



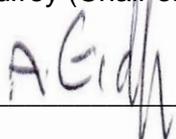
First Aid Policy

Policy Version Control

Version history see Annex A errata for details

Version No.	Policy Author	Date Updated	Review Date
1	G Mellefont	01.03.2018	March 2019

Approval: A Godfrey (Chair of Board)

 (signed) **Date authorised:** 19.04.2018

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North View Academy First Aid Policy

The school will provide training, materials, equipment and facilities as set out in DEE 'Guidance on First Aid for schools' Updated 12 February 2014.

Arrangements for First Aid

The Head Teacher will inform all employees at the academy of the following:-

- Risk Assessment for First Aid (completed by Gill Lynch)
- The arrangements for recording and reporting accidents.
- Those employees with qualifications in first Aid
- The location of First Aid kits

In addition the Head Teacher will ensure that signs are displayed throughout the academy providing the following information:

- Names of employees with first aid qualifications
- Location of first aid boxes

All members of staff will be made aware of the academy's first aid policy

The location of First Aid Kits:

Mini Bus x 1
Admin Office
Classbase 3
Classbase 4
Food Technology Room
Staffroom

The contents of the kits will be checked on a regular basis by Gill Lynch who will act as the appointed person to advise and respond to replenishment of stocks from the appropriate provider

Off Site activities

At least one first aid kit will be taken on all off site activities, along with individual pupil's medication including inhalers, epi-pens.

A person who has been trained in first aid will accompany all off site visits where deemed necessary.

Accident Recording and Reporting

The Governing body will implement procedures for recording:

- All accidents to employees
- All incidents of violence and aggression

Statutory Accident Book

The Governing body recognizes their duty to keep readily accessible accident records as per the requirements of the Department of Social Security B1510 statutory accident book

RIDDOR Reporting

The Governing body is aware of its statutory duty under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR) in respect of reporting the following to the Health and Safety executive as it applies to employees.

- the accident is **work-related**; and
- it results in an injury of a type which is **reportable** (as listed under 'Types of reportable injuries').

When deciding if the accident that led to the death or injury is work-related, the key issues to consider are whether the accident was related to:

- the way the work was organised, carried out or supervised;

- any machinery, plant, substances or equipment used for work; and
- the condition of the site or premises where the accident happened.

Types of reportable injury

Deaths

All deaths to workers and non-workers must be reported if they arise from a work-related accident, including an act of physical violence to a worker. Suicides are not reportable, as the death does not result from a work-related accident.

Specified injuries to workers

The list of 'specified injuries' in RIDDOR 2013 (regulation 4) includes:

- a fracture, other than to fingers, thumbs and toes;
- amputation of an arm, hand, finger, thumb, leg, foot or toe;
- permanent loss of sight or reduction of sight;
- crush injuries leading to internal organ damage;
- serious burns (covering more than 10% of the body, or damaging the eyes, respiratory system or other vital organs);
- scalpings (separation of skin from the head) which require hospital treatment;
- unconsciousness caused by head injury or asphyxia;
- any other injury arising from working in an enclosed space, which leads to hypothermia, heat-induced illness or requires resuscitation or admittance to hospital for more than 24 hours.

Over-seven-day injuries to workers

This is where an **employee, or self-employed person, is away from work or unable to perform their normal work duties for more than seven consecutive days** (not counting the day of the accident).

Injuries to non-workers

Work-related accidents involving members of the public or people who are not at work must be reported if a person is injured, and is taken from the scene of the accident to hospital for treatment to that injury. There is no requirement to establish what hospital treatment was actually provided, and no need to report incidents where people are taken to hospital purely as a precaution when no injury is apparent.

Reportable occupational diseases

Employers and self-employed people must report diagnoses of certain occupational diseases, where these are likely to have been caused or made worse by their work. These diseases include (regulations 8 and 9):

- carpal tunnel syndrome;
- severe cramp of the hand or forearm;
- occupational dermatitis;
- hand-arm vibration syndrome;
- occupational asthma;
- tendonitis or tenosynovitis of the hand or forearm;
- any occupational cancer;
- any disease attributed to an occupational exposure to a biological agent.

Reportable dangerous occurrences

Dangerous occurrences are certain, specified 'near-miss' events (incidents with the potential to cause harm.) Not all such events require reporting. There are 27 categories of dangerous occurrences that are relevant to most workplaces. For example:

- the collapse, overturning or failure of load-bearing parts of lifts and lifting equipment;
- plant or equipment coming into contact with overhead power lines;
- explosions or fires causing work to be stopped for more than 24 hours.

Reportable gas incidents

If you are a distributor, filler, importer or supplier of flammable gas and you learn, either directly or indirectly, that someone has died, lost consciousness, or been taken to hospital for treatment to an injury arising in connection with the gas you distributed, filled, imported or supplied, this can be reported online.

If you are a gas engineer registered with the Gas Safe Register, you must provide details of any gas appliances or fittings that you consider to be dangerous to the extent that people could die, lose consciousness or require hospital treatment. This may be due to the design, construction, installation, modification or servicing, and could result in:

- an accidental leakage of gas;
- inadequate combustion of gas; or
- inadequate removal of products of the combustion of gas.
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RIDDOR Recording requirements

Records of incidents covered by RIDDOR are also important. They ensure that you collect sufficient information to allow you to properly manage health and safety risks.

This information is a valuable management tool that can be used as an aid to risk assessment, helping to develop solutions to potential risks. In this way, records also help to prevent injuries and ill health, and control costs from accidental loss.

You must keep a record of:

- any **accident, occupational disease or dangerous occurrence** which requires reporting under RIDDOR; and
- any other occupational accident causing injuries that result in a worker being away from work or **incapacitated for more than three consecutive days** (not counting the day of the accident but including any weekends or other rest days). You do not have to report over-three-day injuries, unless the incapacitation period goes on to exceed seven days.

Academy's First Aid central record

The academy will keep a record of any first aid treatment given by first aiders and appointed persons. This will include:

- The date, time and place of incident;
- The name (and class) of the injured or ill person;
- Details of the injury/illness and what first aid was given;
- What happened to the person immediately afterwards (for example went home, resumed normal duties, went back to class, went to hospital);
- Name and signature of the first aider or person dealing with the incident.

Currently these records are kept in a spreadsheet. From April 2018 these records will be added to CPOMS where pupils are the injured person. This will be the responsibility of Mrs Louise Shields who will keep all accident report books in the Admin area. First aiders treating a pupil will go to admin block, complete accident slips in accident book, then tear off top slip to be sent home via daily home/school diary and record book remains in admin. Mrs Shields will then use the record book to update CPOMS on weekly basis. The accident report books DO NOT LEAVE THE ADMIN AREA.

Staff and/or visitor records will continue to be maintained as currently, within the Academy's First Aid Central record

Pupil accidents involving their head

The Governing body recognise that accidents involving the pupil's head can be problematic because the injury may not be evident and the effects only become noticeable after a period of time.

- Where emergency treatment is not required, a 'report slip' will be sent home to the child's parents or guardians, with a copy being retained in school.

- Copies of Report slips are retained centrally.

Transport to hospital or home

- The Head teacher will determine what is a reasonable and sensible action to take in each case.
- Where the injury is an emergency an ambulance will be called. The parent will then be contacted.
- Where hospital treatment is required but it is not an emergency, then the Head teacher will contact the parents for them to take over responsibility for the child.
- If the parents cannot be contacted then the Head teacher may decide to transport the pupil to hospital.

Where the Head teacher makes arrangements for transporting a child then the following points will be observed:

- Only staff cars insured to cover such transportation will be used
- No individual member of staff should be alone with a pupil in a vehicle
- The second member of staff will be present to provide supervision for the injured pupil.

First Aid Qualification and training

Qualified First Aiders

First Aid at Work:

Gill Lynch

Paediatric First Aid:

Sallyann Bradburn
Kathryn Bryce
Deanne Watson

Training on First Aid will be undertaken every three years by nominated staff.

Annex A

Version No.	Change History	Guidance reference (if any)	Date
1	Updated		01.03.2018