

OVERSTONE PARK SCHOOL



First Aid Policy & Procedure

First Aid Policy & Procedure

Date	Review Date	Coordinator
September 2021	September 2022	Mrs M Brown Mr. M Thompson Mrs D York

POLICY AIMS

Overstone Park School aims to provide a safe and healthy working environment for its pupils, staff and visitors.

This policy applies to all pupils at the Senior, Preparatory and Pre-Preparatory and Nursery School including those in our EYFS settings.

The School is a large complex community spread across a wide area and four main sites.

The School routinely completes an assessment of the First Aid provision across these four sites to ensure the provision meets the minimum requirements.

This policy aims to ensure that all members of the school are:-

- Informed of standard procedures to follow to ensure safe good practice.
- Given guidance and details of the provision made for First Aid in the areas in which they live or work.

The policy requires full compliance by all Heads of Departments and by all individual staff members to ensure that the standard of practice within the School is excellent. It is important to remember that First Aid can save lives and prevent minor injuries becoming major ones.

This policy and the associated first aid assessment are reviewed on an annual basis. This Policy has consulted the DfE Guidance on First Aid for Schools document as a good practice reference guide.

LEGISLATIVE OVERVIEW

There are legal requirements notably the Health and Safety (First-Aid) Regulations 1981 for the School to provide:-

1. An adequate number of qualified First Aiders to act as the first responders in any situation where first aid is required. This includes:-

- day to day school activities;
- boarding provision;
- sports activities (home and away)
- school trips
- school transportation

The First Aid assessment determines the level of first aid provision required for each of the above categories.

Suitable well maintained kits and equipment for the provision of First Aid in all locations including off site trips, sports activities and transport.

The requirement to use HSE recognised First Aid training providers has been removed in an amendment to the First Aid Regulations. However the school will exercise due diligence in the procurement of its first aid training providers to ensure the quality of training and the syllabus content is robust. Only training organisations that deliver regulated qualifications will be used.

ORGANISATION

The School strongly encourages every member of the community to undertake recognised training at whatever level they are able to achieve, especially if their position in the school indicates that this extended role is required or recommended to enable them to fulfil their duties to themselves or others in their care.

The School requires Emergency Response Notices to be completed and placed on notice boards in all areas of the school. These notices deal with Accident, Fire and Intruder emergencies. With regard to First Aid, the notice should advise of the nearest first aider, the nearest first aid kit and the address for the emergency services.

In the event of an accident or injury to a pupil, it is important to remember the responsibilities of the School 'in loco parentis'. Not only must the pupil receive immediate attention, either at the site of the accident or in a Treatment Room, but it is important to ensure that all necessary follow up action is taken.

Parents should be informed immediately if the accident is sufficiently serious that a pupil may have difficulty getting home or if he has to be referred to hospital. The Principal or a member of the SMT must be informed at the earliest opportunity.

Supplies of first aid material is held at various locations throughout the School (as given in Annex 1), as determined by the School Nurse. This includes the provision of First Aid Stations. Signs are posted around the School indicating the location of the nearest First Aid Station and where First Aiders can be found in the case of an emergency, and all staff will be advised of their position. The materials will be checked regularly and any deficiencies made good without delay.

Illness and Accidents

In the event of a pupil becoming ill or having an accident the following procedures are to be followed: 4.1 Illness

When a pupil feels ill at School, he should be escorted to the School office where a first aider will decide on what action should be taken.

Staff with First Aid qualifications may be asked to administer aid.

If the illness is not severe and does not require treatment, the pupil may be invited to rest in the reception until he feels better.

If a SMT decides that a pupil should go home, then a parent or guardian must be contacted to collect the pupil.

If the pupil is not fit for lessons but can safely return home and there is no one available to collect him, he may be allowed home if the parent gives permission.

In such cases the pupil is to be instructed to ring the School to confirm he has returned home safely.

In exceptional cases a member of SMT may ask a member of staff to accompany the pupil home.

If the pupil requires medication, a member of SMT may administer it according to the guidelines within the School's Medicines and Medical Conditions Policy.

If the pupil requires care at a hospital, the parents or guardian are to be informed immediately. If deemed to be a non-emergency, a parent or guardian should be asked to collect the pupil without delay and accompany him to a hospital of their choice.

If it is deemed necessary to attend hospital without delay, the pupil is to be accompanied to the hospital by a member of the School staff who will wait with the pupil until a parent arrives and assumes responsibility for their son. In these circumstances, parents must make every effort to attend to their son as quickly as possible.

If the pupil has to be taken to hospital, a member of SMT, will arrange for one of the following methods of transport to be used, depending upon the urgency and nature of the circumstances:

- School minibus
- taxi (black cab or contract)
- ambulance

Accidents

Victims of accidents should be taken to the School office where the same procedures as given above will apply. However, if the accident is of such a nature that the victim should not or cannot be moved a qualified First Aider should be contacted immediately.

A member of the SMT must be contacted immediately if the injury is of a serious nature.

Head Injuries

For head injuries and suspected concussion please refer to the Head injuries and concussion protocol.

Guidance on when to call for an Emergency Ambulance

An emergency 999 ambulance should be called when a qualified First Aider has assessed a casualty and deemed it necessary to do so based upon the knowledge acquired through their training. Usually this will be for casualties with the following problems:

- any instance in which it would be dangerous to approach and treat a casualty
- unconscious
- not breathing
- not breathing normally and this is not relieved by the casualty's own medication
- severe bleeding
- neck or spinal injury
- injury sustained after a fall from a height (higher than 2 metres)
- injury sustained from a sudden impact delivered with force (e.g. car knocking a person over)
- suspected fracture to a limb
- anaphylaxis (make sure to use this word when requesting an ambulance in this case)
- seizure activity that is not normal for the casualty, especially after emergency medication has been administered
- symptoms of a heart attack or stroke
- rapid deterioration in condition despite the casualty not initially being assessed as requiring an ambulance

IF IN DOUBT, IT IS BETTER TO CALL FOR AN EMERGENCY AMBULANCE THAN NOT

If, for whatever reason, a qualified First Aider is not available, the above guidelines should be used to determine whether to call for an emergency ambulance.

How to call for an emergency ambulance

Should the need arise for an emergency ambulance to be summoned, the First Aider should:

- remain calm
 - ask a bystander* to call 999 or 112 and, when prompted for which service is required, ask for an ambulance
- *Should a bystander not be available it may be necessary for First Aiders to leave the casualty and make the call themselves, relaying this information to the operator

The caller should:

- be ready to provide details of their name, telephone number, address and exact location within the School
- relay the condition of the casualty, as assessed by the First Aider, and how the casualty came to be in this condition
- provide details of the number of casualties along with names, age and gender if these details are known
- communicate any dangers or hazards into which the ambulance may be arriving
- stay on the line with the emergency operator until they have cleared the line
- return to the casualty immediately after the call to inform the First Aider that an ambulance is on the way and to bring a First Aid kit, blanket and AED if necessary

Reporting of Incidents

The following details are recorded by the first aider.

- Name
- Date
- Time
- nature of illness/accident (and location if appropriate)
- details of and first aid administered
- whether parents are contacted and whether a pupil is sent home or to hospital.

With regard to the latter, the Form Tutor and Principal are notified by e-mail.

Any accidents involving pupils which may have been preventable, or which arose out of, or in connection with work, are to be recorded on a Health and Safety Form.

These forms should be used to report accidents, near misses or other Health and Safety concerns. Details of the accident should be recorded as promptly as possible, together with names of any witnesses, while details are still fresh in the mind.

The following information should be recorded:

- Name of person reporting the incident
- Date of the incident
- Time of the incident
- Location of the incident

- Name of affected person
- Nature of illness/accident
- Details of any First aid administered
- Whether parents are contacted and whether a pupil is sent home or to hospital.

The Main first wider and the administrator is responsible for: reporting accidents under RIDDOR guidelines.

Reporting accidents on the correct form to Daventry Health and Safety Executive.

Maintaining accident records for both pupils and adults in the appropriate book (adults) or on the appropriate form (pupils).

It is important that any lessons learned from accidents are taken fully into account to prevent a recurrence. All incidents, including “near misses”, are fully investigated.

The more serious the incident, the more intensive the investigation should be to determine:

- What happened
- The lessons that can be learned
- The changes, if any, that need to be made to risk control measures to avoid arecurrence.

Further information regarding Accident reporting and recording can be found in the Health and Safety Policy.

Trips and visits

First Aid arrangements for School Trips and Visits are contained in the Educational Visits Policy.

Adequate and appropriate first aid provision will form part of the arrangements for all out-of- school activities. First Aid Kits are to be taken on School trips and the Qualified First Aider is appointed to be responsible for the kit and for taking charge of the situation (i.e. calling for assistance if a serious injury or illness occurs).

Key Personnel with additional responsibilities are identified as follows:

QUALIFIED FIRST AIDERS

Named First Aid personnel should take responsibility for:

- a) responding in the first instance to any first aid incident in the area that they have been assigned responsibility for.
- b) ensuring that Personal Protective Equipment and First Aid Kits in their area are adequately maintained at all times.

- c) ensuring that they are regularly re-trained.
- d) ensuring that the Accident Reporting Policy is adhered to at all times (i.e.: all accidents should be recorded and reported to the H&S Officer).

The level of qualification and location of first aiders has been determined by an assessment of needs. These needs have taken into account the following factors - the level of risk and potential injury associated with the activity, the numbers, ages and any known pre-existing medical conditions of persons involved, access to existing medical help, use of previous accident data, level of boarding provision and level of cover during holiday and sickness absence.

The level of provision is regularly reviewed with the following provision currently in place:-

PRE-PREPARATORY AND EARLY YEARS

All teachers have a recognised Paediatric First Aid qualification. Two teaching staff also hold a recognised First Aid at Work qualification.

HIGH SCHOOL AND PREPARATORY TEACHING STAFF

All departments will have access to staff that hold the full First Aid at Work qualification. Departments which undertake more hazardous activities e.g. Sports, ADT, D of E etc retain selected teaching staff that have undergone the full First Aid at Work qualification or a more specialised/tailored first aid course dependent on the activity. For example, outdoor/mountain first aid.

SUPPORT STAFF

Specific departments within the support staff structure will retain a selected number of staff who have completed the full First Aid at Work Qualification. These departments will normally be involved in more hazardous activities which warrant the higher level of cover e.g. ground staff using machinery.

Apart from offsite activities all departments will have access to medical personnel from the Health Centre on a 24 hour call out basis during term times. These staff will hold or be working towards a recognised First Aid Qualification.

OTHER TRAINING

In addition to standard first aid training, where appropriate, training will be given on the use of Epi-Pens and other reliever inhalers to enable selected staff to administer this medication in the event that a pupil is not in a position to self-medicate. Additional training has been given to selected members of staff, notably sports facilities staff and the school's sports staff in the use of Automated External Defibrillators (AED's).

OTHER KEY ROLES

Health and Safety Officer:

Responsible in liaison with the Health Centre for the ongoing assessment of the First Aid provision across the School.

Responsible for maintaining a current list of first aid trained staff and co-ordinating first aid training needs. First Aid qualifications normally have an expiry date – three years in the case of first aid qualifications, one year in the case of training to use AED's. These will be monitored and staff informed on when their current certificate expires to ensure they undergo further training and remain fully qualified.

Main First Aider:

Responsible for:-

- a) Advising on the planning and provision of First Aid across the school.
- b) Coordinating and advising on the provision of health care for the Prep and Senior Schools.
- b) Providing training for carers of individuals with Special Medical needs
- c) Providing general health care training for all personnel with pastoral responsibility
- d) Supporting the delivery of First Aid and Health care by providing 24 hour assessment, triage, treatment and advice during term times, and advising on procedures to follow to obtain medical care during holiday periods or during trips off site.
- e) Maintaining stocks of First Aid and Medical supplies for distribution to all areas.

Housekeeping Supervisors: Responsible for maintaining stocks of disinfection kits with personal protective equipment to prevent cross infection and distributing these to all areas.

Raising Awareness of this Policy

We will raise awareness of this policy via:

School Handbook/Prospectus;
School website;
Staff Handbook;
Meetings with parents such as introductory, transition, parent-teacher consultations and periodic curriculum workshops;
School events;
Meetings with school personnel;
Written communications with home such as weekly newsletters and of end of half term newsletters;
Annual report to parents;
Headteacher reports to the Governing Body;

Information displays in the main school entrance;

Text messages

Email

Social media:

- o Facebook

- o Twitter

- o Virtual pin boards

- o School blog

Principal:	Mrs Marion Brown	Date:	September 2021
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APPENDICES

- 1 Accident and Emergency Communication Procedures (Senior and Prep)
- 2 Accident and Emergency Communication procedures for the Pre – Preparatory and Early Years school site.
3. Products for dealing with spillage of bodily fluids.
4. Standard lists of contents for First Aid Kits for different purposes.
5. Use of Defibrillators

Appendix 1

OVERSTONE PARK SCHOOL **ACCIDENT AND EMERGENCY MANAGEMENT PROCEDURES** **COMMUNICATION - INFORMING OTHER KEY PEOPLE**

The school takes responsibility for informing relevant pastoral staff and/or parents about any pupil they see and treat or refer

1. PEOPLE WITH PASTORAL OR PARENTAL RESPONSIBILITY for the person

Gather as much information as possible.

Inform parents or guardians when it is appropriate to do so.

Sometimes this may be AFTER or DURING a hospital visit OR during the day in a different time zone, when full information and reassurance can be given to parents. Parents can suffer un-necessary anxiety if too little information is given and outcomes are unknown.

2. The PRINCIPAL must be informed about all severe incidents or hospital admissions as soon as possible, and they will keep the informed.

3. The PRINCIPAL must be informed of any severe incident involving Support staff, contract workers or visitors to the school as soon as possible.

4. The HEALTH AND SAFETY OFFICER (Mr Cartwright) must be informed of ALL accidents via accident forms. In the event of a severe incident, he must be informed within 24 hours and a full report must be provided.

Appendix 2

FIRST AID AT OVERSTONE PARK PRE- PREPARATORY AND NURSERY SCHOOL

First Aid Procedure specific to Early Years and Pre Preparatory location.

FIRST AID PROCEDURE:

Minor injuries are treated and recorded on site or on school trips by staff trained in Paediatric First Aid. (ALL Staff) In cases where an accident form has been deemed necessary, staff will always inform parents/carers of the incident.

Major injuries are referred straight to hospital by ambulance. A parent or carer is contacted and asked to meet the ambulance at the hospital and a member of staff familiar to the child accompanies the child to the hospital.

The HEALTH AND SAFETY OFFICER (Mr Cartwright) must be informed of ALL accidents via accident forms. In the event of a severe incident, he must be informed within 24 hours and a full report must be provided.

Appendix 3

OVERSTONE PARK SCHOOL

DISINFECTION POLICY & USE OF DISINFECTION KITS

UNIVERSAL PRECAUTIONS FOR INDIVIDUAL PROTECTION

UNIVERSAL PRECAUTIONS APPLY - ALL SPILLAGE OF BLOOD, VOMIT, AND OTHER BODY FLUIDS SHOULD BE TREATED AS HAZARDOUS.

ALL INDIVIDUALS MUST TAKE ACTION TO PROTECT THEMSELVES AGAINST HIV AND MANY OTHER DISEASES SPREAD BY CONTACT WITH BODY SPILLAGE.

People who are HIV positive or carrying Hepatitis B or C may be unaware of their condition, or may choose not to tell anyone. Many other very unpleasant diseases can also be acquired by direct contact with body spillage and /or poor personal hygiene.

For their own protection, all staff must follow the school guidelines when dealing with any body fluids. However, the School does recognise that in unlikely and extreme conditions, an occasion may arise where First Aid may need to be administered without protection in order to save life, or body fluid may be spilled onto another person. If this occurs, medical advice should be sought as soon as possible.

First Aid Kits are obtained from the School Office.

Each member of staff responsible for a particular area, house, or department should ensure that a disinfection kit and an appropriate first aid kit are kept available for use at any time. They should also ensure that every member of staff using their area is informed of the location of the kits, and this safety policy.

It is important to clean up body spillage as soon as possible after the incident has occurred. For this reason, all staff must be prepared to use disinfection kits when necessary. Any member of staff who is first on the scene should ensure that an incident is dealt with using the appropriate kit – we do not allocate responsibility for this unpleasant task to particular staff.

Detailed guidelines on the use of First Aid and Body Spillage kits is provided below.
Use of Disinfection Kits.

DISINFECTION materials are provided by the school for use in all areas and also when pupils are taken on trips outside school. ALL Staff are expected to use kits to clean up HAZARDOUS WASTE.

The key points in maintaining personal safety and prevention of cross infection are:

1. GOOD PERSONAL HYGIENE: Wash hands thoroughly before and after using disinfection kits.
2. WEAR PROTECTIVE CLOTHING: Gloves and aprons are provided in all disinfection kits. Always put these on after hand washing and before dealing with any contaminated materials.
3. TRAINING: Disinfection kits have these detailed instructions inside each kit – become familiar with the procedure and follow it every time.

All staff should make sure that they know where kits are kept in all the areas of the School that they work in.

All staff should ensure that kits are replaced when they have been used.

All waste relating to body parts or spillage of body fluids must be disposed of safely - DO NOT USE NORMAL RUBBISH BINS.

Clinical waste should be disposed of in sanitary bins.

CONTENTS OF DISINFECTION PACK

1PR DISPOSABLE GLOVES
1 DISPOSABLE APRON
DISPOSABLE PAPER
1DISPOSABLE CLEANING CLOTH
500 ML BIOGUARD SPRAY
1 YELLOW PLASTIC RUBBISH BAG
1 RED PLASTIC LAUNDRY BAG

METHOD

1. Cover spillage with disposable paper so that all the liquid is absorbed, and remove as much as possible with the paper. If the contaminated area is too large to clean with paper use a RED mop, mop stale and bucket. After use throw the mop away and sterilise the mop stale and bucket thoroughly with Bioguard solution.
2. Spray the Bioguard onto the surface where the contamination has been cleared up.
3. Wipe over the area with the cloth.
4. Dry the area thoroughly with disposable paper.
5. Place any soiled clothes or linen into the red plastic bag and seal with the tie provided. Send to the laundry for thermal disinfection, or send home with the pupil.

6. Seal all disposable material i.e. cloths, paper towels, gloves, plastic aprons into the yellow plastic bag and take it to the Health Centre where a replacement pack can be collected.

7. Please retain the Bioguard Spray and add it to the replacement pack.

Appendix 4

LIST OF CONTENTS FOR SMALL PORTABLE FIRST AID PACKETS

- 2 pairs Disposable gloves
- 1 Resuscitation face shield
- 5 Wound wipes
- 1 Pack Sterile Gauze
- 1 Packet of Assorted plasters
- 1 Large First Aid Dressing (bandage attached)
- 1 Medium First Aid Dressing (bandage attached)

LIST OF CONTENTS FOR SPORTS FIRST AID KITS

- 4 Pairs Disposable Gloves
- 4 Cold Packs
- 1 Cold spray
- 1 Wound Wash spray
- 10 Wound wipes
- 2 Packs Sterile Gauze
- 20 Assorted Plasters
- 1 Large First Aid Dressing with bandage attached
- 2 Medium First Aid Dressing with bandage attached
- 4 Safety pins
- 2 Triangular bandages
- 2 Small NA dressings
- 1 Medium NA Dressing
- 1 Large NA dressing
- 1 roll of zinc oxide tape
- 1 roll of hypoallergenic tape
- 1 Emergency Blanket
- 1 Resuscitation Aid
- 1 Rubbish bag

For girls sports bags add:

- 1 Sanitary towel

LIST OF CONTENTS FOR WALL MOUNTED FIRST AID BOXES

- 2 pairs Disposable gloves
- 1 Rubbish bag
- 10 Wound wipes
- 1 Pack Sterile Gauze
- 20 Assorted plasters (approx)
- 1 Large First Aid Dressing (bandage attached)
- 2 Medium First Aid Dressing (bandage attached)
- 1 Triangular bandage
- 2 Safety pins
- 1 Resuscitation face shield
- 1 Emergency foil blanket Overstone Park School – First Aid Policy - BSP7 (Revision 4)

DEPARTMENTAL ADDITIONS:

1. Support Staff Centre Burn dressings assorted sizes

Burn Gel – to follow cold water soaking for 10 – 15 minutes

Acriflex cream – small burns only

Anthisan cream for bites and stings

Saline pods x 2

Eye bath – use saline pods or cool tap water, change water between eyes

Triangular bandage x 1 Extra

3. Swimming Pool Waterproof assorted plasters

Eye bath – use with cool tap water, change water between eyes

4. Sciences and ADT Eye bath –Use saline pods as eyewash

Saline pods x 2

Burn Gel – to follow cold water soaking for 10 – 15 minutes

Acriflex cream – small burns only

PRE- PREPARATORY AND NURSERY FIRST AID KITS

COMPREHENSIVE PORTABLE KIT:

1 Guidance leaflet

2 Pairs Disposable Gloves

1 Disposal bag

2 Cold Packs

2 Packs Sterile Gauze

20 Assorted Plasters

1 Large First Aid Dressing with bandage attached

2 Medium First Aid Dressing with bandage attached

- 2 Small First Aid Dressings with bandage attached
 - 1 Eye dressing with bandage attached
 - 2 Finger dressings
 - 2 Burns dressings
 - 4 Safety pins
 - 2 Triangular bandages
 - 1 10cm crepe bandage
 - 1 7.5cm crepe bandage
 - 1 5 cm crepe bandage
 - 1 roll of hypoallergenic tape
 - 1 Emergency blanket
 - 1 Resuscitation Aid
 - 2 sterile saline eyewash pods
 - 1 eye bath
 - 1 pair rounded ends scissors
- Overstone Park School – First Aid Policy - BSP7 (Revision

SMALL CLASS, PLAYGROUND AND TRIP HELPERS KITS:

2 Pairs Disposable gloves

1 disposal bag

1 resuscitation aid

1 pack sterile gauze

1 sterile saline pad

1 bottle of water – replaced daily

10 assorted plasters

1 medium First aid dressing with bandage attached Overstone Park School – First Aid

Policy - BSP7 (Revision 4)

Appendix 5

USE OF DEFIBRILATORS

Nearest Location – Overstone Park Golf Club, Overstone Park, Northampton

Introduction

According to the Resuscitation Council (UK) approximately 30,000 people sustain cardiac arrest outside hospital in the UK each year. Electrical defibrillation is well established as the only effective therapy for cardiac arrest caused by ventricular fibrillation (VF) or pulseless ventricular tachycardia (VT).

The scientific evidence to support early defibrillation is overwhelming; the delay from collapse to delivery of the first shock is the single most important determinant of survival. If defibrillation is delivered promptly, survival rates as high as 75% have been reported. The chances of successful defibrillation decline at a rate of about 10% with each minute of delay.

The Resuscitation Council (UK) recommends strongly a policy of attempting defibrillation with the minimum of delay in victims of VF/VT cardiac arrest. Whilst there is no legal requirement for Overstone Park School to provide automated external defibrillators (AED's) a decision was taken to provide a number of units around the campus to further enhance first aid cover in high risk areas, notably where sporting activities are undertaken.

Whilst AED's can be used safely and effectively without previous training, a number of key staff working in these higher risk areas have received dedicated training from St John Ambulance in the use of AED's to help improve the time to shock delivery and correct pad placement when providing treatment. Other First Aid trained staff will receive instruction in the use of the units on a rolling programme.

All staff trained to use an AED will receive regular training (normally annually as recommended by St John Ambulance) to ensure their skills are kept up to date. The School have purchased three, Powerheart G3 Automatic AED's – these machines are fully automatic and require no intervention from the operator once the pads are attached to the casualty. Upon opening the lid of the unit a voice prompt provides instructions on how to operate the unit correctly and continues to give a running commentary throughout the rescue.

Locations

The three units can be found in the following locations:

- Overstone Park Golf Club