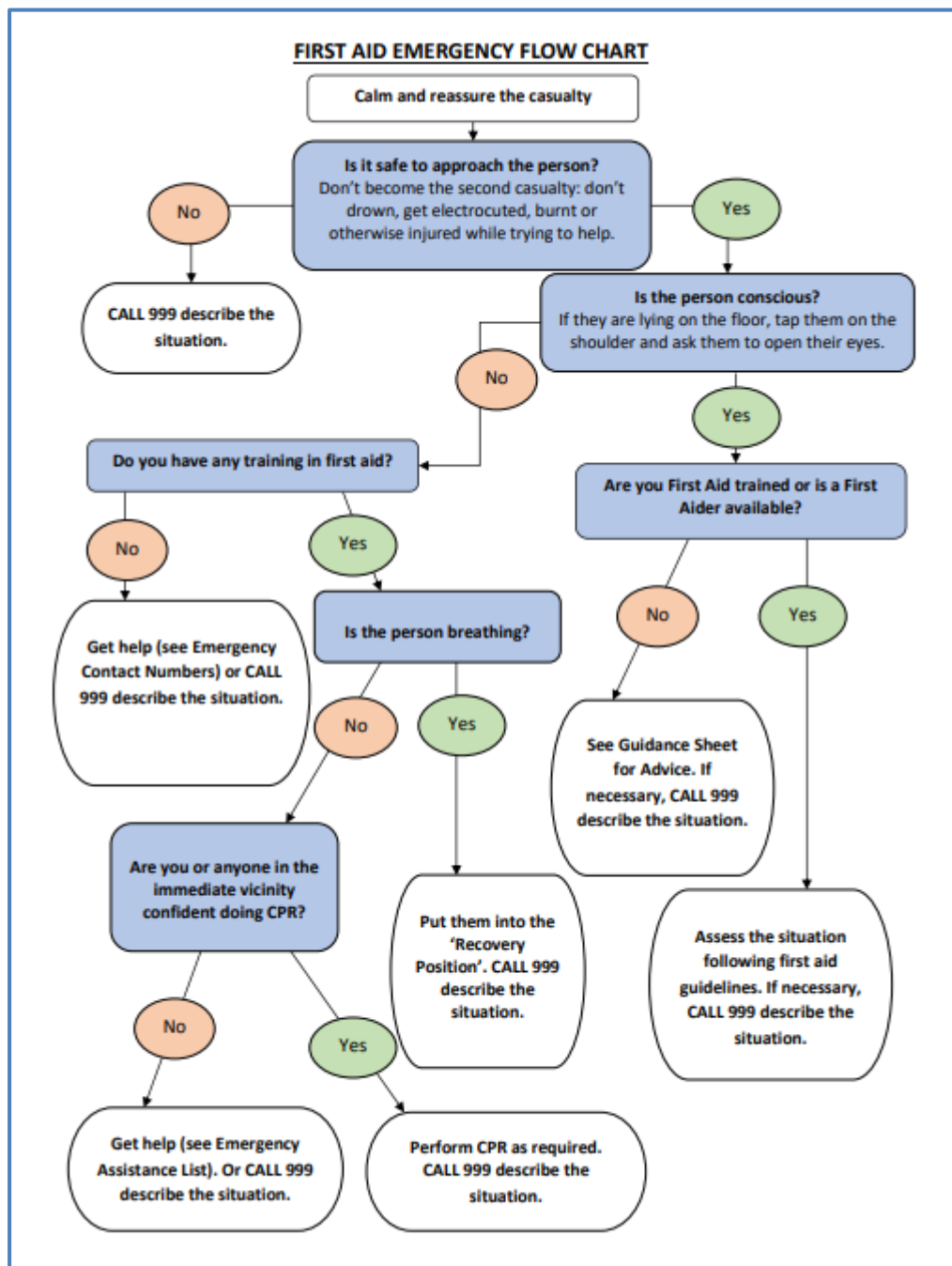
HSE Books ISBN 9780717664696

Guidance Leaflet INDG214(Rev2) "*First Aid at Work*"

DfE Guidance "*First Aid in Schools, Early Years and Further Education*"

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Appendix I- First Aid Emergency Flow Chart



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Appendix I- First Aid Important Advice for Dealing with a conscious Casualty

IMPORTANT ADVICE FOR DEALING WITH A CONSCIOUS CASUALTY

Whether it's a fall from a ladder, a heart attack, or an electric shock, emergency situations can arise without warning. You need to have a plan in place or else panic will set in and make a bad situation worse.

The following advice is aimed at people who have no or basic first aid training and describes what to do while waiting for emergency personnel to arrive, in order to maintain calm in a trying situation.

NOTE: When calling the Emergency Services make sure you specify where on site the casualty is and the best entrance to the site. Have someone waiting to direct them to the exact location.

Ask about any symptoms the casualty is having. Watch for sudden changes in a person's appearance or demeanour.

Make note of any signs of discomfort or illness including:

- Pallor or bluish skin tone
- Rubbing or holding areas of the body
- Dizziness, slurred speech or disorientation
- Medical bracelets, necklaces, watches
- Straw coloured fluid from ears, nose, eyes

Report these signs to emergency personnel, along with any symptoms the person tells you.

NOTE: Symptoms of a heart attack differ between men and women. In addition to chest and arm pain, watch for jaw pain, back pain, nausea and vomiting. These may all be signs of a heart attack, especially in women.

DO's:

- ✓ **DO make the person stop all activity and sit or lie down.** Keep the person warm and calm and continue to reassure them.
- ✓ **DO ask if this is a known condition and if they have medication for it.** If applicable get them to take it.
- ✓ **DO call 999 for a serious injury to head, neck, ribs, back, pelvis or thighs.**
- ✓ **DO continue to monitor.** Symptoms may lessen or disappear completely only to reappear later. Do not let this fool you into believing the emergency is over. If symptoms do not get better after 3 mins call for help.

DON'Ts:

- × **DON'T move a person if it is likely that their neck or spine has been damaged.** Look for signs that this may be the case e.g. fallen ladders etc.
- × **DON'T share medication.** Prescriptions may differ in strength and worsen the situation. This includes, Adrenaline Auto-Injectors (AAI's), inhalers as well as tablets.
- × **DON'T give medication to under 16's without a consent form.**
- × **DON'T give food or drink to sick or injured people.** They may require surgery and that is best performed on an empty stomach. Do not allow them to smoke as this may complicate the situation.

The exception to the above rule:

- The person is a known diabetic and needs to have their blood sugar raised.
- The casualty has fainted and 'come to' on their own. Stress, emotional shock and hunger can all cause a person to collapse.

COMPLETE AN ACCIDENT FORM AND RETURN IT TO THE HEALTH AND SAFETY MANAGER AS SOON AS POSSIBLE.