



LEARNING OPPORTUNITIES

FIRST AID POLICY

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The First Aid Policy has been written and approved by a team with a range of experience, and will be reviewed annually.

Date Created: January 1995
Previous Review Date: January 2022
Next Review Date: January 2023

COVID-19 Update: Annex and First Aid Procedure

Learning Opportunities will continue to review and monitor our First Aid & COVID risk assessments. These will include, where necessary, vulnerable workers with first aid responsibilities.

Guidance for first aiders

Although the UK Government has now removed social distancing in most workplace situations, first aiders should still consider the precautions set out in this guidance to reduce the risk of COVID-19 infection.

- Try to assist at a safe distance from the casualty as much as you can. Minimise the time you share a breathing zone.
- Although treating the casualty properly should be your first concern, you can tell them to do things for you if they are capable.
- Remember the 3P model - preserve life, prevent worsening, promote recovery.

Preserve life: CPR

- Call 999 immediately - tell the call handler if the patient has any COVID-19 symptoms.
- Ask for help - If a portable defibrillator is available, ask for it.
- Before starting CPR, use a cloth or towel to cover the patient's mouth and nose. This should minimise the risk of transmission while still permitting breathing to restart following successful resuscitation.

If available, you should use:

- a fluid-repellent surgical mask
- disposable gloves
- eye protection
- apron or other suitable covering

Only deliver CPR by chest compressions and use a defibrillator (if available) - don't do rescue breaths.

Prevent worsening, promote recovery: all other injuries or illnesses

If you suspect a serious illness or injury, call 999 immediately - tell the call handler if the patient has any COVID-19 symptoms.

After delivering any first aid

Make sure you discard disposable items safely and clean reusable ones thoroughly.

Wash your hands thoroughly with soap and water or an alcohol-based hand sanitiser as soon as possible.

UK Health Security Council Advice 20.12.21

If you are required to perform cardiopulmonary resuscitation (CPR), you should conduct a risk assessment to assess appropriate infection control precautions.

In adults, it is recommended that you do not perform mouth-to-mouth ventilation - perform chest compressions only. Compression-only CPR may be as effective as combined ventilation and compression in the first few minutes where cardiac arrest has not occurred due to lack of oxygen (asphyxial arrest).

In children, cardiac arrest is more likely to be caused by a respiratory problem or lack of oxygen. Therefore, chest compressions alone are unlikely to be effective. If a decision is made to perform mouth-to-mouth ventilation, use a resuscitation face shield, if one is available.

If you perform mouth to mouth ventilation on **someone with COVID-19** you should follow the guidance for non-household contacts.

If you perform mouth-to-mouth ventilation on **someone who does not have COVID-19**, no additional actions need to be taken other than monitoring yourself for symptoms of COVID-19 over the following 14 days. However, if they are subsequently diagnosed with COVID-19 you may be contacted by NHS Test and Trace and asked to self-isolate.

If you develop symptoms of COVID-19, however mild, you should arrange to have a PCR test, inform your employer and follow the stay at home guidance.

This guidance will be reviewed as transmission and infection rates improve.

POLICY STATEMENT

Learning Opportunities is mindful of the need to safeguard the well-being of all students, staff and visitors to the School and will ensure that First Aid arrangements are managed in compliance with the management of Health and Safety (First Aid) Regulations 1981 and Education (Independent School Standards) (England) Regulations 2014.

This policy outlines the School's responsibility to provide adequate and appropriate first aid to students, staff, parents / carers and visitors, and the procedures in place to meet that responsibility. First aid can save lives and prevent minor injuries becoming major. The School will ensure that first aid is administered in a timely and competent manner.

It is acknowledged that major and minor incidents / accidents can take many forms and can happen without warning. No plan can provide for every eventuality; however, the response to any incident is handled within an agreed management framework which has been put in place for the day to day running of the school.

This policy provides an overview of the statutory requirements and how these are met in school. All safeguarding and child protection policy guidelines must be adhered to both on and off the school site, when first aid is administered.

The responsibility for drawing up and implementing the First aid policy is delegated to the Head Teacher, including informing staff and parents / carers. However, implementation remains the responsibility of all staff in our school in order to keep students healthy, safeguarded and protected whenever they are in our care.

First aid is the help given to someone who is injured or ill, to keep them safe until they can get more advanced medical treatment by seeing a doctor, health professional or by going to hospital.

This policy should be read in conjunction with the Supporting Students with Medical Conditions Policy and the School's H&S and First Aid Risk Assessment.

This policy is shared with all employees during their induction to ensure they are familiar with the school's first aid procedures.

AIMS

The aim of providing First Aid is to save lives and to ensure that minor injuries and illnesses do not escalate into major ones.

An accident is an unplanned, uncontrolled event, which causes, or could cause injury, damage or loss. In most cases accidents can be avoided and it is our intentions to prevent as many as possible.

The aims of our first aid policy are to:

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

To achieve our Policy Aims, Learning Opportunities will:

- Carry out a suitable and sufficient assessment of the risks posed to persons in the event that they suffer an accident, injury or ill health.
- Appoint sufficient First Aiders (qualified by training) to take charge of first aid. The certification will be reviewed regularly to ensure that it is current. The School will maintain a record of employees who have undergone first aid training, which can be requested from the Senior Leadership Team.
- Provide information to employees, students and parents / carers on the arrangements for first aid.
- Have a readily available and suitably stocked first aid boxes
- Have a procedure for managing accidents, including immediate liaison with emergency services, medical professionals and parents / carers.
- Ensure that an accident record file is maintained and every incident that requires first aid is recorded and filed including any treatment given.
- Ensure that a holder of a current, relevant First Aid certificate accompanies all off-site activities.
- Ensure notices are clearly visible throughout the School indicating the location of the first aid boxes and the names of the School's First Aiders.
- Review and monitor arrangements for first aid on regular basis.

LEGISLATION & GUIDANCE

This policy is based on advice from the Department for Education on first aid in schools, health and safety in schools and actions for schools during the coronavirus outbreak, 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 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 pupils

CURRENT PRACTICE

The Senior Leadership Team (SLT) undertakes an annual review of the Schools first aid needs risk assessment to ensure that adequate provision is available given the size of our school, student / staff numbers, our specific location and the needs of individuals.

Our risk assessment includes consideration of students and staff with specific conditions and major illnesses, such as asthma and epilepsy, takes account of an analysis of the history of accidents in our school, as well as the identification of specific hazards. It also includes careful planning for any trips and visits, including residential and higher risk activities, which always include a suitably trained first aider.

We ensure that first aid provision is available at all times, including off-site activities, during PE, and at other times when the school facilities are used.

We keep a written record in our accident book of all accidents or injuries and first aid treatment, and inform parent(s)/carer(s) of any accident or injury on the same day, or as soon as reasonably practicable, of any first aid treatment.

PROVIDING INFORMATION

Learning Opportunities informs all staff of the first-aid arrangements. This includes the name and location of first aiders and appointed persons, location of first aid equipment and facilities, and procedures for monitoring and reviewing the school's first-aid requirements.

Newly appointed staff are provided with first-aid information as part of their Induction Programme, details of which are also available within the Health & Safety Handbook produced in conjunction with Learning Opportunities Health & Safety Consultants (Peninsula Business Services).

RISK ASSESSMENT

The Management of Health and Safety at Work Regulations 1999 require employers to make a suitable and sufficient assessment of the risks to the health and safety of their employees at work, and others who may be affected by their undertaking, and to identify what measures they need to take to prevent or control these risks.

Learning Opportunities, as a school, generally falls into the lower risk category, although it is also appreciated that some of our areas of activity may fall into the medium risk category. Our first-aid provision is based on the level of risk determined by the risk assessment undertaken for given activities.

ROLES & RESPONSIBILITIES

Proprietor will:

- ensure that first aid is administered in a timely and competent manner by the drawing up and effective implementation of a written first aid policy.
- Ensure that the welfare of students at the school is safeguarded and promoted by the drawing up and effective implementation of a written risk assessment policy;
- Ensure that appropriate action is taken to reduce risks that are identified.
- Under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR) ensure that relevant incidents are reported to the HSE

In practice, most of the day-to-day functions of managing health and safety are delegated and shared between the Head Teacher & Deputy Head, who are responsible for the implementation of this policy, including ensuring that:

- the health, safety and welfare of students, employees and any other individuals who may be on the school premises are fully covered.
- an appropriate number of trained first aid personnel are present in the school at all times
- first aiders have an appropriate qualification, keep training up to date and remain competent to perform their role
- all staff are aware of first aid procedures
- appropriate risk assessments are completed and appropriate measures are put in place
- in the event of an accident occurring, an accident and incident report form is completed.
- parents / carers are advised of the school's health and safety policy, including arrangements for first aid
- monthly checks are made of First Aid containers, in addition to restocking as required following use.

First Aiders Main Duties

First Aiders have completed a training course approved by the Health and Safety Executive (HSE).

First aid is the help given to someone who is injured or ill, to keep them safe until they can get more advanced medical treatment by seeing a doctor, health professional or go to hospital.

The role of a first aider is to give someone this help, while making sure that they and anyone else involved are safe and that they don't make the situation worse.

These are the seven things a first aider needs to do:

1. **Assess the situation quickly and calmly:**

- Safety: Are you or they in any danger? Is it safe for you to go up to them?
- Scene: What caused the accident or situation? How many casualties are there?
- Situation: What's happened? How many people are involved and how old are they? What do you think the main injuries could be?

2. Protect yourself and them from any danger:

- Always protect yourself first - never put yourself at risk
- Only move them to safety if leaving them would cause them more harm
- If you can't make an area safe, call 999 for emergency help

3. Prevent infection between you and them:

- Wash your hands or use alcohol gel
- Wear disposable gloves
- Don't touch an open wound without wearing gloves
- Don't breathe, cough or sneeze over a wound or a casualty

4. Comfort and reassure:

- Stay calm and take charge of the situation
- Introduce yourself to them to help gain their trust
- Explain what's happening and why
- Say what you're going to do before you do it

5. Assess the casualty:

- If there's more than one casualty, help those with life-threatening conditions first
- Start with the Primary Survey and deal with any life-threatening conditions
- Then, if you've dealt with these successfully, move on to the Secondary Survey

6. Give first aid treatment:

- Prioritise the most life-threatening conditions
- Then move on to less serious ones
- Get help from others if possible

7. Arrange for the right kind of help:

- Call 999 for an ambulance if you think it's serious
- Take or send them to hospital if it's a serious condition but is unlikely to get worse
- For a less serious condition call 111 for medical advice
- Suggest they see their doctor if they're concerned about a less serious condition
- Advise them to go home to rest, but to seek help if they feel worse
- Stay with them until you can leave them in the right care.

Appointed Persons

An appointed person is someone who:

- takes charge when someone is injured or becomes ill.
- takes charge of first aid equipment and ensure that such equipment is appropriately maintained.

- ensures that an ambulance or other professional medical help is summoned when appropriate

Appointed persons are **not** first aiders. They should **not** give first-aid treatment for which they have not been trained. However, Learning Opportunities ensure that appointed persons receive bespoke 1 day emergency first-aid training / requalification training.

All staff

All members of staff have responsibility to take reasonable steps to ensure that no person in their care is exposed to unacceptable risk, and that they carry out activities in accordance with training and instructions. All staff must know what action to take if an accident or emergency occurs, including their responsibility for reporting accidents, near misses and dangerous situations.

It is acknowledged that in general the consequences of taking no action is likely to be more serious than that of trying to assist in an emergency. **Therefore staff will:**

- use their best endeavours, particularly in emergencies, to secure the welfare of the student(s) in the same way that parent / carers might be expected to act towards their children.
- Ensure they follow first aid procedures
- Ensure they know who the first aiders in school are
- notify the senior leadership team of all accidents and treatments
- Complete accident reports for all incidents they attend where a first aider is not called
- inform the senior leadership team when First Aid equipment has been used and needs to be re-stocked.
- Inform the headteacher of any specific health conditions or first aid needs.

MEDICAL EMERGENCIES

All members of staff who have contact with students who have diagnosed medical conditions will be informed about the best course of action if a student becomes seriously ill and needs emergency treatment.

The student and the parents / carers will be informed about the school's arrangements and where appropriate details will be recorded in a health care plan.

The school will call an ambulance before contacting parents / carers if a student becomes seriously ill - this applies to all students and not only those with health care plans.

The school will arrange for a competent member of staff to travel to hospital in an ambulance and to act in loco parentis until the parent / carer arrives. The member of staff in loco parentis will have the right to sanction emergency procedures as advised by medical staff in the ambulance or at the hospital.

EMERGENCY PROCEDURES

Ambulance

If the first member of staff present at an incident judges that an ambulance should be called, he or she should do so immediately, by calling the emergency services on 999, without hesitation and without waiting for the First Aider to arrive at the scene.

Staff should always call an ambulance if there is:

- a serious injury or illness;
- serious breathing difficulty;
- any significant head injury;
- major bleeding;
- a period of unconsciousness (excluding a faint);
- a severe burn; or
- an obvious open fracture or dislocation.

Whenever possible, an adult should remain with the casualty until help arrives and other staff can be called upon to help with moving away any students present.

If an ambulance is called, a member of the SLT should be notified immediately in order to open the relevant gates and direct the ambulance crew to the casualty's location.

Parents/next of kin of the casualty should be notified and a responsible adult should go to hospital with the casualty.

PROCEDURE IN CASE OF ACCIDENT / INJURY

During coronavirus: first aiders will follow Health and Safety Executive (HSE) guidance for first aid during coronavirus (See Page 2 COVID-19 Update: Annex and First Aid Procedure). They will try to assist at a safe distance from the casualty as much as possible and minimise the time they share a breathing zone. Treating any casualty properly will be the first concern. Where it is necessary for first aid provision to be administered in close proximity, those administering it will pay particular attention to sanitation measures immediately afterwards including washing their hands.

In-School First aid procedures

In the event of an accident resulting in injury:

- 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 / carers will be contacted and asked to collect their child. Upon their arrival, the first aider will recommend next steps.
- If emergency services are called, a member of the Senior Leadership Team will contact parents / carers 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. The report will include as much detail as possible, such as weather conditions, surface condition, witnesses (statements to be collected) etc.

Off-site procedures

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

- A fully charged mobile phone
- A portable first aid kit
- Individual student's medication such as inhalers, epi-pens etc.
- Information about the specific medical needs of students
- Parents/carers' contact details

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

There will always be at least one first aider on school trips and visits.

During coronavirus: we will take account of any government advice in relation to educational visits during the coronavirus pandemic.

Treatment of Head Injuries (Refer to Appendix A)

Children often fall and bang themselves, and thankfully, most bangs to the head are harmless events and can be dealt with by the supervising adult.

Emergency First Aiders should be sought if the student:

- becomes unconscious;
- is vomiting or shows signs of drowsiness;
- has a persistent headache;
- complains of blurred or double vision;
- is bleeding from the nose or ear; and/or
- has pale yellow fluid from the nose or ear.

If any of the above symptoms occurs urgent medical attention is needed. Parents / carers should be contacted and the emergency services too.

In the event of an accident in which the student cannot stand up unaided, he/she should be left in the position that he/she was found (even if this is in the toilets or playground) so long as it is safe to do so.

Head Injuries can be potentially life threatening and do not always show clear visual signs of injury.

Reporting procedure to Parents / Carers

The School will always inform parents of a bumped head via a telephone message. Parents / carers will be spoken to directly. Where necessary they will be asked to collect their child. Where we are unable to contact parents / carers we will contact Emergency Person (details available on admission form). A log will be kept in the School Office to ensure repeat phone calls are made when no parent / carer has been spoken to in person.

Treatment of suspected breaks/fractures

The things to look for are:

- Swelling

- Difficulty moving
- Movement in an unnatural direction
- A limb that looks shorter, twisted or bent
- A grating noise or feeling
- Loss of strength
- Shock

If it is an open fracture:

- cover the wound with a sterile dressing and secure it with a bandage. Apply pressure around the wound to control any bleeding.
- support the injured body part to stop it from moving. This should ease any pain and prevent any further damage.
- once you've done this, call 999 for medical help.
- while waiting for help to arrive, don't move the injured person unless they're in immediate danger.
- keep checking the casualty for signs of shock.

First Aid training states that clothing should only be removed if absolutely necessary. Where clothing needs to be removed which could cause a safeguarding issue then two members of staff should be present. Only one needs to be first aid trained. However, if waiting for a second member of staff puts a student's life in danger then the first aider should not withhold treatment.

Asthma

Where there is a need for a student to use an inhaler, they will remain with the student.

**ALWAYS SEEK THE ADVICE/ATTENTION OF A QUALIFIED FIRST AIDER IN THE EVENT OF AN
ASTHMA ATTACK**

Epi-Pens

All Epi-Pens are labelled and kept in a secure place in close proximity to the student - staff will ensure that the EpiPen accompanies the student on any off-site activities. Most staff members have Anaphylaxis and Epi Pen training.

Anyone can administer an Epi-Pen in an emergency if the adult/student is unable to do it themselves. Should a member of staff, who has not had the training have to do this, then the emergency services must be informed at the same time as the Epi-Pen is administered.

FIRST AID TRAINING

Learning Opportunities carefully consider, and review annually, the training needs of staff to ensure that suitable staff are trained and experienced to carry out first aid duties in our school. In particular we consider the following skills and experiences:

- Reliability, communication and disposition,
- Aptitude and ability to absorb new knowledge and learn new skills,
- Ability to cope with stressful and physically demanding emergency procedures,
- Normal duties are such that they may be left to go immediately and rapidly to an emergency, and

- Need to maintain normal operations with minimum disruption to teaching and learning.

First aiders in our school have all undertaken appropriate training. They have a qualification in either First Aid at work (FAW, 3 days or 18 hours) or Emergency First Aid at work (EFAW, 1 day or 4-6 hours). Before the certificates expire, first aiders undertake a requalification course as appropriate, to obtain another three-year certificate.

Training will be updated every three years and will not be allowed to expire before retraining has been achieved.

FIRST AID KITS

We do not keep tablets or medicines in the first aid box.

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
- Cold compresses
- Burns dressings
- Disposable Aprons
- Face covering

Our first aid boxes are located in the following places:

- Reception
- Main Office KS4
- KS3 staff planning area
- Life Skills Lodge
- KS3 Kitchen
- Food Technology Cabin
- Science Lab
- DT Cabin
- Art Room
- Thrive Hive
- KS3 Office

First Aid boxes are available in all school vehicles, in addition portable first aid packs are available for staff to take when attending off-site activities.

A white cross on a green background identifies all first aid boxes.

FIRST AID ACCOMMODATION

Learning Opportunities takes account of The Education (Independent School Standards) Regulations 2014 which requires schools to provide accommodation for the short term care of sick and injured students, which includes a washing facility and is near to a toilet facility. The accommodation provided may be used for other purposes (apart from teaching) provided it is always readily available to be used.

Within the school accommodation is provided in the following areas:

RW KS4 Main Office / KS3 Staff Planning Room

HYGIENE / INFECTION CONTROL

All staff take precautions to avoid infection and follow basic hygiene procedures. Staff have access to single-use disposable gloves and hand washing facilities, and take care when dealing with blood or other body fluids and disposing of dressings or equipment (refer to dealing with bodily fluids).

Procedure in the event of contact with blood or other bodily fluids First Aiders should take the following precautions to avoid risk of infection:

- cover any cuts and grazes on their own skin with a waterproof dressing;
- wear suitable disposable gloves when dealing with blood or other bodily fluids;
- use devices such as face shields, where appropriate, when giving mouth to mouth resuscitation;
- wash hands after every procedure.

If a First Aider suspects that they or any other person may have been contaminated with blood and/or other bodily fluids which are not their own, the following actions should be taken without delay:

- wash splashes off skin with soap and running water;
- wash splashes out of eyes with tap water and/or an eye wash bottle;
- wash splashes out of nose or mouth with tap water, taking care not to swallow the water;
- record details of the contamination;
- take medical advice (if appropriate)

AUTOMATIC EXTERNAL DEFIBRILLATOR (AED)

Location of AEDs:

Ringwould site - Five Bells Public House

It is not the responsibility of Learning Opportunities to check that these defibrillators are in full working order.

RECORD KEEPING & REPORTING

All staff know where to locate the accident book and how to complete an entry.

First aid and accident record book

- An accident will be recorded by the first aider on the same day or as soon as possible after an incident resulting in an injury using the Accident record book.
- As much detail as possible should be recorded including, date, time of accident/incident, person's name, a brief summary of the accident and action taken.
- Records held in the Accident Register will be retained by the school for a minimum of 3 years, in accordance with regulation 25 of the Social Security (Claims and Payments) Regulations 1979, and then securely disposed
- The accident records are reviewed half termly by a member of the Senior Leadership Team to identify any potential or actual hazards.

The information in the accident books can:

- Help the school identify accident trends and possible areas for improvement in the control of health and safety risks;
- Be used for reference in future first-aid need assessments;
- Be helpful for insurance and investigative purposes.

Under the Data Protection Act 1998 and the General Data Protection Regulation (GDPR) 2018, all accident records containing personal information should be detached and kept in safe storage (e.g. in a lockable filing cabinet).

All completed accident books should be given to the Proprietor, who will store them for reference in future.

REPORTING to the HSE

Under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR) some incidents must be reported to the HSE (responsibility for which lies with the Proprietor).

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 scalding 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)

Learning Opportunities will keep a record of any reportable injury, disease or dangerous occurrence. This will include: the date and method of reporting; the date, time and place of the event; personal details of those involved and a brief description of the nature of the event or disease. This record can be combined with other accident records.

Serious injury or death and how to deal with these events

- As a registered provider we would notify Ofsted of any serious accident, illness or injury to, or the death of, any child whilst in our care, and any action taken in respect of it.
- We would make the notification as soon as is reasonably practical, but within 14 days of the incident occurring.
- We would also notify the local child protection agency and act on any advice given.
- We would always follow our accident procedures in any accident or injury.

SPECIAL ARRANGEMENTS

Learning Opportunities acknowledge that in some cases students 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 students. In a few cases individual procedures may be needed and these will be detailed in an individual Risk Assessment / IHCP. The Head Teacher is responsible for making sure that all relevant staff know about and are if necessary are trained to provide any additional support these students may require.

CHILD PROTECTION

If any concerns are raised that have safeguarding implications (e.g. unexplained marks or scars), whilst a student is being treated for first aid, the First Aider must inform the Designated Safeguarding Leads (Simon Graydon / Heather Tullett / Catherine Graydon), who will then take appropriate action.

PHYSICAL CONTACT WITH STUDENTS

The treatment of students for minor injuries, illness or medical conditions may involve members of staff in physical contact with students. Any treatment should:

- Not involve more contact than necessary
- Be undertaken by staff who have volunteered to be designated to the task
- Be carried out wherever possible, in front of another staff member
- Be recorded in the Accident Book
- Parents / carers will be informed if their student has received any treatment at school.

IDENTIFICATION OF STUDENTS WITH MEDICAL NEEDS

Some students may have medical conditions that are potentially life threatening such as epilepsy, diabetes and anaphylactic reactions. The medical forms for each new student are reviewed by a member of the Senior Leadership Team and relevant information shared with staff.

TRAINING

All school staff are encouraged to undertake first aid 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.

APPOINTED PERSONS - completed a 1 day Emergency First Aid at Work (bespoke) Course

James Brodie
Craig McCairn
Christopher Turnbull
Rob Palmer-Wilson
Roy Sabin
Christina Walters
Robert Ward
Kylea Browne
Sharon Grainger
Luke Breen
Kevin Dunk
Stacey McTaggart
Zoey Hemmings-Cross
Paul Smith
Heather Tullett
Tony Hollett
Alison Barwell
Lou Scott

LINKS WITH OTHER POLICIES

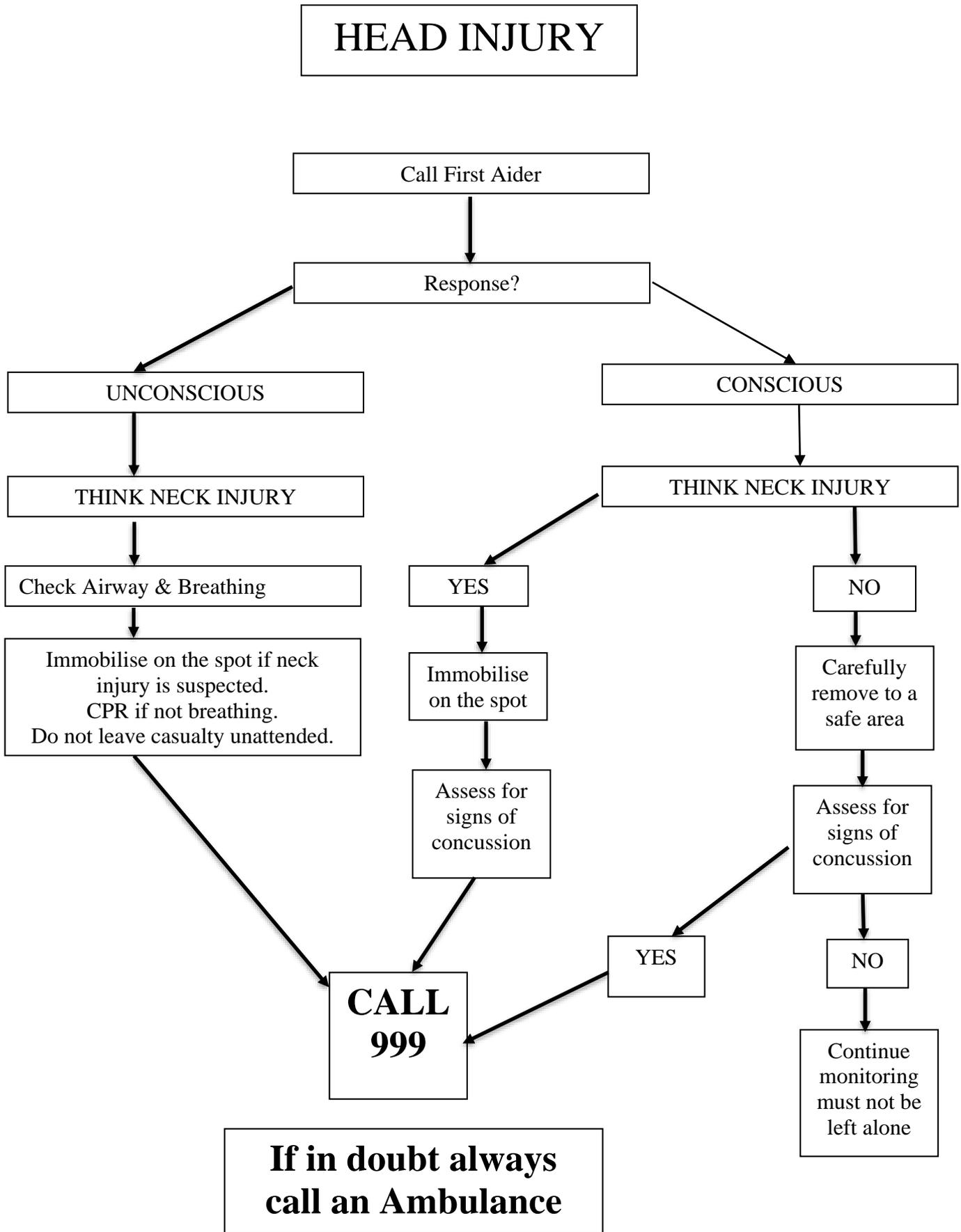
This first aid policy is linked to the:

- Health and safety policy
- Risk assessment policy
- Medical Needs Policy

ADMINISTRATION OF MEDICATION (Refer to Supporting Students with Medical Needs Policy)

This applies to all students, including those who do not have an individual health care plan.

Medicines will be safely stored in the Main Office. A written record will be kept of all medication administered. This will include date, time, dosage and name of the member of staff who administers the medicine.



MINOR ACCIDENT PROCEDURES	
1	A First Aider to assess the student and if appropriate to treat the injury or seek additional medical assistance.
2	Accident form, located in KS4 main office, to be completed.
3	If the student needs to go home a member of the senior leadership team to make necessary arrangements. If the injury requires supervision then a first aider / appointed person to remain with the student until they are collected.

SERIOUS ACCIDENT PROCEDURES	
Under NO circumstances should a student be left unaccompanied if suffering from a serious injury and especially a head injury.	
1	First Aider to assess the situation and administer immediate first aid as appropriate.
	Ambulance to be called if required.
	Member of senior leadership team to be notified of the situation - parents / carers to be informed of situation (if an ambulance is not required they should be informed of the need to collect their child).
	Accident form, located in KS4 main office, to be completed.
If hospital treatment is required, but a car journey is more appropriate than an ambulance, then the following procedure should be followed.	
2	The parents / carers should be contacted and asked to meet the student at A&E.
	An insured driver plus First aider should take the student to A&E.
	A member of senior leadership team to be kept informed of events.

Request for an Ambulance

Dial 999, ask for ambulance and be ready with the following information.

1. Your telephone number / School Telephone Number 01304 381906 (RINGWOULD)

2. Give your location as follows: Learning Opportunities
 Ringwould Road
 Ringwould
 Deal
 Kent
 CT14 8DW

3. Give exact location in the school

4. Give your name

5. Give brief description of student's symptoms

6. Inform Ambulance Control of the best entrance and state that the crew will be met

Speak clearly and slowly and be ready to repeat information if asked

APPENDIX D Procedure to follow for dealing with injuries involving blood or bodily fluids

There is always at least one first aider on site at all times and this person will be the one to deal with the injury.

Should bleeding occur at any time the following points should be followed:

- Put on latex gloves and a disposable apron.
- Try to stop the bleeding by applying pressure to the wound with a dry sterile dressing.
- Dispose of dressing into yellow clinical waste bag.
- Try and keep the person as calm as possible.
- Ensure there are 2 members of staff with the injured party so that if assistance is needed in any way one can remain with the person at all times.
- Deal with any spillage immediately using disposable items such as cloths, paper towels which can be thrown away, in the clinical waste bag, after the spillage is cleaned up. Clean the area thoroughly using diluted bleach 1 part bleach to 10 parts water.
- Ensure the area is clear of other students and adults to prevent cross contamination and spread of infection.
- Ensure all non-injured students are being cared for and reassured appropriately about what is happening.
- Replace the sterile dressing on the student/adult as often as needed as described in the training.
- All waste should be treated as clinical waste and discarded in the yellow bags provided.
- Hands should be washed and dried thoroughly after the student/adult is cared for and any bleeding has stopped.
- If bleeding starts again a new apron and gloves must be put on to prevent infection.
- If you feel medical assistance is required call 999 and ask for an ambulance. If they need assistance but not as an emergency inform the parents / carers and advise them to visit their local A&E. If ever in doubt always phone for an ambulance, especially in the case of students.

Epilepsy

Emergency procedure to be followed in school

First aid for the student's seizure type will be included on their individual care plan. Staff will be advised on basic first aid procedures and the school has a team of qualified First Aiders.

There are several types of seizure but in most cases the sufferer falls to the ground and their body becomes rigid due to strong muscular contractions.

- Make sure the area is clear so that they don't hurt themselves
- If possible ease the student to the ground
- Do not move them unless they are in danger (top of stairs, by a road etc.)
- Stay calm; send for the First Aider, giving the name of the student
- Note the time the seizure started
- Put something soft under their head (jacket or cushion) or gently cup their head with your hands to stop their head hitting the ground
- Get a responsible person to move other students away
- DO NOT put anything into their mouth, or restrain them - allow the seizure to happen

After the seizure

- Check their breathing
- Make sure that the airway is clear.
- If breathing, place in the recovery position
- Monitor and record vital signs: pulse, breathing rate and level of response
- Be prepared to commence cardiopulmonary resuscitation (CPR)
- Note the length of time of the seizure
- They may be confused and disorientated, so talk calmly and reassure the student
- The student may also have been incontinent, in which case cover them with a blanket to avoid potential embarrassment and preserve their dignity
- The after effects may be: a bitten tongue, headache, aching limbs and exhaustion
- Inform the parents at the earliest opportunity

Call an ambulance (following the school procedure) if:

- It is the student's first seizure
- If the seizure lasts for 5 or more minutes and they have not been prescribed emergency medication
- If the seizure lasted for 5 minutes or more and they have been given emergency medication
- They have trouble breathing after the seizure has stopped
- They have not regained consciousness after more than 10 minutes
- They have repeated seizures
- They may have sustained an injury

Collapse

Emergency procedure to be followed in school

Anyone finding a collapsed individual should shout for help then:

1. Call 999 and request an ambulance (following the school procedure)

Please state the exact location of the casualty clearly

2. Alert the SLT and trained First Aiders

3. Send a runner to take the AED located at the Five Bells Public House to the casualty.

▫ The First Aider/s will make their way immediately to the casualty

▫ CPR will be started as soon as it is established that the casualty is unresponsive and not breathing normally by the first trained person on the scene. The AED machine will be connected to the casualty as soon as it arrives.

▫ Any First Aiders not directly involved with CPR will assist with:

1. The safety of the casualty

2. Moving away any bystanders

3. Being ready to take over CPR if the other First Aiders become tired

4. Organise for someone to meet the ambulance crew and direct them to the location of the casualty as quickly as possible

A member of the Senior Leadership Team will be responsible for contacting the next of kin as soon the situation allows.

APPENDIX F

Resuscitation Council UK Statement on COVID-19 in relation to CPR and resuscitation in first aid and community settings.

This statement is for anyone who is performing CPR/defibrillation in an out-of-hospital setting.

Whenever CPR is carried out, particularly on an unknown victim, there is some risk of cross infection, associated particularly with giving rescue breaths. Normally, this risk is very small and is beset against the inevitability that a person in cardiac arrest will die if no assistance is given. The first things to do are shout for help and dial 999.

- First responders should consult the latest advice on the NHS website <https://www.gov.uk/government/publications/novel-coronavirus-2019-ncov-interim-guidance-for-first-responders/interim-guidance-for-first-responders-and-others-in-close-contact-with-symptomatic-people-with-potential-2019-ncov>
- Those laypeople and first responders with a duty of care (workplace first-aiders, sports coaches etc.) that may include CPR should be guided by their employer's advice
- This guidance may change based on increasing experience in the care of patients with COVID-19.
- Healthcare workers should consult the recommendations from the World Health Organisation and Department of Health and Social Care for further information, and advice by nation is at the conclusion of this statement.

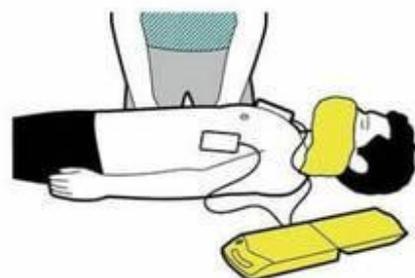
Resuscitation Council UK Guidelines 2015 state "If you are untrained or unable to do rescue breaths, give chest compression-only CPR (i.e. continuous compressions at a rate of at least 100–120 min⁻¹)"

Because of the heightened awareness of the possibility that the victim may have COVID-19, Resuscitation Council UK offers this advice:

1. Recognise cardiac arrest by looking for the absence of signs of life and the absence of normal breathing. Do not listen or feel for breathing by placing your ear and cheek close to the patient's mouth. If you are in any doubt about confirming cardiac arrest, the default position is to start chest compressions until help arrives.
2. Make sure an ambulance is on its way. If COVID 19 is suspected, tell them when you call 999.
3. If there is a perceived risk of infection, rescuers should place a cloth/towel over the victim's mouth and nose and attempt compression only CPR and early defibrillation until the ambulance (or advanced care team) arrives. Put hands together in the middle of the chest and push hard and fast.
4. Early use of a defibrillator significantly increases the person's chances of survival and does not increase risk of infection.
5. If the rescuer has access to any form of personal protective equipment (PPE) this should be worn.
6. After performing compression-only CPR, all rescuers should wash their hands thoroughly with soap and water; alcohol-based hand gel is a convenient alternative. They should also seek advice from the NHS 111 coronavirus advice service or medical adviser.

How to do CPR on an adult COVID-19 update

1. If someone is unconscious and not breathing normally, do not put your face near to theirs
2. Call for an ambulance
3. Use a towel or piece of clothing and lay it over the mouth and nose
4. Do not do mouth to mouth
5. Start chest compressions to the tempo of "Staying Alive"
6. Use a Public Access Defibrillator if available.



Source: Resuscitation Council UK

Find out how St John are supporting the NHS with the COVID-19 outbreak at sja.org.uk/COVID-19

St John
Ambulance



Resuscitation
Council UK