



First Aid POLICY

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1. Aims

The aims of our first aid policy are to:

- Ensure the health and safety of all staff, students and visitors
- Ensure that staff 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

2. Legislation and guidance

This policy is based on advice from the Department for Education on [first aid in schools](#) and [health and safety in schools](#), and the following legislation:

- [The Health and Safety \(First Aid\) Regulations 1981](#), which state that employers must provide adequate and appropriate equipment and facilities to enable first aid to be administered to employees, and qualified first aid personnel
- [The Management of Health and Safety at Work Regulations 1992](#), which require employers to make an assessment of the risks to the health and safety of their employees
- [The Management of Health and Safety at Work Regulations 1999](#), which require employers to carry out risk assessments, make arrangements to implement necessary measures, and arrange for appropriate information and training
- [The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations \(RIDDOR\) 2013](#), which state that some accidents must be reported to the Health and Safety Executive (HSE), and set out the timeframe for this and how long records of such accidents must be kept
- [Social Security \(Claims and Payments\) Regulations 1979](#), which set out rules on the retention of accident records
- [The Education \(Independent School Standards\) Regulations 2014](#), which require that suitable space is provided to cater for the medical and therapy needs of students

3. Roles and responsibilities

3.1 Appointed person(s) and first aiders

The school's appointed person are the Welfare Officers. They are responsible for:

- Taking charge when someone is injured or becomes ill
- Ensuring there is an adequate supply of medical materials in first aid kits, and replenishing the contents of these kits
- Ensuring that an ambulance or other professional medical help is summoned when appropriate

First aiders are trained and qualified to carry out the role (see section 7) and are responsible for:

- Acting as first responders to any incidents; they will assess the situation where there is an injured or ill person, and provide immediate and appropriate treatment
- Sending students home to recover, where necessary
- Filling in an accident report on the same day, or as soon as is reasonably practicable, after an incident.
- Keeping their contact details up to date

Our school's first aiders are displayed prominently around the school.

3.2 The governing board

The governing board has ultimate responsibility for health and safety matters in the school, but delegates operational matters and day-to-day tasks to the headteacher and staff members.

3.4 The headteacher

The headteacher is responsible for the implementation of this policy, including:

- Ensuring that an appropriate number of trained first aid personnel are present in the school at all times
- Ensuring that first aiders have an appropriate qualification, keep training up to date and remain competent to perform their role
- Ensuring all staff are aware of first aid procedures
- Ensuring appropriate risk assessments are completed and appropriate measures are put in place
- Undertaking, or ensuring that managers undertake, risk assessments, as appropriate, and that appropriate measures are put in place
- Ensuring that adequate space is available for catering to the medical needs of students
- Reporting specified incidents to the HSE when necessary (see section 6)

3.5 Staff

School staff are responsible for:

- Ensuring they follow first aid procedures
- Ensuring they know who the first aiders in school are
- Completing accident reports for all incidents they attend to where a first aider is not called by liaising with the Welfare Officers
- Informing the headteacher or their manager of any specific health conditions or first aid needs

4. First aid procedures

4.1 In-school procedures

In the event of an accident resulting in injury or a student feeling unwell:

- The closest member of staff present will assess the seriousness of the injury and seek the assistance of a qualified first aider, if appropriate, who will provide the required first aid treatment
- The first aider, if called, will assess the injury and decide if further assistance is needed from a colleague or the emergency services. They will remain on scene until help arrives
- The first aider will also decide whether the injured person should be moved or placed in a recovery position
- If the first aider judges that a student is too unwell to remain in school, parents will be contacted and asked to collect their child. Upon their arrival, the first aider will recommend next steps to the parents
- If emergency services are called, the first aider supporting the student will contact parents immediately
- The first aider will complete an accident report form on the same day or as soon as is reasonably practical after an incident resulting in an injury

4.2 Off-site procedures

When taking students off the school premises, staff will ensure they always have the following:

- A school mobile phone or other appropriate means of communication
- A portable first aid kit
- Information about the specific medical needs of students
- Any student medication i.e epi pen, inhaler etc.
- Parents' contact details

Risk assessments will be completed by the visit lead prior to any educational visit that necessitates taking students off school premises.

The Welfare Officers will monitor Evolve to be aware of trips taking place. The trip lead will liaise with the Welfare Officers to ensure they have an appropriate first aid kit and are briefed on medical conditions students may have.

5. First aid equipment

A typical first aid kit in our school will include the following:

- A leaflet with general first aid advice
- Regular and large bandages
- Eye pad bandages
- Triangular bandages
- Adhesive tape
- Safety pins
- Disposable gloves
- Antiseptic wipes
- Plasters of assorted sizes
- Scissors
- Ice pack
- Plastic tweezers
- Face mask
- Burns dressings

No medication is kept in first aid kits.

First aid kits are stored in:

- The medical room

- Reception (at the desk)
- All science labs
- All design and technology classrooms
- The school kitchens
- School vehicles

The location of First Aid kits is included on notices listing first aiders displayed around the school. These are checked termly by the Welfare Officers to ensure they still contain all the relevant equipment.

6. Record-keeping and reporting

6.1 First aid and accident recording

- An online accident form will be completed by the first aider on the same day or as soon as possible after an incident resulting in an injury
- As much detail as possible should be supplied when reporting an accident.
- Details of the accident will also be added to the student's educational record by the School's Welfare Officers.
- Where appropriate, an investigation of the incident, including near misses, will be carried out at a level appropriate to the incident and outcomes/actions will be recorded on the accident report.
- Records held in the school's accident reporting system will be retained by the school according to its retention policy – until the student is 25 years of age.

See Incident reporting & Investigation Guidance for staff – Appendix 1

6.2 Reporting to the HSE

The Welfare Officer will keep a record of any accident which results in a reportable injury, disease, or dangerous occurrence as defined in the RIDDOR 2013 legislation (regulations 4, 5, 6 and 7).

The school will report these to the Health and Safety Executive as soon as is reasonably practicable and in any event within 10 days of the incident. Advice will be sought from the school's Health & Safety advisors who also monitor the accident and reporting system.

Reportable injuries, diseases or dangerous occurrences include:

- Death
- Specified injuries, which are:
 - Fractures, other than to fingers, thumbs and toes
 - Amputations
 - Any injury likely to lead to permanent loss of sight or reduction in sight
 - Any crush injury to the head or torso causing damage to the brain or internal organs
 - Serious burns (including scalding)
 - Any scalping requiring hospital treatment
 - Any loss of consciousness caused by head injury or asphyxia
 - Any other injury arising from working in an enclosed space which leads to hypothermia or heat-induced illness, or requires resuscitation or admittance to hospital for more than 24 hours
- Injuries where an employee is away from work or unable to perform their normal work duties for more than 7 consecutive days (not including the day of the incident)
- Where an accident leads to someone being taken to hospital

- Near-miss events that do not result in an injury, but could have done. Examples of near-miss events relevant to schools include, but are not limited to:
 - The collapse or failure of load-bearing parts of lifts and lifting equipment
 - The accidental release of a biological agent likely to cause severe human illness
 - The accidental release or escape of any substance that may cause a serious injury or damage to health
 - An electrical short circuit or overload causing a fire or explosion

Information on how to make a RIDDOR report is available here:

[How to make a RIDDOR report, HSE](http://www.hse.gov.uk/riddor/report.htm)

<http://www.hse.gov.uk/riddor/report.htm>

7. Training

All first aiders must have completed a training course, and must hold a valid certificate of competence to show this. The school will keep a register of all trained first aiders, what training they have received and when this is valid until.

Staff are encouraged to renew their first aid training when it is no longer valid. The school provides annual asthma and allergies training to all staff.

8. Monitoring arrangements

This policy will be reviewed by the Operations Manager annually.

At every review, the policy will be approved by the headteacher and the school's Governing Body.

9. Links with other policies

This first aid policy is linked to the

- Health and safety policy
- Risk assessment policy
- Substance use and misuse policy
- School Visits & Journeys Policy
- Supporting Students with Medical Conditions Policy

Appendix 1: Incident reporting & investigation guidance for staff

1. Key Responsibilities

Welfare officers record incident following procedure below and alerts site team/Operations Manager. Site Team preserve the scene immediately and record any findings including photographs

Operations Manager – is the lead investigating officer initially. Ensures all appropriate evidence is gathered. Records investigation on the school's incident investigation template and communicates with relevant staff re reviewing relevant risk assessments is completed as soon as reasonably practicable.

Head Teacher – Designates lead investigator for significant investigations and signs off investigations as being complete

2. When to use the online system to report incidents

The school uses an online system for the recording of accidents/incidents and near misses. The current system is provided by the H&S consultants. When an accident is recorded the system alerts the Headteacher, Operations Manager & Deputy Headteacher. All incidents/accidents/near misses are reviewed on the online system by the H&S consultant and Operations Manager.

Follow up investigations are also recorded on the system by the Welfare Officers with any supporting evidence/documentation including witness statements, photographs, measurements etc. Investigations are recorded by the Operations Manager.

Supporting documentation for the online system can be found at A:\Health & Safety\Incident investigation and follow up

What incidents to report on the online system

- Serious incidents requiring further medical treatment other than first aid administered in school e.g. where an ambulance was called or the person injured was taken to a GP, walk in centre or hospital.
- Incidents where there has been a failure in a health and safety system e.g. poor supervision, equipment defect or structural fault that led to the incident. For example, where a student injured themselves on a trampoline that had been found to be defective.
- Any incident involving an employee
- Any incident where the school feels there is potential for a personal injury claim or other complaint, and requires support from Carstens & Robinson Ltd. (See Section 6 Reviewing Incidents below)

What not to report on the online system

- Any incidents that have been dealt with through on-site minor first aid e.g. a plaster such as small cuts, bumps, or bruises
- Incidents that cannot be prevented e.g. if a student was not looking where they were going and bumped into the wall and bruised their arm.

However, it is essential we keep a record of these minor incidents. These are recorded in the student's record on SIMS.

3. What to include in an incident report

Type of injury incident

- **Minor injury** – An injury requiring first aid, usually administered by on site staff, or at a walk in centre or similar.
- **Injury resulting in 1-7 days lost time** – An injury where the injured party is absent for 1 to 7 days or unable to carry out their normal duties for up to 7 days.
- **Over 7 day reportable injury** – An injury where the injured party is absent for over 7 days not including day of injury or unable to carry out their normal duties for over 7 days. If this is an injury to an employee whilst they are at work then it would be reportable to the HSE (see section 3 below).
- **Major injury** – A serious injury requiring hospital treatment including fractures, hospital admissions over 24 hours, permanent loss or reduction of sight, and serious burns. Certain defined major injuries are reportable to the HSE (see section 3 below)

- **Fatality** – An injury leading to the death of the injured part
- **Near miss** - An incident or event that does not cause an injury but has the potential to cause harm e.g. brick knocked off high level scaffold falling to ground without hitting anyone.

What to include in the details section of the accident / incident report

Incident reports should be as factual as possible, and should include sufficient information for the type of incident. For example, a minor slip / trip may only require one or two sentences, but a more serious incident would require more detailed information. Incident reports may be disclosed (with the injured parties permission) to solicitors at a later date in the event of a claim so it is important that all the information included is as full and accurate as possible.

Specific items to consider include:

- What activity was taking place at the time.
- What equipment, materials, clothing including personal protective equipment were in use at the time.
- The environmental conditions at the time e.g. it was raining or icy for accidents that occur outside.
- The level of supervision at the time of the accident.
- What medical attention was administered
- Also remember to include any further information that becomes available at a later date e.g. length of sickness absence, or confirmation of a fracture.
- It is important to identify the likely cause of the incident using the drop-down lists. This is a key area where trend monitoring is useful so select the most appropriate cause from the drop-down list.

What action has already been taken (if any) section

In this box include details of what actions have been taken as a result of the incident. This can include the first aid or other medical treatment provided, but it is also important to record any remedial actions taken. This could include inspecting the scene of the incident for damage, any repairs made, or further training needs identified. See section 4 Investigations for more detail on this. This is recorded by the medical officer at the time of logging the incident

4. Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR)

Certain types of incident are reportable to the HSE under RIDDOR. A basic summary is included in the table below, but more information is available at: <http://www.hse.gov.uk/riddor/>

Reportable injuries	<ul style="list-style-type: none"> ▪ All deaths to workers and non-workers, with the exception of suicides, must be reported if they arise from a work-related accident, including an act of physical violence to a worker. ▪ Major Injuries, including: <ul style="list-style-type: none"> ▪ Fractures, other than to fingers, thumbs and toes ▪ Amputations ▪ Any injury likely to lead to permanent loss of sight or reduction in sight ▪ Any crush injury to the head or torso causing damage to the brain or internal organs ▪ Serious burns (including scalding) which: <ul style="list-style-type: none"> ▪ covers more than 10% of the body ▪ causes significant damage to the eyes, respiratory system or other vital organs ▪ Any scalping requiring hospital treatment ▪ Any loss of consciousness caused by head injury or asphyxia ▪ Any other injury arising from working in an enclosed space which: <ul style="list-style-type: none"> ▪ leads to hypothermia or heat-induced illness ▪ requires resuscitation or admittance to hospital for more than 24 hours ▪ Accidents must be reported where they result in an employee or self-employed person being away from work, or unable to perform their normal work duties, for more than seven consecutive days as the result of their injury. This seven day period does not include the day of the accident, but does include weekends and rest days. The report must be made within 15 days of the accident.
Diseases	<ul style="list-style-type: none"> ▪ Carpal tunnel syndrome ▪ Severe cramp of the hand or forearm ▪ Occupational dermatitis ▪ Hand-arm vibration syndrome ▪ Occupational asthma ▪ Tendonitis or tenosynovitis of the hand or forearm ▪ Any occupational cancer ▪ Any disease attributed to an occupational exposure to a biological agent
Dangerous occurrences	<ul style="list-style-type: none"> ▪ The collapse, overturning or failure of load-bearing parts of lifts and lifting equipment ▪ Plant or equipment coming into contact with overhead power lines ▪ The accidental release of any substance which could cause injury to any person.

RIDDOR in relation to students

In general, RIDDOR only applies to people at work. Students and students are not at work and so are regarded as members of the public for RIDDOR. However, injuries to students and visitors who are involved in an accident at school or on an activity organised by the school are only reportable under RIDDOR if the accident results in:

- The death of the person, and arose out of or in connection with a work activity
- An injury that arose out of or in connection with a work activity and the person is taken directly from the scene of the accident to hospital for treatment (examinations and diagnostic tests do not constitute treatment)

The lists of specified injuries and diseases described for employees under RIDDOR do not apply if a student who is injured in an incident remains at school, is taken home or is simply absent from school for a number of days, the incident is not reportable.

How do I decide whether an accident to a student arises out of or is in connection with work?

The responsible person at the school should consider whether the incident was caused by:

- A failure in the way a work activity was organised (e.g. inadequate supervision of a field trip);
- The way equipment or substances were used (e.g. lifts, machinery, experiments etc); and/or
- The condition of the premises (e.g. poorly maintained or slippery floors).

So, if a student is taken to hospital after breaking an arm during an ICT class, following a fall over a trailing cable, the incident would be reportable. If a student is taken to hospital because of a medical condition (eg an asthma attack or epileptic seizure) this would not be reportable, as it did not result from the work activity.

This means that many of the common incidents that cause injuries to students at school tend not to be reportable under RIDDOR, as they do not arise directly from the way the school undertakes a work activity. Remember, in all these cases, you only need to consider reporting where an accident results in a student's death or they are taken directly from the scene of the accident to hospital for treatment. There is no need to report incidents where people are taken to hospital purely as a precaution, when no injury is apparent.

What about accidents to students during sports activities?

Not all sports injuries to students are reportable under RIDDOR, as organised sports activities can lead to sports injuries that are not connected with how schools manage the risks from the activity.

The essential test is whether the accident was caused by the condition, design or maintenance of the premises or equipment, or because of inadequate arrangements for supervision of an activity. If an accident that results in an injury arises because of the normal rough and tumble of a game, the accident and resulting injury would not be reportable. Examples of reportable incidents include where:

- The condition of the premises or sports equipment was a factor in the incident, e.g. where a student slips and fractures an arm because a member of staff had polished the sports hall floor and left it too slippery for sports
- There was inadequate supervision to prevent an incident, or failings in the organisation and management of an event.

What about accidents to students in a playground?

Most playground accidents due to collisions, slips, trips and falls are not normally reportable. Incidents are only reportable where the injury results in a student either being killed or taken directly to a hospital for treatment. Either is only reportable if they were caused by an accident that happened from or in connection with a work activity.

This includes incidents arising because:

- The condition of the premises or equipment was poor, e.g. badly maintained play equipment
- The school had not provided adequate supervision, e.g. where particular risks were identified, but no action was taken to provide suitable supervision

Physical violence

Violence between students is a school discipline matter and not reportable under RIDDOR, as it does not arise out of or in connection with a work activity.

The key thing to consider when deciding whether to report an incident to a student or other person who is not at work is whether the accident arose out of or was connected with the work activity.

The HSE have produced a guidance note on RIDDOR in schools, which is available at: <http://www.hse.gov.uk/pubns/edis1.htm>

Contact Health and Safety consultants if in any doubt or if further advice is required.

5. Investigating Incidents

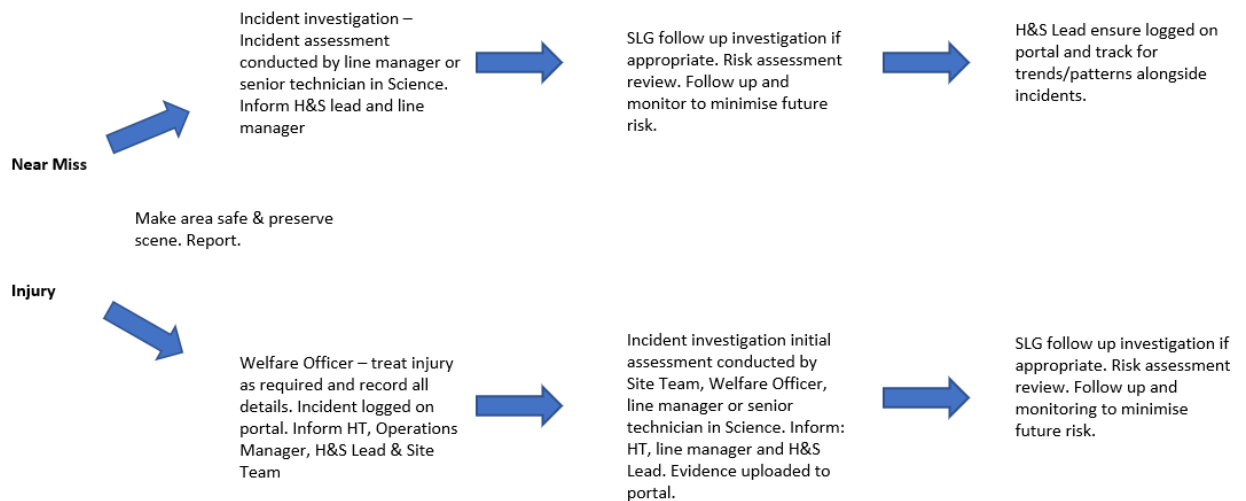
It is important to investigate incidents to identify the cause and to then prevent it from happening again. Information may also need to be collected for enforcement agencies or insurers.

There are three main levels of cause that can be picked up during an investigation.

- **Immediate causes** are unsafe actions or lack of action and unsafe conditions. They are the most obvious reason why an adverse event happens e.g. the guard is missing or the employee slips. If the investigation stops at this point then there is a far higher likelihood that it will happen again. There also may be several immediate causes identified in any one adverse event.
- **Underlying causes** are factors that allow unsafe actions and conditions to happen. They are the less obvious system or organisational reasons for an adverse event happening, e.g. pre-start-up machinery checks are not carried out by supervisors, the hazard has not been adequately considered via a suitable and sufficient risk assessment, or work pressures are too great.
- **Root causes** are factors that may cause conditions that could result in an undesirable event. They are the initiating event or failing from which all other causes or failings spring. Root causes are generally management, planning or organisational failings.

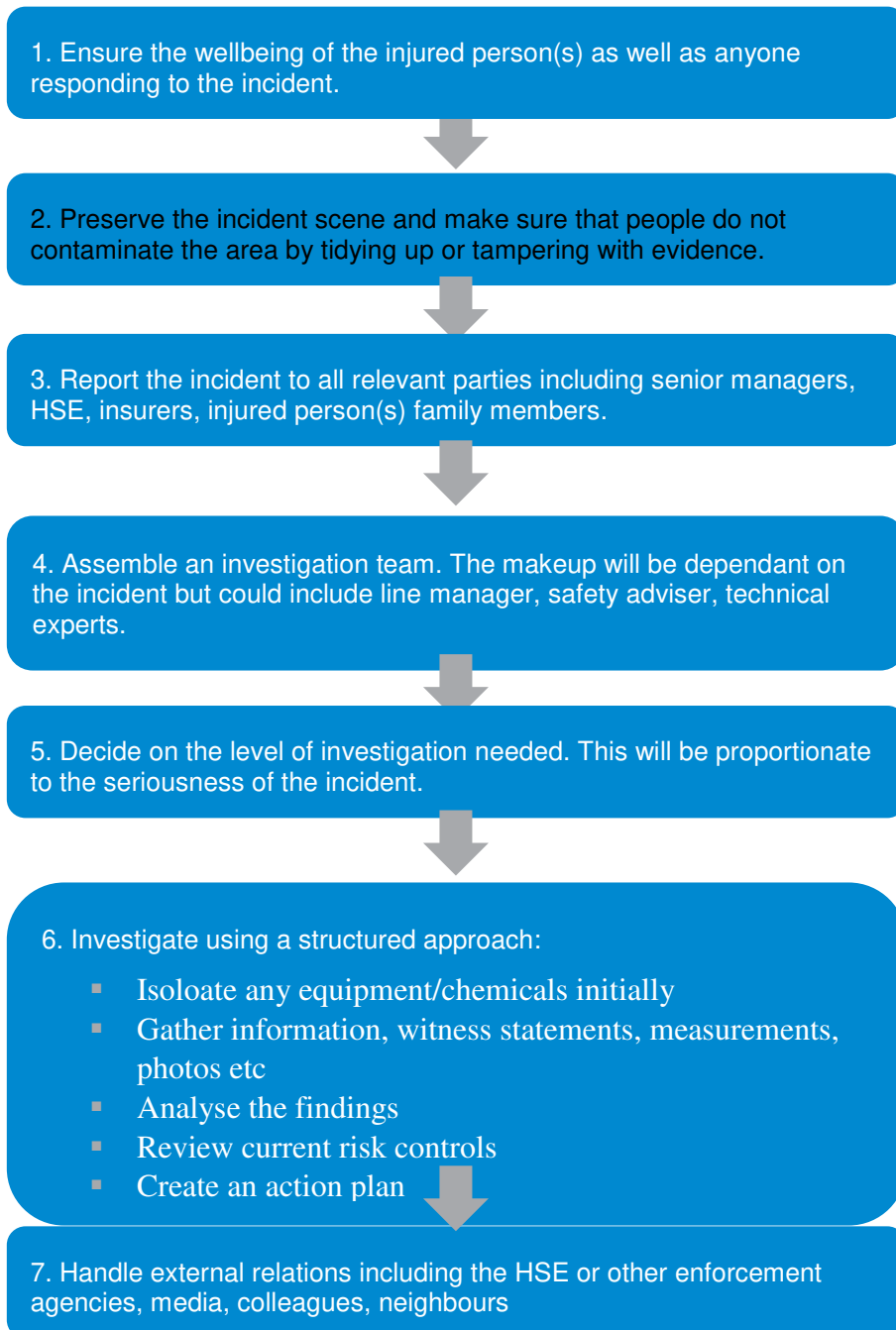
An investigation should attempt to identify the underlying and, especially, the root causes of an incident. By identifying and addressing the root causes of an incident there is a far greater likelihood that an incident will be prevented.

It is essential that near misses are also investigated to prevent further incidents where injury may be caused.



A summary of the investigation process is included below.

Carrying out an investigation



Retention of documents

It is a legal requirement to retain accident reports and investigations as per the trust's 'School's Records Management' policy.

Hints and tips

- When investigating an incident it can be useful to consider the following:
 -
 - Materials – What materials, chemicals or other substances were being used
 - Equipment – What tools, equipment or other devices were being used
 - Environment – Lighting levels, floor condition, space, weather conditions
 - People – Training, skills, knowledge, experience, work pressures, ability levels, medical conditions
 -
- When carrying out incident investigations, remember to keep the level of investigation proportionate to the level of the incident.
- Documenting an investigation is important. Even if it is just a note on the incident report to say that the area has been examined and nothing amiss was identified. Photos are a particularly good way of documenting evidences as they provide the proof and backup to any statements made.
- If any remedial actions are identified as a result of the investigation, then there should be a process to ensure that they are closed out within the specified timeframe.
- Sharing the learning from any incident investigation is perhaps the most useful part of the process as this will help prevent future incidents.
- A user guide for the investigation facility on the online system is available in the help section.
- The relevant risk assessments must be reviewed and updated following an investigation.