

Dated September 2021

Islamia Girls School/Brondesbury College “The School”

First Aid Policy

CONTENTS

CLAUSE		PAGE
1	INTRODUCTION.....	2
2	PURPOSE	2
3	AIMS.....	2
4	RECORDING AND REPORTING ACCIDENTS	2
5	RIDDOR.....	2
6	ARRANGEMENTS FOR FIRST AID	3
7	PROVISION AWAY FROM SCHOOL/OUT OF SCHOOL HOURS.....	4
8	STUDENTS WITH SPECIFIC HEALTH CONDITIONS.....	5
9	STAFF WITH SPECIFIC HEALTH CONDITIONS	5
10	DISPENSING MEDICINES	5
11	GIVING FIRST AID	5
12	FIRST PRIORITIES	5
13	LETTERS TO PARENTS	6

1. Introduction

- 1.1. This policy outlines the Schools' responsibility to provide adequate and appropriate first aid to students, staff, parents and visitors and the procedures in place to meet that responsibility.
- 1.2. This policy applies to all students and staff in the School.
- 1.3. The Head Teacher will ensure that all staff and students are aware of this policy and that it is regularly reviewed with the Senior First Aiders.
- 1.4. This Policy must be read together with the Safeguarding and School trips policies and in conjunction with the School's risk assessments for specific subject areas, such as Science and P.E., as well as the DfE's 'Guidance on First Aid for Schools' (2014) and 'Supporting pupils at school with medical conditions' (2015).

2. Purpose

- 2.1. The purpose of the First Aid Policy is to ensure the safest possible environment for School staff, students and visitors to the School.

3. Aims

- 3.1. Provide awareness of the health and safety issues within the School.
- 3.2. Ensure all staff and students are aware of the system in place which will prevent where possible potential accidents or dangers.
- 3.3. Ensure there is effective First Aid cover for students, staff and visitors.

4. Recording and Reporting Accidents

- 4.1. In the event of an accident, the injured person must be seen by a First Aider.
- 4.2. It is the duty of any teacher/adult/student present to call one of the First Aiders.
- 4.3. The complete, updated list of Senior First Aiders/First Aiders at each School is displayed in the School office.
- 4.4. There is a School Accident Record Book that must be completed and held for all accidents at the School.
- 4.5. The Accident Record Book is kept in the Staff room (IGS)/ Main Office (BCB).
- 4.6. The School's Accident Record is mandatory for every accident that occurs on and off the School's premises (e.g. on a School trip).

5. Reporting for Serious Injuries/Accident (RIDDOR):

- 5.1. The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013, (RIDDOR) is a Statutory Instrument of the Parliament of the United Kingdom.
- 5.2. It regulates the statutory obligation to report deaths, injuries, diseases and "dangerous occurrences" that take place at work or in connection with work.
- 5.3. Under RIDDOR some accidents must be reported to the HSE (Health and Safety Executive) as follows:
 - 5.3.1. HSE must be notified IMMEDIATELY for fatal or major injuries by telephone (0345 300 9923) or via the website <https://www.hse.gov.uk/riddor/report.htm> giving accident details
 - 5.3.2. HSE will send a form/report to be completed by the School, and accident details previously given over the telephone verified. This must be returned immediately
- 5.4. Other types of injuries/accidents that must be reported are listed in the RIDDOR Guidelines. These include injuries resulting from assault.

6. Arrangements for First Aid

- 6.1. Materials, Equipment and Facilities:
 - 6.1.1. Location of First Aid Boxes at Brondesbury College:
 - 6.1.1.1 Medical Room
 - 6.1.1.2 School Office
 - 6.1.1.3 Staff Room
 - 6.1.1.5 Biology Lab
 - 6.1.1.5 Chemistry/Physics Lab
 - 6.1.2. Location of First Aid Boxes at Islamia Girls School:
 - 6.1.2.1. Staff Room
 - 6.1.2.2. Main Office/ Medical Room
 - 6.1.2.3. PE Cupboard - gym
 - 6.1.2.4. Science Labs
 - 6.1.2.5. The Food Tech Room
 - 6.1.3. Contents of First Aid Boxes:
 - 6.1.3.1. The First Aid boxes at the Schools consist of items recommended by the HSE as minimum stock
 - 6.1.3.2. Inventory of Box contents is kept on the inside lid of each First Aid box

- 6.1.3.3. Contents are checked and maintained both in the event of an accident where First Aid treatment is given and on a regular basis by the appointed Senior First Aiders
- 6.1.3.4. Contents must be replenished at the beginning of every term

6.1.4. Room for Medical Treatment:

- 6.1.4.1. This medical room must be used when deemed appropriate by the Senior First Aiders

6.1.5. Responsibilities of Senior First Aiders:

- 6.1.5.1. Take charge when someone is ill/injured
- 6.1.5.2. Maintain and restock the First Aid Store termly or as needed
- 6.1.5.3. Maintain and replenish First Aid Boxes termly or as needed
- 6.1.5.4. Ensure ambulance is summoned where appropriate
- 6.1.5.5. To be aware of the current list of students with medical concerns, and to keep a copy of this list
- 6.1.5.6. To telephone AND send the standard letter to parents/carers in the event of an accident
- 6.1.5.7. To be responsible for the First Aid Policy

7. Provision Away From School/Out of School Hours:

7.1. Away from School:

- 7.1.1. The Travelling First Aid Kit must be taken on all School trips
- 7.1.2. It is the responsibility of the trip organiser to obtain the kit from the Senior First Aiders
- 7.1.3. Our best efforts are made to ensure a First Aider is also present on School trips, should a situation arise where they are required
- 7.1.4. As part of the procedure of arranging a School trip, permission letters are sent home
- 7.1.5. We will also include a reminder to the parents/carers of children with specific health conditions such as asthma, to ensure that their children have the appropriate medicines with them, as a precautionary measure

7.2. Out of School Hours:

7.2.1. In an event (say for instance a parent/carer evening or extra-curricular activities) that is conducted out of normal School hours, there is always a trained First Aider available in the case of an emergency

7.2.2. Emergency/First Aid protocol is followed as it would be in School hours

8. Students With Specific Health Conditions:

8.1. An up-to-date list of students with specific health conditions will always be kept in the School Office, Head Teacher's office and staff room

8.2. The list will be distributed and discussed at the start of every academic year during teacher Insets

8.3. Supply teachers will be briefed on a Student's specific health conditions

8.4. Risk assessments for School activities and trips will take account of a Student's specific health conditions.

9. Staff With Specific Health Conditions:

9.1. All staff are required to complete a medical questionnaire upon starting work at the Schools. Completed questionnaires are kept in confidential personnel files with the Head Teacher.

9.2. The Head Teacher is responsible for compiling a list of staff with health conditions that may require support from the School (e.g. asthma, diabetes and allergies).

9.3. This list is kept with the Head Teacher and the Secretary.

10. Dispensing Medicines:

Under the First Aid Policy there will be no dispensing of any medicines (including paracetamol) at all, within the School.

11. Giving First Aid:

11.1. All staff are required to undergo first aid training as part of the induction process.

11.2. This will be reviewed annually and training will be organised as appropriate.

11.3. If an accident occurs or in an emergency situation there are 4 first aid priorities:

11.3.1. Assess the situation

11.3.2. Make the area safe

- 11.3.3. Assess all casualties and give emergency first aid
- 11.3.4. Get help
- 11.4. Check your own safety, NEVER put yourself at risk!
- 11.5. Check the safety of the casualty, seat casualty where appropriate, protect them from further danger.
- 11.6. Keep calm, assess the situation by talking to the casualty (this will reassure them). If more than one casualty, assess to determine treatment priorities (life threatening first).
- 11.7. Get a first-aider (send a student where possible).

12. First Priorities:

- 12.1. In cases of severe first priority injuries, parents must be informed by telephone as soon as possible with a standard letter to follow
- 12.2. Breathing
 - 12.2.1. Give mouth to mouth if not breathing
 - 12.2.2. To be treated onsite
 - 12.2.3. If person is unresponsive, an ambulance must be called
- 12.3. Bleeding
 - 12.3.1. If severe apply firm, direct pressure on wound to stop bleeding, then use sterile dressing-maintain until First-Aider becomes available
 - 12.3.2. If limb is bleeding elevate 10-12 degrees to decrease blood flow
 - 12.3.3. Staff can manage small blood/body fluid spills whilst wearing protective gloves using a cleaning detergent solution
 - 12.3.4. For larger spills, staff must
 - (a) Contain and confine the spill
 - (b) Remove any absorbent matter near the spillage (e.g. towels, paper)
 - (c) Remove any broken glass or sharp materials
 - (d) For large blood spillages on furnishings, a cleaning company will need to be called
 - 12.3.5. An ambulance must be called for all severe bleeding injuries
- 12.4. First Aid Shock (Trauma or Fluid Loss)
 - 12.4.1. Keep casualty quiet and reassure
 - 12.4.2. Keep warm with a light covering
 - 12.4.3. NO food/drink (may complicate if treatment required later)
 - 12.4.4. An ambulance must be called

12.5. First Aid Electric Shock

12.5.1. DO NOT touch injured until the electric current is switched off

12.5.2. If you cannot switch the current off stand on a dry/insulated material and use a wooden or plastic implement to free casualty

12.5.3. If stopped breathing start mouth to mouth and continue until breathing and medical help arrives

12.5.4. An ambulance must be called

12.6. Burns and Scalds

12.6.1. Cool by flushing with copious amounts of water for at least 10-15 minutes, (this includes chemical burns)

12.6.2. Cover affected area with dry, sterile dressing or cling film (won't stick, prevents airborne contaminants contacting burn)

12.6.3. NEVER APPLY LOTIONS OR OINTMENTS - COLD WATER ONLY!

12.6.4. DO NOT burst or remove charred material

12.6.5. ALWAYS obtain medical attention

12.6.6. An ambulance must be called for all second and third degree burns and scalds

12.7. Eyes

12.7.1. ALL foreign bodies (including chemicals) should be flushed with clean cool water for at LEAST 10-15 minutes

12.7.2. If tap water is not immediately available use sterile eye wash bottles (sealed cap type)

12.7.3. Casualties with eye injuries should ALWAYS be sent to hospital with eye covered by pad

12.8. For the avoidance of doubt, please refer to the below table for further guidance

Injury	Treated onsite	Call Ambulance	Call parent(s)
<ul style="list-style-type: none"> • Small bruises • Scrapes • Minor cuts 	Yes	No	SMS

<ul style="list-style-type: none"> • First degree burns 			
<ul style="list-style-type: none"> • Severe bleeding • Concussion • Head injuries • Second/third degree burns • Person appears not to be breathing • Severe allergy reactions • Asthma attack • Person has a fit, even if they recover later • Sprains • Broken bones • Persistent chest pain • Eye injury • Electric shock • If someone has fallen from a height 	First aid	Yes	Yes

* Note: If a condition has been managed through first aid and is unlikely to get worse, e.g. a sprain, then the casualty can be taken to A&E by car/taxi instead of calling an ambulance.

13. All letters sent to parents will include the following headings:

- 13.1. Date
- 13.2. Description of accident
- 13.3. Time and place
- 13.4. Details of incident
- 13.5. What remedial actions the First Aiders took
- 13.6. Suggestions for Parents to consider