



Belmont School

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First Aid Policy

REVIEWED BY:	C Bailey
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NEXT REVIEW:	September 2018



FIRST AID POLICY

Introduction

First aid can save lives and prevent minor injuries becoming major ones. Health and safety legislation places duties on employers for the health and safety of their employees and anyone else on the premises. In schools this includes responsibility for the head teacher and teachers, non-teaching staff, pupils and visitors (including contractors).

The employer is responsible, under Health and Safety etc Act 1974 (HSWA), for making sure that a school has a health and safety policy. This should include arrangements for first aid and cover:

- Number of first aiders / appointed persons;
- Numbers and locations of first-aid containers;
- Arrangements for off-site activities/ trips;

The health and safety of the boys in the care of Belmont school is one of our prime concerns. There are, accordingly, clear procedures laid down by the school to organise the provision of First Aid for the boys and staff both on and off the school premises.

It is assumed that all boys attending school are healthy and fit to cope with the school day without leaving lessons for medical attention. School first aiders are there for accidents, emergencies and illnesses that occur during the course of the school day. The first aiders are deputised by the head teacher.

If a boy is too unwell to remain in school then the office will contact his parents so that he may be taken home, or to inform parents if the boy needs to be taken to hospital. Any boy who has had an accident requiring urgent medical treatment will be taken by ambulance following a 999 call if deemed necessary.

Current School First –Aiders

The secondary school currently has 10 nominated first-aiders

Julian Holgate

Lead First-aiders / Outdoor Education

(Based in KS4 Building & available via radio channel 5)

Ben Adjei

Science & PE instructor

(Based in Science Lab and primary KS3 responder & available via radio channel 5)

- Give immediate help to casualties with common injuries or illnesses and those arising from specific hazards at school;
- When necessary, ensure that an ambulance or other professional medical help is called.
- Any major concerns or injuries must be reported to the lead first-aider without delay.

All first aiders are fully indemnified by the school against claims for negligence provided that they are suitably trained and are acting within the scope of their employment and within the school's guidelines for the administration of first aid.

It is a part of his/her responsibility to administer first aid and to organise (in consultation with senior staff) a boy's transfer to hospital in the case of an emergency. The first aider is usually on site from 8.00am, till 4.00pm, but the boys are not permitted to visit the first aider during lesson times, unless it is an emergency. During the school day, general surgery hours are during assembly, break and lunchtimes.

What schools need to do

The Health and Safety (First-Aid) Regulations 1981 set out what employers have to do.

- Provide adequate and appropriate equipment, facilities and qualified first aid-personnel
- Ensure that provision for employees does not fall below the required standard;
- Ensure that provision for pupils and others complies with other relevant legislation.

Providing information

- The school keeps staff and pupils informed by displaying first-aid notices in prominent locations throughout the site. Additional signage is also displayed on doors for rooms that also contain first aid boxes
- Information regarding first aid arrangements, including who the named first aiders are, is provided as part of the induction process for new staff and pupils.

First-Aid Materials, Equipment and First-Aid Facilities

The school ensures that the proper materials, equipment and facilities are available at all times. First-aid equipment must be clearly labelled and easily accessible.

First aid containers marked with a white cross on a green background are sited in the following areas of the school:

- Front (Operational) Office
- First aid room
- Science Lab

- Name (and class) of the injured or ill person
- Details of the injury/illness and what first aid was given
- What happened to the person immediately afterwards (e.g. went home, returned to normal duties, went back to class, went to hospital etc)
- Name and signature of the first aider dealing with the incident

Additionally the school also has a number of supporting documents and procedures to ensure that all incidents of injury, illness and first-aid treatment is reported and recorded.

Accident Book: The school maintains a record of any first aid treatment given by first aiders via the accident book which is held centrally in the school office (operational). Responsibility for completing the book lies with the first-aider administering the treatment in consultation with the Operations Manager.

Accident Recording: Copies of all accident report forms are stored electronically via the SHE system. Responsibility for maintaining these records currently lies with the school administrator (Sam Townend).

Body Mapping: Any mark or injury sustained at school is recorded on a body map form, including treatment provided, and a copy kept in the pupil's record folder in the central office.

Storage: Five Year Storage is provided in the office for Registers, Accident Reports, Medical Certificates, Parents' Absence Letters, Medical Attendance Sheets and Medical Cards.

Medical Forms: Medical forms are completed for each boy by the parents on admission to BELMONT SCHOOL. This form describes any relevant medical or pastoral history, any relevant treatment and newly diagnosed conditions. These medical forms are in a locked filing cabinet and are updated as and when the need arises or circumstances change.

Recording and reporting accidents to pupils

All accidents to children on the premises must be logged in the accident book.

All accidents to children off the premises must be recorded in any relevant accident book off the premises AND in the school's own accident book.

For more serious incidents an Acorn accident report form will be completed by the Head teacher (and/or lead first-aider) and returned to Acorn Care and Education head office for children when:

- They receive a significant head injury (at school's discretion)

Special Arrangements

In some cases children with medical needs may be more at risk than others. Staff may need to take additional steps to safeguard the health and safety of such children.

On going risk assessment is carried out periodically and individuals with specific medical needs or requirements may have their own positive handling plan (PHP).

The Head teacher (or a delegated member of the Senior Leadership Team - SLT) is responsible for making sure that all relevant staff know about, and are if necessary trained to provide any additional support or care these children may require.

Information and guidance for dealing with children with conditions such as:

- Anaphylaxis
- Asthma
- Diabetes
- Epilepsy

can be found in the supporting "medical conditions in schools" guidance packs located in the first aid folder and also available electronically via the schools network.

Sick or poorly children

Pupils who arrive in school unwell or develop illness or sickness during the course of the day will not automatically be returned home. Initially students will be monitored by first-aiders and a view taken to the severity of their sickness. Liaison between senior staff and parents/ carers will then dictate whether a child is returned home. No pupil is to be returned home without prior parental consent and confirmation that there will be someone at home to receive them. Pupils will also be monitored regarding the nature and frequency of sickness/illness including those who may be seen to feign or exaggerate feeling unwell.

General Pain Relief

As a general rule the school will not issue general pain relief (such as paracetamol) to pupils apart from those with prior parental/ carer permission. For any pupil requesting unauthorised or unscheduled pain relief the school must seek parental / carer authorisation prior to its administration

Head Injuries

Any person (child or adult) receiving a bang to head will immediately be seen by one of the school's first-aiders. The individual will then be closely monitored and supervised for any potential side effects or concussion.

Parents / carers will be informed (initially by telephone) and a 'bang on the head letter sent home that day.

If an incident occurs in an establishment where body fluids have been exchanged (for example during playground or sportsfield injuries or biting incidents) the first-aider needs to be told who can then assess the need for expert medical advice whilst also ensuring the head teacher remains informed.

It is the responsibility of the head teacher to ensure that good hygiene and infection control procedures are followed in accordance with existing health and safety infection control policies and procedures.

Child Protection

If any concerns are raised that have Safeguarding implications e.g. unexplained marks or scars whilst a person is being treated for first aid, the First Aider must inform the designated Child Protection Officer who will take the appropriate action. All staff at the school receive regular Child Protection training as part of our INSET programme. The current designated officers are Sharon Everitt & Andy McGoldrick.

Automated external defibrillation (AED) –

The school has an AED. It is located centrally in the main office (operations).

Although the device is self-teaching providing step by step guidance for those using it we are in the process of arranging AED training for a number of key staff. currently has no provision for AED.

Further information can be obtained from "Guidance on First Aid for Schools" issued by the DFE which itself offers a list of useful publications and contacts.

Policy last updated: September 2017 by:

C. Bailey (Operations Manager) / J. Holgate (Lead first-aider)

Next scheduled review date: September 2018

NB – HSE on-line first aid assessment tool also completed to help guide policy review (report attached)