



## First Aid Policy

### Policy for Alternative Provision Providers used by County Durham Schools

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This policy is based on advice from the Department for Education on first aid in schools and health and safety in schools, and guidance from the Health and Safety Executive (HSE) on incident reporting in schools, and the following legislation:

[The Health and Safety \(First-Aid\) Regulations 1981 \(legislation.gov.uk\)](#) - which states 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 \(legislation.gov.uk\)](#) - 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 \(legislation.gov.uk\)](#) - which require employers to carry out risk assessments, make arrangements to implement necessary measures and arrange for appropriate information and information and training.

[The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 \(legislation.gov.uk\)](#) - which states that some accidents must be reported to the HSE and set out the timeframe for this and how long records of such incidents must be kept.

## **First Aid**

It is the requirement of the Health and Safety in Employment Act 1992 to ensure that every student, member of staff and visitors are well looked after in the event of an accident, no matter how major or minor.

The purpose of the policy is to:

- Provide effective, safe first aid cover for students, staff and visitors
- Ensure that all staff and students are aware of the systems in place
- Provide awareness of health and safety issues within the provision and on trips
- To prevent, where possible, potential dangers or accidents

The term first aider refers to those members of staff who are in possession of a valid First Aid certificate or equivalent.

### **First Aiders will:**

- Ensure that their qualification and insurance (provided by provision) are always up to date
- Ensure that first aid cover is available throughout the working hours of the school week
- Always attend a casualty when requested to do so and treat the casualty to the best of their ability, in the safest way possible. This includes wearing gloves where any loss of blood or body fluid is evident, calling for help from other First Aiders or Emergency Services.
- Help fellow First Aiders at an incident and provide support during the aftermath
- Act as a person who can be relied upon to help when the need arises
- Ensure that their portable first aid kits are adequately stocked and always to hand
- Insist that any casualty who has sustained a significant head injury is seen by professionals at the hospital, either by sending them directly to hospital or by asking parents to pick up their child to take them to hospital, ensuring that parents are fully aware of all head injuries promptly.
- Ensure that a child who is sent to hospital by ambulance is either, accompanied in the ambulance at the request of the paramedics followed to hospital by a member of staff to act in loco parentis if a relative cannot be contacted or met at the hospital by a relative
- The First Aider need not be the member of staff to accompany the casualty to hospital, however an appropriate person should be sent
- Liaison must occur with the teacher in charge of cover, to ensure that lessons are covered in the event of a teacher being absent
- Keep a record of each student attended to, the nature of the injury and any treatment given. (See Accident/incident Policy).

- The relevant online form should be completed
- Ensure that everything has been cleared away using gloves and ensure that all dressings etc is put into a yellow bag for contaminated / used items and sealed tightly before disposing in the bin. Any bloodstains on the ground must be washed away thoroughly. No contaminated or used items should be left lying around.

**SLT will:**

- Provide adequate first aid cover as outlined in the first aid cover as outlined in the Health and Safety (First Aid) regulations 1981
- Monitor and respond to all matters relating to the health and safety of all persons on school premises
- Ensure all staff are made aware of the first aid procedures in school
- Ensure that staff always obtain the history relating to a student not feeling well, particularly in the case of headaches, to ensure that no injury has caused the student to feel unwell
- Ensure that in the event that an injury has caused a problem, the student must be referred to the First Aider for examination
- On admission, provide the first aid team with the names of students known to be asthmatic, anaphylactic, diabetic, epileptic, eczema on medication for ADHD or any other known medical condition
- Have an up-to-date medical consent form for every student where applicable and ensure that these are readily available for staff responsible for school trips etc...

**Teachers will:**

- Familiarise themselves with the first aid procedures in operation and ensure that they know who the current first aiders are
- Be aware of specific medical details of individual students
- Ensure that the students are aware of the first aid procedures
- Never move a casualty until they have been assessed by a qualified first aider unless the casualty is in immediate danger
- Call for assistance as soon as possible
- Reassure but never treat a casualty unless staff are in possession of a valid first aid qualification or know the correct procedures.
- Ensure that there is a current medical consent form for every student who is taken out on a school trip which indicates specific conditions or medication of which they should be aware
- Have regard for personal safety

Onsite students in KS3 and 4 have access to over-the-counter medication, such as paracetamol and throat lozenges. A child under 16 should never be given medicine containing aspirin unless prescribed by a doctor. This is only when school staff have

contacted parents to confirm medication has previously been taken and if so what and when. The time and strength of medication is logged in the short-term medication file with a rider notifying staff should paracetamol be requested on 3 consecutive days, staff to inform parents to take their child to the GP for further guidance.

## **Reporting to the HSE**

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

The site manager will report these to the HSE as soon as is reasonably practicable and in any event within 10 days of the incident – except where indicated below. Fatal and major injuries and dangerous occurrences will be reported without delay (i.e by telephone) and followed up in writing within 10 days.

## **Education Plus Staff – 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) which covers more than 10% of the whole body's total surface area or 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 leads to hypothermia or heat-induced illness or requires resuscitation or admittance to hospital for more than 24 hours.
- Work related injuries that lead to an employee being away from work or unable to perform their normal work duties for more than 7 consecutive days (not including the day of the incident). In this case, SLT will report these to the HSE as soon as reasonably practicable and in any event within 15 days of the accident.
- Occupational diseases where a doctor has made a written diagnosis that the disease is linked to the occupational exposure. These include; carpal tunnel syndrome, severe cramp of the hand or forearm, occupational dermatitis, eg from exposure to strong acids or alkalis, hand-arm vibration, occupational asthma, eg from wood dust, tendonitis or tenosynovitis of the hand or forearm, any occupational cancer and any disease attributed to an occupational exposure to a biological agent
- Near miss events that do not result in an injury but could have done. Examples of near-miss events relevant to schools include, but not limited to: the collapse or failure of load bearing parts of lifts or 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 and an electrical short circuit or overload causing a fire or explosion

**Pupils and other people who are not at work (e.g visitors): reportable injuries, diseases or dangerous occurrences include:**

- Death of a person that arose from, or was in connection with a work activity\*
- An injury that arose from, or was in connection with a work activity\* and the person is taken directly from the scene of the accident for hospital treatment

\*An accident 'arises out of' or is 'connected with a work activity' if it 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...)
- The condition of the premises (e.g poorly maintained or slippery floors)

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

[How to make a RIDDOR report - RIDDOR - HSE](#)

## **First Aid containers are located:**

### **Teesside (Eston) Site:**

In the main office

In the main area (open space)

On the minibus

### **Sacriston Site:**

KS4 – store area

The Farm – main office

KS3 – school office top site

## **Contents of first aid kits:**

There is no mandatory list of items for a first aid container. However, the HSE recommend that where there is no specific risk identified, a minimum provision should include:

- A leaflet giving general advice on first aid
- Individually wrapped sterile adhesive dressings (assorted sizes)
- Sterile eye pads
- Individually wrapped triangular bandages
- Safety pins
- Individually wrapped sterile un-medicated wound dressings (assorted sizes)
- Disposable gloves
- Antiseptic wipes
- Additional items where acceptable

## **First aid kits should be:**

- Maintained in a good condition
- Suitable for the items enclosed
- Readily available for use
- Prominently marked as a First Aid container (green with a white cross)

## **Useful Contacts**

### **HSE**

Quay House  
Quay Street  
Manchester  
M3 3JB  
0161 9528276

### **British red Cross**

9 Grosvenor Crescent  
London  
SW1X 7EJ

### **ROSPA**

Edgbaston Park  
353 Bristol Road  
Birmingham  
B5 7ST

### **Department of Health**

Wellington House  
133-135 Waterloo Road  
London  
SE1 8UG

### **St Johns Ambulance**

1 Grosvenor Crescent  
London  
SW1X 7EF