

# Hulme Hall Grammar School



# First Aid Policy

Report	First Aid Policy
Approval Body	Full Board
Date Reviewed	November 2020
Review Schedule	Two years
Next Review due	November 2022

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## **Aims**

Despite the best precautions or attention given to health and safety, accidents do occur and children can become ill. First Aid can save lives and prevent minor injuries becoming more serious. The aim of this policy is to provide a framework to ensure that any persons injured either on school premises, on trips or other school activities, whether they are pupils, staff or visitors, receive the quickest and most effective care and attention.

## **Responsibilities**

### **i. The Governing Body**

The Governing Body is responsible in law for the safety of all persons on the school premises or whilst involved in school activities.

The Governing Body will ensure that:

- i. the first aid policy is kept up to date, in line with existing legislation and reviewed annually or when required
- ii. insurance policies are maintained to provide full cover for claims arising from actions of staff, or any other insurance policies required by law
- iii. the requirements for first aid (see below) are met
- iv. that appropriate training is provided
- v. the correct procedures are followed, including suitable and sufficient risk assessment of first aid provision.

### **ii. The Headmaster**

The Headmaster is responsible for putting the Governing Body's policy into practice.

He will:

- i. select a competent Appointed Person to be in charge of the day to day implementation of the first aid policy
  - ii. ensure the Appointed Person has sufficient time to undertake such training as is required to perform the tasks competently
  - iii. ensure that pupils and parents are aware of the First Aid Policy, including location of the Sick Bay and first aid personnel
  - iv. evaluate the success of this policy and review the School's first aid needs in consultation with the Appointed Person.
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### **iii. The Appointed Person**

As the school is on one site, the school's Appointed Person shall be Mrs D Cooke. In her absence it will be Miss C Connolly and / or Mrs A Taylor.

She will:

- i. ensure that she receives sufficient training, including refresher training, to be competent in undertaking her tasks (this will be reviewed with her line manager as part of the appraisal process)
- ii. undertake a risk assessment (see below) of the school's first aid needs; in order to do this, she will require information regarding the specific illnesses / medical conditions of pupils and staff
- iii. appoint a sufficient number of staff to be trained as first aiders
- iv. devise procedures to ensure that the school provides adequate first aid care, including dealing with emergencies, information and training
- v. ensure that staff first aiders receive sufficient training, including refresher courses, to be competent in undertaking their tasks
- vi. ensure that staff induction programmes include a first aid element; this will be carried out by the Appointed Person (Mrs D Cooke)
- vii. be responsible for the security, quantity and quality of first aid equipment, including first aid for school visits (see also School Visits policy)
- viii. ensure that parent contact details are up to date, including mobile numbers
- ix. keep a record of all first aid that is administered and ensure any accident reports are properly completed  
The record should include:
  - date, time and place of accident
  - name of injured / ill person
  - details of injury / illness and nature of first aid
  - what happened to the person following treatment
  - name and signature of the first aider
- x. liaise with the school's Business Manager regarding any reported accident so that, where feasible, measures may be taken to remove or reduce the risk of injury to others.
- xi. ensure that the majority of teaching staff are basic First Aid trained, so whenever a child enters the site there is always a qualified First Aider.
- xii. ensure that certificates for First Aid training are updated every 3 years.

### **iv. Paediatric First Aiders**

As of November 2020, the following Senior School staff are paediatric first aid trained – Mrs D Cooke, Miss C Connolly and Miss A Lucas. Members of Pre-School staff are paediatric first aid trained within the first 2 years of appointment. All trips involving Pre-School pupils will have a paediatric first aider accompanying the children.

## **v. First Aiders**

First Aiders are volunteer members of staff who should:

- i. administer first aid to pupils, staff and visitors to an acceptable standard
- ii. undertake such training, including refresher courses to be competent in undertaking their tasks; the training will be completed every three years
- iii. comply fully with the school's First Aid Policy and procedures, including any reasonable request from the Appointed Person.

## **vi. Staff**

All staff, including non-first aiders, have responsibilities. These include ensuring that:

- i. pupils are sent to the Sick Bay if there is any reasonable concern about an injury or illness. Safety is paramount at all times
- ii. pupils are aware of the first aid procedures (primarily, but not solely the responsibility of form tutors and year heads)
- iii. parents are informed as quickly as is reasonably practicable about an injury or illness. If necessary, staff, including the Appointed Person or first aider, should provide the parent with details of the injury or illness, including any first aid that has been administered.
- iv. Updating named First Aiders (Mrs D Cooke / Miss C Connolly) of any medication changes that can affect their ability to care for children. All personal medication is to be locked away.

## **Risk Assessment**

The Appointed Person shall undertake an annual risk assessment to determine the necessary first aid provision for the school. In preparing the risk assessment, she should consider:

- i. specific hazard in time or place
- ii. specific health needs e.g. epilepsy, serious allergies
- iii. numbers of first aiders required in both time and place
- iv. accident statistics to try to reduce number of preventable injuries.

The Risk Assessment will be discussed with the Headmaster and will, in turn, be notified to the Governing Body, which will either accept the assessment or make such alterations as it sees fit.

## **First Aid Stock**

The Appointed Person will ensure that the first aid kit in the school Sick Bay always contains **at least** the following:

- a leaflet giving general advice on first aid
- 20 individually wrapped sterile adhesive dressings (assorted sizes)
- 2 sterile eye pads
- 4 individually wrapped triangular bandages
- 6 safety pins

- 6 medium (approx. 12cm x 12cm), individually wrapped, sterile, unmedicated wound dressings
- 2 large (approx. 18cm x 18cm) sterile, individually wrapped, unmedicated wound dressings
- disposable gloves.

The quantities above should be regarded as an absolute minimum. The Appointed Person will make regular checks to ensure that the sick bay remains adequately stocked.

The First Aid kits can be found in Sick Bay, Art, Food Preparation & Nutrition, Science, the Sports Hall, the Dining Hall and the Pre-School. Portable first aid kits are provided for ALL school fixtures and trips.

The Appointed Person will also ensure that a portable first aid kit is taken on all off-site visits and sporting activities. Each portable first aid kit should contain **at least** the following:

- a leaflet giving general advice on first aid
- 6 individually wrapped sterile wound dressings
- 1 large sterile unmedicated wound dressing (approx. 18cm x 18cm)
- 2 triangular bandages
- 2 safety pins
- individually wrapped, moist cleansing wipes
- 1 pair of disposable gloves.

The Appointed Person should check the kit before it is issued to ensure that it is adequately stocked.

All staff are issued with Health lists to ensure staff have a full understanding of every pupils' medical needs. Special arrangements will be made for pupils with medical conditions to ensure that they are supported in school and on external trips.

## **Riddor**

In the event of a serious work-related accident the Business Manager, in conjunction with Compliance Education, has responsibility for completing a RIDDOR report. He will receive the appropriate training and a report will be submitted on line via the Health and Safety Executive website.

## **Evaluation**

The Appointed Person shall evaluate this policy annually with the Headmaster, or when deemed necessary. A report shall be provided to the Governing Body reviewing the policy and making such amendments as seen fit. It is envisaged that the report evaluating this policy shall be forwarded to the Governing Body at the same time as the risk assessment for the forthcoming year.

## **Appendix 1**

### **Procedures – Practical arrangements at point of need**

Pupils who are ill during the day should be sent to the School Office with a note from a teacher. If you have any concerns about the pupil, e.g. if they are short of breath, ensure that they are sent to the Office accompanied by another pupil.

Any member of staff who feels unwell during the day should also report to the School Office.

The trained First Aid staff will then assess whether the pupil / staff member should go to the Sick Bay.

## **Appendix 2**

### **Recording Illnesses and Accidents**

All injuries / illnesses reported to the Sick Bay, will be recorded in the log held in the School Office.

However, for more serious incidents, the following procedure will apply. A parent / carer will be contacted, usually by telephone. For example:

- a. where a pupil is taken to hospital (by a member of staff or ambulance)
- b. where a parent is asked to collect their child with a recommendation from the Appointed Person or other member of staff, that they seek further medical attention e.g. a suspected broken bone requiring x-ray
- c. where the injury may be the result of negligence on behalf of the school or member of teaching staff
- d. where the injury may be the result of an accident or assault, the Appointed Person, first aider or member of staff, should complete an Accident Form as soon as is practicable after the event.

A supply of Accident Forms is kept in the School Office. Once complete, the Accident Form is to be returned to the Appointed Person. Copies of the report will be placed by the Appointed Person in the accident file kept in the School Office, the pupil's / staff member's file and a copy given to the Business Manager.

## **Appendix 3**

### **Head Injuries**

All head injuries should be regarded as potentially serious, irrespective of the extent of external injury. It is important to monitor any person with a head injury very carefully, looking for key signs such as sickness, dizziness, incoherence or drowsiness. If in doubt, or if any of the key signs are exhibited, seek medical help. An ambulance should be called and parents should be informed.

The Appointed Person will ensure that any pupil who has been treated for a head injury, no matter how minor, takes home a 'Yellow Form' advising parents of developing symptoms that may require medical investigation. Any member of staff who has a head injury should also report, or be taken, to Sick Bay immediately.

## **Appendix 4**

### **Medicines / Arrangements for pupils with particular medical conditions**

Some pupils will suffer from conditions that require daily medication or testing e.g. diabetics, ADHD, asthma, epilepsy. Other pupils may occasionally be required to take medication e.g. antibiotics during the school day.

In either case, it is the duty of the Appointed Person to:

- i. discuss the medication with the parent to clarify dosage and time that the medication is to be administered
- ii. ensure that the medication, or kit, is kept in a secure place within the School Office (medication) / Sick Bay (kit) and that it is clearly labelled with the pupil's name
- iii. keep a record of the times when the medication was administered
- iv. ensure that other first aiders in the Sick Bay are fully briefed regarding the pupil's medication
- v. ensure that medication belonging to a particular pupil is not used to treat other pupils
- vi. ensure that all instructions for the administration of medication should be given by parents.

## **Appendix 5**

### **Health Lists**

It is the role of the Appointed Person to compile the pupil health list at the start of each new academic year. The health list will be based upon the information supplied by parents on the School Admission Form. The Appointed Person will ensure that all health information is updated on the School Management Information System (MIS) during the year. All members of staff are able to access this information via the MIS. This information is to be regarded as confidential.

The Appointed Person will also ensure that any new pupils that join during the school year are added to the system and that staff are informed to check the MIS for any new information.

Individual health lists are prepared by the Appointed Person as required, e.g. for the kitchen regarding allergy information, or for school trips.

## Appendix 6

### Hygiene

#### Body Fluid Spillage Policy

Blood and body fluids (e.g. faeces, vomit, saliva, urine, nasal and eye discharge) may contain viruses or bacteria capable of causing disease. It is therefore vital to protect both yourself and others from the risk of cross infection. In order to minimize the risk of transmission of infection both staff and pupils should practice good personal hygiene and be aware of the procedure for dealing with body spillages.

- **Staff Contact** Site Manager (Mr J Wilks) / Main First Aider (Mrs D Cooke) to be contacted initially so that he / she can arrange for a member of the cleaning / site team to clean the area appropriately, according to 'Initial Clean Up Procedure'. In the event of a member of cleaning / site staff not being available then there are disposable clean up gloves available in the Sick Bay.
- **Initial Clean Up Procedure** Put on some disposable gloves, which are available from the nearest First Aid kit. Place absorbent towels over the affected area and allow the spill to absorb. Wipe up the spill using these and then place in a bin liner. Put more absorbent towels over the affected area and then contact the Site Manager for further help. The bin liner that has had the soiled paper towels put in then needs to be tied up and ideally placed in the designated bin or double bagged and put in an outside bin. Any article of clothing that has got contaminated with the spill should be wiped cleaned and then put in a plastic bag and tied up for the parents to take home. The area then needs to be cordoned off until cleaned. If a cleaner is not immediately available then a disposable cleaning kit will need to be used. If the spillage has been quite extensive, the area may need to be closed off until it can be cleaned correctly
- Disposable gloves to be worn at all times. Any soiled wipes, tissues, plasters, dressings etc. must be disposed of following the procedure above
- The area must be cleaned with disinfectant following the manufacturer's instructions. A 'Wet Floor Hazard' sign then needs to be put by the affected area. The area should then be ventilated well and left to dry.
- **Management of Accidental Exposure to Blood** Accidental exposure to blood and other body fluids can occur by: Percutaneous injury e.g. from needles, significant bites that break the skin; exposure to broken skin e.g. abrasions and grazes; exposure of mucous membranes, including the eyes and mouth.
- **Action To Take** If broken skin, try to stem bleeding of the wound by applying pressure – do not suck. Wash thoroughly under running water. Dry and apply a waterproof dressing. If blood and body fluids splash into your mouth – do not swallow. Rinse out mouth several

times. Report the incident to the Appointed Person. If necessary take further advice from NHS Direct. An accident form and / or other appropriate reports will need to be completed.

## Appendix 7

### When to call an ambulance

When a child has an accident or is ill it can be incredibly difficult to assess how serious it is and whether it is necessary to call an ambulance.

The decision will vary from case to case, but we would strongly advise to administer First Aid and call an ambulance if the child:

- Appears not to be breathing, is having chest pain, or is struggling for breath, possibly breathing in a strange way appearing to 'suck in' below their rib cage and using other muscles to help them to breathe
- If they have suffered a head injury – refer to Appendix 3
- If they have a severe injury that is bleeding profusely and you are unable to stop with direct pressure on the wound
- If they are unconscious or unaware of what is going on around them or experiencing weakness, numbness or difficulty speaking
- An ambulance should be called if a child has a fit for the first time, even if they seem to recover from it later. It is important to phone an ambulance if someone is having a seizure and the fit last longer than 3 minutes
- If a child has a severe allergic reaction it is important to administer their adrenaline auto injector (if they have one) and then phone an ambulance immediately
- If a child is burnt and the burn is severe enough that you think it will need dressing – treat the burn under cool running water and call an ambulance. Keep cooling the burn until the paramedics arrive – look out for signs of shock
- If the child has fallen from a height, been hit by something travelling at speed (like a car) or been hit with force whilst doing combat or contact sport and there is a possibility of a spinal injury – if they are conscious keep them completely still and get an ambulance on the way. If they are on their back, unconscious and breathing – very carefully roll them into the recovery position and then phone an ambulance – if they are unconscious and not breathing start CPR – and do one minute before phoning for an ambulance.

Take a child straight to A&E if they have:

- A fever and are floppy and lethargic even after an appropriate dose of paracetamol or ibuprofen
- Severe abdominal pain

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- A cut that is gaping or losing a lot of blood, if they have amputated a finger or if there is something embedded in the wound.
  - A leg or arm injury and can't use the limb
  - Swallowed poison or tablets and are not showing any adverse effects (111 can also give you advise from the poisons database – if they are behaving strangely or experiencing any symptoms from the poison, call an ambulance immediately).



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