



# Policy for

# First Aid and Illness

Approved by	Development Cttee
Approved on	02.11.18
Review date	November 2019

Signed..... Role.....

Ownership: Development Cttee

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## **FIRST AID POLICY & ILLNESS IN SCHOOL**

<b>Name of School</b>	Stockbridge Primary & Pre-School
<b>Date of Policy Issue/Review</b>	12 November 2018
<b>Name of Headteacher</b>	Emma Jefferies
<b>Signature of Responsible Manager/Headteacher</b>	

### **Introduction**

#### **Policy Statement**

Stockbridge Primary & Pre-School will undertake to ensure compliance with the relevant legislation with regard to the provision of first aid for all employees and to ensure best practice by extending the arrangements as far as is reasonably practicable to children and others who may also be affected by our activities.

Responsibility for first aid at Stockbridge Primary & Pre-School School is held by *Emma Jefferies* who is the responsible manager.

All first aid provision is arranged and managed in accordance with the Children's Services Safety Guidance Procedure SGP 08-07(First Aid).

All staff have a statutory obligation to follow and co-operate with the requirements of this policy.

#### **Aims & Objectives**

Our first aid policy requirements will be achieved by:

- Carrying out a First Aid Needs Assessment (Appendix A) to determine the first aid provision requirements for our premises
  - It is our policy to ensure that the First Aid Needs Assessment will be reviewed periodically or following any significant changes that may affect first aid provision
  - The Children's Services First Aid Needs Assessment Form (CSAF-002) will be used to produce the First Aid Needs Assessment for our site
- Ensuring that there are a sufficient number of trained first aiders on duty and available for the numbers and risks on the premises in accordance with the First Aid Needs Assessment
- Ensuring that there are suitable and sufficient facilities and equipment available to administer first aid in accordance with the First Aid Needs Assessment
- Ensuring the above provisions are clear and shared with all who may require them

### **First Aid Training**

The responsible manager will ensure that appropriate numbers of qualified first aiders, appointed persons and paediatric trained staff (if appropriate) are nominated as identified by completion of the First Aid Needs Assessment and that they are adequately trained to meet their statutory duties.

### Qualified First Aid Staff

At Stockbridge Primary & Pre-School there are THREE fully qualified first aiders:

- Sam Millen
- Chloe Kirkham
- Laura Caws

They will be responsible for administering first aid, in accordance with their training, to those that become injured or fall ill whilst at work or on the premises. There may also be other duties and responsibilities which are identified and delegated to the first aider (eg. first aid kit inspections).

### Appointed Persons (Emergency First Aid trained staff)

At Stockbridge Primary & Pre-School there are TEN appointed persons (School First Aid trained staff) who are as follows:

- Emma Jefferies
- Karen Tregunna
- Jane Hughes
- Jenny Broadhead
- Jane Waters
- Natalie Holdich
- Julie Hanham
- Debbie Spayes
- Shawn Weatherall
- Kelly Alexander

Where the first aid needs assessment identifies that qualified first aid staff are not necessary, the minimum requirement is to appoint a person (the Appointed Person) to take charge of first aid arrangements including looking after equipment/facilities and calling the emergency services .

### Paediatric First Aid Trained Staff

At Stockbridge Primary & Pre-School there are NINE paediatric first aid trained staff who are as follows:

- Polly Hutchinson
- Rachel Trott
- Sarah McInnes
- Amy Jacobs
- Kirsty Flack
- Cat Burnand
- Alana Hollister
- Chloe Kirkham
- Sam Millen

These staff are in place to meet the Early Years Foundation Stage (EYFS) statutory obligations.

## **First Aid Provision**

Our First Aid Needs Assessment has identified the following first aid kit requirements:

- THREE first aid kits on the premises
  - One first aid kit is situated in the School Office, one in pre-school and the other in the school medical room,
- FIVE travel first aid kits for use off site.

- These travel first aid kits will be located in the Medical room but must be taken out on every off-site visit.

It is the responsibility of the qualified first aiders to check the contents of all first aid kits every term and record findings on the Children's Services First Aid Kit Checklist (CSAF-003). Completed checklists are to be stored in the Health & Safety file.

The contents of first aid kits are listed under the '*required quantity*' column on the checklist itself.

The disabled toilet and shower room is designated as the first aid room for treatment, sickness and the administering of first aid. The first aid room will have the following facilities:

- first aid kit, range of glove sizes, chair, sink and disabled toilet along with a yellow bodily fluids bin.

## Emergency Arrangements

Upon being summoned in the event of an accident, the first aider/appointed person 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/appointed person is to always call an ambulance on the following occasions:

- In the event of a serious injury
- In the event of any significant head injury
- In the event of a period of unconsciousness
- Whenever there is the possibility of a fracture or where this is suspected
- Whenever the first aider is unsure of the severity of the injuries
- Whenever the first aider is unsure of the correct treatment

In the event of an accident involving a child, where appropriate, it is our policy to always notify parents at the earliest opportunity, of their child's accident if it:

- is considered to be a serious (or more than minor) injury (e.g. where a bite breaks the skin)
- requires first aid treatment (rather than TLC)
- requires attendance at hospital

Our procedure for notifying parents will be to use all telephone numbers available to contact them and leave a message should the parents not be contactable.

In the event that parents can not be contacted and a message has been left, our policy will be to continue to attempt to make contact with the parents at least every hour. In the interim, we will ensure that the qualified first aider, appointed person or another member of staff remains with the child until the parents can be contacted and arrive (as required). Should the injury be minor and dealt with in school without needing to contact parents, a note will be completed detailing the injury and subsequent treatment (even if this is TLC) and this will be sent home with the child at the end of this school day. Every effort will be made to speak to parents about the injury.

In the event that the child requires hospital treatment and the parents can not be contacted prior to attendance, the qualified first aider/appointed person/another member of staff will accompany the child to hospital and remain with them until the parents can be contacted and arrive at the hospital.

## Records

All accidents requiring first aid treatment are to be recorded with (at least) the following information:

- Name of injured person
- Name of the qualified first aider/appointed person
- Date of the accident
- Place of accident
- Type of accident (eg. bump on head etc)
- Treatment provided and action taken

Where an accident requires time off or treatment by a medical professional or, is a near miss, the School should record and report this incident on the Hampshire County Council's online reporting form available through the intranet H&S pages. The Responsible Manager will work with the member of staff completing this form so that the process is well supported by leadership.

### **Children becoming ill during the school day**

It should be recognised that close contact between children is inevitable and consequently contagious illnesses are quickly passed on. Basic hygiene is taught and includes the use of a handkerchief and the importance of washing hands.

However, it is inevitable that, from time to time, some children will develop an illness during the course of a school day. Whilst sometimes all that is needed is a rest and some TLC, occasionally it may be necessary to send a child home or to the named emergency contact. The decision to send a child home must only be taken by the headteacher or, in her absence, the assistant head, usually in consultation with one of the school's named first aiders. Emergency contact details should be checked with parents at least annually.

### **Children returning to school after illness**

School is a place where children are engaged in busy and sometimes strenuous activities. Therefore, parents should not allow their children to return to School after illness until they are fully fit. Further guidance on individual illnesses and HSE guidelines are available online and in the HT office in the 'Health Guidance for Schools' file (although the online version should also be checked as this is updated more regularly than the file)

### **Asthma**

Detailed instructions for the treatment of asthma attacks is included as part of this policy statement (see Appendix B).

**Policy Approved/Reviewed: November 2018**

**Policy review date: November 2019**

## CHILDREN'S SERVICES ASSESSMENT FORM CSAF-002

### First Aid Needs Assessment Form

There is a statutory obligation to carry out and periodically review an assessment of first aid provision in every workplace by carrying out a First Aid Needs Assessment. This template form (page 2) and the included guidance aims to help responsible managers to identify, formalise and record what level of first aid provision is needed in their building, premises or for their team.

Arrangements for your first aid provision as identified through this first aid needs assessment would be expected to form the basis of your own first aid policy. Those using this guidance will need to have read the **Children's Services Safety Guidance Procedure SGP 08-07 (First Aid)**

#### Assessing the levels

How much first aid provision you require will depend on the circumstances of your workplace. Using this template form, you will be able to assess what facilities, staffing levels and training are appropriate in your workplace. You are advised to consult employees (as appropriate) about the important areas that require consideration such as:

- a. Workplace hazards and risks
- b. Size of organisation and type of service users
- c. History of accidents and incidents
- d. Nature and distribution of workforce including remoteness from emergency services
- e. Needs of travellers, remote and lone workers
- f. Employees working on shared or multi-occupied sites
- g. Annual leave and other absences of first aid trained staff and appointed persons

The assessment of how many and what sort of first aiders are needed requires consideration of the hazards of the work itself, the hazards in the workplace and the numbers of those exposed to risk. Managers should already have a clear picture of the risks that their staff are exposed to from the risk assessments already completed. Managers also need to consider the numbers of staff and others who are present in the location being assessed.

National and corporate guidance on minimum levels of first aid provision **based on staff numbers only** are set out below. However, these minimum levels would need to be increased dependent upon the information determined during the first aid needs assessment itself, such as the number and type of service users on site (eg. children in a school, or five year olds or younger in a centre).

Category of risk	Numbers employed at work	Guidance on number & type of first aid staff to be available on site at any time
<b>Lower Risk</b> eg. primary schools, children centres, some secondary schools, offices, libraries	Less than 25	An Appointed Person
	25 – 50	At least one emergency first aider
	More than 50	One first aider for every 100 employed or part thereof.
<b>Higher risk</b> eg. some secondary schools, workshops, warehousing, use of dangerous machinery use or sharp instrument use, light manufacturing, work with animals or higher risk activities.	Fewer than 5	An appointed person
	5 – 50	At least one first aider (either an emergency first aider or first aider depending on the type of injuries that might occur)
	more than 50	One additional first aider for every 50 persons or part thereof

## ASSESSMENT

### August 2018

		<i>Primary School – 320 pupils and 26 staff</i>		<b>Actual – 150 pupils and 24 staff</b>	
<b>First-aid personnel</b>	<b>Required Y/N</b>	<b>Number needed</b>			
<b>First-aider with first aid at work (FAW) Certificate</b>	No	0	1		Laura Caws FAW Sam Millen FAW Chloe Kirkham FAW
<b>First-aider with an emergency first aid at work (EFAW) certificate</b>	Yes	At least 1 on duty at all times while people are at work.	1		Laura Caws FAW
<b>First-aider with additional training (specify)</b>	Yes	Indicates first-aiders should have training in major illness, paediatric first aid and anaphylaxis. Training can either be provided to existing EFA qualified staff or alternatively staff can be trained in paediatric first aid.	8  10		Paediatric FA <ul style="list-style-type: none"> <li>• Chloe Kirkham</li> <li>• Natalie Holdich</li> <li>• Polly Hutchinson</li> <li>• Rachel Trott</li> <li>• Amy Jacobs</li> <li>• Sarah McInnes</li> <li>• Alana Hollister</li> <li>• Kirsty Flack</li> </ul> Schools First Aid <ul style="list-style-type: none"> <li>• Emma Jefferies</li> <li>• Karen Tregunna</li> <li>• Jane Hughes</li> <li>• Jenny Broadhead</li> <li>• Jane Waters</li> <li>• Natalie Holdich</li> <li>• Julie Hanham</li> <li>• Debbie Spayes</li> <li>• Shawn Weatherall</li> <li>• Kelly Alexander</li> </ul>
<b>Appointed person</b>	Yes	1	1		Sam Millen FAW
<b>First-aid equipment and facilities</b>	<b>Required Y/N</b>	<b>Number needed</b>			
<b>First-aid Container</b>	At least 2	Locations easily accessible across the school	3		1- Pre-School 2- Medical Room 3- School office
<b>Additional equipment (specify)</b>	No	0			Portable first aid container on the playground at breaks and lunches.



<b>Travelling first-aid kit</b>	No	0	4	All in bum bags or carry bags and stored in medical room in main school.
			2	Used for outside in pre-school. Kept on hooks outside door to pre-school (one near main door)
<b>First-aid room</b>	Yes	1	2	Medical room in main school Medical room in Pre-School

<b>Part 1</b>		<b>ASSESSMENT OF FIRST AID NEEDS</b>
<b>Name of Premises/Organisation/School</b>		<b>Stockbridge Primary &amp; Pre-School</b>
<b>No.</b>	<b>Aspects to Consider at Your Premises</b>	<b>First Aid Provision Considerations (Insert Your Information)</b>
<b>1</b>	What are the risks of injury and ill-health arising from the work and activities as identified in your risk assessments?	Low risk
<b>2</b>	Are there any specific risks? (e.g. work with hazardous substances, dangerous tools, dangerous machinery, higher risk activities, HC3S Kitchens, etc)	No specific risk that is not accounted for in risk assessments (eg. exceptions are when Mr Butt is working with specific equipment) First aid box located in medical rooms in both settings which is central to each location.
<b>3</b>	Are large numbers of people employed on site?	No more than 25 staff members and 160 pupils including pre-school.
<b>4</b>	What is your record of accidents and cases of ill-health? What type and where did they happen?	Most incidents and accidents are bumps and grazes on the playground. Most significant incident in 2017/18 was a child slipping out of a tree and paramedics were called.
<b>5</b>	Are there staff/children on site who have disabilities or specific health problems?	Some pupils have SEN or are very young (2 and 3 years old). Some have asthma and are listed in the medial notes in the orange book in the medical room. Others with specific health needs have their needs addressed by the individual health care plans and staff have been trained in dealing with these children where necessary.
<b>6</b>	Are there clients or service users on the site who may need first aid?	School cook may end up loneworking at end or beginning of his shift. Main phone in office can reach him and vice versa. The AO and AA have to give dinner numbers throughout this potential risky time so there is a physical check too.
<b>7</b>	Is there first aid cover for lunch times and for the beginning and end of the working day?	All staff on site by 8.30 and children on site at 8.35am. Breakfast club staff have schools first aid. Plenty of paediatric trained first aiders for our youngest children and many principles apply to the older children also. Staff on duty at lunchtimes all hold schools first aid as a basic minimum.
<b>8</b>	What is the site layout and will the layout require additional first aid cover for separate buildings or floors of a multi-storey building?	Main building and two 'annexe' areas: <ol style="list-style-type: none"> <li>1) Sprat &amp; Winkle classroom</li> <li>2) Pre-School and associated outdoor spaces</li> <li>3) Field and playground are a fair walk from the main building.</li> </ol> Full first aid kits are available in all 3 areas in addition to travel bags with first aid kits available when off site or down in the wildlife garden.
<b>9</b>	Do you have any work experience trainees?	None. If any join us through the year, they will be briefed appropriately and required to sign the briefing sheet.

10	Are there a number of inexperienced or young staff/workers/visitors on site?	Visitors may be on site but would not be expected to deliver first aid.
11	Do the numbers of people on site vary throughout the day. Are extra first aiders needed for peak periods?	With the exception of drop off and pick up, numbers remain largely the same.
12	Do staff work in shift patterns and does each shift have sufficient first aid cover?	No
13	Do you work on a site occupied by other organisations and share first aid arrangements?	No
14	What is the distance from emergency services and how long are they likely to take to arrive on site?	The nearest A&E is at Winchester hospital and an ambulance may take 20 mins. However, we also have first responders in the village and a defibrillator is available at the Town Hall on its external wall.
15	Do some staff work alone or remotely (including contracted home workers)?	Lone working staff are usually limited to site manager and Headteacher during holiday periods, early mornings or late nights. Always have access to first aid boxes and lone working policy applies.
16	Do you have service users aged five years of age or younger?	Yes. In Year R and pre-school – both accommodated for in the above needs assessment.
17	Do members of the public visit your premises?	Yes. FAW and Schools first aid will cover us should there be any risks.
18	Do you have any employees with reading or language difficulties?	Not currently.

<b>Part 2</b>		<b>SUMMARY OF REQUIRED FIRST AID PROVISION</b>	
<b>Name of Premises/Organisation/School</b>		<b>Stockbridge Primary &amp; Pre-School</b>	
<b>Level of First Aid Staff (Type of Provision)</b>	<b>Numbers of Staff Required to be on Site at Any Time</b>	<b>Numbers to be Trained to Meet On-Site Requirement</b>	
<b>Qualified First Aider</b>	1	1	
<b>Emergency First Aider</b>	0	0	
<b>School First Aid Trained</b>	1	3	
<b>Paediatric First Aid Trained</b>	4	4	
<b>Appointed Person</b>	-		
<b>Other: (Please specify)</b>			
<i>(Note: This is not to include any training requirements for medicine administration)</i>			
<b>First Aid Kits</b>	<b>Quantity Required</b>	<b>Locations of First Aid Kits</b>	
<b>Yes</b>	<b>2</b>	Medical room Pre-school med room Also in school office	
<b>Travel First Aid Kits</b>	<b>Quantity Required</b>	<b>Locations of Travel Kits</b>	
<b>Yes</b>	<b>5</b>	Medical room	

		Pre-school med room Sprat & Winkle 7 kits in total	
<b>First Aid Rooms/Areas</b>	<b>Quantity Required</b>	<b>Locations of Rooms</b>	
<b>Yes</b>	<b>1</b>	2 Medical room just inside corridor doors in school Medical room in disabled toilet in pre-school	
<b>Defibrillator / Additional Equipment</b>	<b>Quantity Required</b>	<b>Locations of Rooms</b>	
<b>No</b>	<b>0</b>	If required, on Town Hall external wall.	
<b>First Aid Needs Assessment Completion</b>			
<b>Manager's comments</b>		Insert comments relevant to assessment as appropriate	
All staff trained November 18 unless they hold pre-existing qualifications that meet or exceed the training given in November 2018/			
<b>Name of manager</b>		<b>Signature of manager</b>	<b>Date</b>
Emma Jefferies			12.11.18
<b>Assessment reviews</b>		Set future review dates & sign/comment upon completion	
<b>Review date</b>	<b>Reviewed by</b>	<b>Reviewer signature</b>	<b>Remarks</b>
Nov 19			
Nov 20			
Nov 21			

## WHAT TO DO IF A CHILD HAS AN ASTHMA ATTACK

Assess the child's condition using the guidelines below:

### **REGARD THE ATTACK AS MILD TO MODERATE IF:**

- The child feels breathless but can speak normally.
- Is coughing and/or wheezing (wheezing may or may not be present).
- Has a tight feeling in the chest or throat.
- Looks well.

### **TREATMENT OF MILD TO MODERATE ATTACK**

- Give or allow the child to take two puffs of their own **BLUE RELIEVER INHALER**.
- As soon as the child feels better they can return to school activities.
- If symptoms reappear within FOUR HOURS.
- Give TWO MORE PUFFS of their own **BLUE RELIEVER INHALER**.
- Call the parents to take them home to see a doctor.

### **IF THE BLUE RELIEVER INHALER GIVES NO RELIEF FOLLOW INSTRUCTIONS FOR SEVERE ATTACK**

### **REGARD THE ATTACK AS SEVERE IF:**

- The child is too breathless to complete sentences.
- Is blue around the lips.
- The child seems confused.
- Is exhausted.
- The **BLUE RELIEVER INHALER** does not work.

### **TREATMENT OF A SEVERE ATTACK**

- Keep calm.
- Keep the child sitting upright, leaning slightly forward. not lying down.
- Allow the child space to breathe, loosen tight clothing around the neck.
- Give two puffs of the child's own **BLUE RELIEVER INHALER**, wait five minutes.
- If no improvement, give two more puffs of Ventolin, using the schools emergency Ventolin and spacer.
- Dial 999 for an ambulance or take the child to hospital, and keep on giving two puffs of Ventolin through the spacer every five minutes till you get to medical help.

