FIRST AID AND MEDICAL TREATMENT POLICY AND PROCEDURES
INTRODUCTION

First aid can save lives and prevent minor injuries becoming major ones. Under health and safety legislation employers have to ensure that there are adequate and appropriate equipment and facilities for providing first aid in the workplace.

Although there is no requirement to take account of persons who are not employees, the purpose of this policy is to ensure that at The John Wallis Church of England Academy there is appropriate first aid provision for employees, students and visitors at all times while people are on the Academy campus and whilst on off site visits. This is consistent with the spirit of the regulations, guidance from the Health & Safety Executive and the DfE and with the Academy’s obligations to children as being in loco parentis. The policy is designed to ensure that all staff and students are aware that a system is in place, to provide awareness of health and safety issues within the Academy and for off site learning and to prevent, where possible, potential dangers or accidents.

This policy has been written with reference to the DFE good practice guide Guidance on First Aid for Schools (1998). All first aiders should be familiar with this document in addition to the Academy First Aid Policy. The Academy Health & Safety Policy includes arrangements for first aid.

POLICY STATEMENT

The John Wallis Church of England Academy takes seriously its responsibility to care for the interests of its learners in emergency situations. The Academy will provide awareness of health and safety issues on campus and during off site learning, to prevent, where possible, potential dangers or accidents. However, where accidents do occur, it is essential that the Academy has qualified staff and clearly defined procedures that can be called upon immediately to treat injuries with the aim of reducing the impact of the accident and if necessary to save life.

To this end, the Academy will appoint the appropriate number of suitably trained people as first aiders and appointed persons to meet the needs of its learners and visitors. It will provide relevant training and ensure there is monitoring of training needs. Sufficient and appropriate first aid resources and facilities will be provided and staff and parents/carers will be informed of the first aid arrangements. The Academy will keep accident records and will report to the HSE as required under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 1995.

ROLES AND RESPONSIBILITIES

Responsibility for health and safety rests with the Governing Body and the Principal. The respective roles of each are outlined within the DFE guidelines Guidance on First Aid for Schools.
GOVERNING BODY

The Governing Body has responsibility for health and safety matters within the Academy and during off site learning.

PRINCIPAL

The Principal will be responsible for ensuring that the policy is put into practice and that parents and carers are aware of the Academy’s health and safety policy, including arrangements for first aid.

TEACHERS AND ADULTS OTHER THAN TEACHERS

Teachers and all other staff are not required to give first aid as part of their conditions of employment. All staff are expected to secure the welfare of students whilst they are in their care. The consequences of taking no action are likely to be more serious than trying to assist in an emergency. All Academy staff should familiarise themselves with the first aid procedures in operation and ensure that they know who the current first aiders are. Staff should be aware from Academy records of specific medical details of individual students they teach or mentor.

FIRST AIDERS

Staff who volunteer to be first aiders must be given adequate appropriate training. The Governing Body must ensure that there are sufficient trained staff to meet the statutory requirements and assessed needs for those on the Academy campus.

A first aider is someone who has successfully completed a training course in first aid at work. The course must be approved by the HSE and will last for at least four days. Training must be refreshed every three years, refresher courses will usually last two days. If a first aider fails to attend and successfully complete a refresher course within the three year period, he/she must complete the full course again. The three year period must not be exceeded even by one day.

The main duties of a first aider are to:

- give immediate help to casualties with common injuries and those arising from specific hazards on the Academy campus or during off site learning;
- ensure that an ambulance or other medical help is called when necessary; and
- ensure that an accident report form is completed and given to the senior first aider.

APPOINTED PERSON

An appointed person need not be a first aider but is a member of staff who will take charge of the situation when someone becomes ill or is injured and
immediately summons medical assistance. The appointed person looks after first aid equipment and ensures that an ambulance or other medical help is called when appropriate. It would be appropriate for the appointed person to have received at least basic emergency first aid training to help him/her cope with an emergency situation.

**NUMBER OF FIRST AIDERS**

The number of first aiders a school requires depends on an assessment of risk. At The John Wallis Church of England Academy, we have a minimum of four fully qualified first aiders plus additional emergency first aiders who have completed the one day emergency first aid course. There is always a first aider on site when students are in attendance at the Academy.
FIRST AID MATERIALS, EQUIPMENT & FACILITIES

First aid boxes will be placed around the Academy, near to hand washing facilities if possible, so that they are easily accessible and should contain only the items given in the table. No other items should be added to the box. They should always be adequately stocked. They should not contain medications of any kind. Traveling first aid kits should be provided for journeys, etc as indicated in the table.

Traveling first aid kits may contain equivalent or additional items.

CONTENTS OF FIRST AID BOXES AND MOBILE KITS

<table>
<thead>
<tr>
<th>Item</th>
<th>First aid boxes</th>
<th>Travelling first aid kits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Guidance card</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Individually wrapped sterile adhesive dressings (assorted sizes)</td>
<td>20</td>
<td>6</td>
</tr>
<tr>
<td>Sterile eye pads</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Individually wrapped triangular bandages (preferably sterile)</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>Safety pins</td>
<td>6</td>
<td>2</td>
</tr>
<tr>
<td>Medium sized individually wrapped sterile unmedicated wound dressings (approx. 12cm x 12cm)</td>
<td>6</td>
<td></td>
</tr>
<tr>
<td>Large sterile individually wrapped unmedicated wound dressings (approx 18 cm x 18 cm)</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Individually wrapped moist cleaning wipes (non allergenic)</td>
<td>1 pack</td>
<td>1 pack</td>
</tr>
<tr>
<td>Pair of disposable gloves</td>
<td>1</td>
<td>1</td>
</tr>
</tbody>
</table>

Where tap water is not readily available for eye irrigation, sterile water or sterile normal saline in sealed disposable containers (at least 300 ml) should be provided.

First aid boxes and kit containers should protect the contents from damp and dust and should be clearly marked with a white cross on a green background. The appointed person should check contents of all first aid boxes on a monthly basis and re-stock the boxes as appropriate.

Note: All first aid material have expiry dates and should not be used after this date.

FURTHER ITEMS FOR FIRST AID USE

The following items should be kept separate from the box for first aid use:

- disposable drying materials;
• plastic bowls – one for cleaning wounds and one for cleaning vomit, and other bodily fluids;
• household bleach solution – one part bleach to ten parts water for cleaning sinks and bowls and soiled surfaces;
• yellow bio-hazard type plastic bags for disposing of bulky amounts of blooded waste.

MINIBUS FIRST AID CONTAINER

A minibus must carry a first aid container with the following items

<table>
<thead>
<tr>
<th>Item</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individually wrapped sterile adhesive dressings (assorted sizes)</td>
<td>24</td>
</tr>
<tr>
<td>Sterile eye pads, with attachments</td>
<td>2</td>
</tr>
<tr>
<td>Triangular bandages</td>
<td>2</td>
</tr>
<tr>
<td>Safety pins</td>
<td>12</td>
</tr>
<tr>
<td>Large sized individually wrapped sterile unmedicated ambulance dressings (not less than 15cm x 20cm)</td>
<td>3</td>
</tr>
<tr>
<td>Conforming disposable bandage (not less than 7.5 cm wide)</td>
<td>1</td>
</tr>
<tr>
<td>Antiseptic wipes, foil packaged</td>
<td>10</td>
</tr>
<tr>
<td>Pair rustless, blunt-ended scissors</td>
<td>1</td>
</tr>
</tbody>
</table>

The items must be stored in a container to protect the contents from damp and dust and should be clearly marked with a white cross on a green background.

FIRST AID ROOM/FACILITY

The Academy has a designated medical room which contains a first aid box and a washbasin with washing and drying materials. A chair and a bed with a blanket is provided. The room will be thoroughly cleaned each week and laundering will be arranged as required. The appointed person will keep the box stocked in accordance with the list above. First aid may be administered elsewhere in the Academy as appropriate using the nearest available first aid box.

SIGNS AND NOTICES

There will be notices which state the names of first aiders, the appointed person and where facilities are located in each main area of the Academy.

ACCESS FOR AMBULANCE

Unobstructed and adequate access for ambulances should be maintained and suitable signs displayed if deemed appropriate.
PROCEDURES

REPORTING AN INCIDENT REQUIRING FIRST AID

ACADEMY STAFF will:

- Never move a casualty until they have been assessed by a qualified First Aider unless the casualty is in immediate danger.
- Send for help to the student services reception or for the nearest known first aider as soon as possible either by a person or telephone, ensuring that the messenger knows the precise location of the casualty. Where possible, confirmation that the message has been received must be obtained.
- Reassure, but never treat, a casualty unless he/she is in possession of current recognised first aid certificate.
- Send a student who has minor injuries to student services reception if they are able to walk where a first aider will see them; this student should be accompanied.
- Send a student who feels generally ‘unwell’ to the student services reception and not call a first aider, unless their deterioration seems uncharacteristic and is causing concern.

STUDENT SERVICES STAFF will:

- Call for a qualified first aider, unless they are one themselves, to treat any injured student. This should be done by telephone in the case of minor injuries or by pager system.
- Support the first aiders in calling for an ambulance or contacting relatives in an emergency.

FIRST AID RECORDS

First aiders will record every case they treat as soon after the incident as is practicable.

Each record will include at least the name of the patient, date, place, time and circumstances of the incident and details of injury suffered and treatment given. It also records what happened to the patient immediately after treatment e.g. returned to class, or went home. The records are kept centrally by the Director of Finance & Operations and are readily available. These records will be linked to the statutory accident records and the RIDDOR record for the reporting of injuries and will be kept for three years.

Records are kept of first aiders’ certification dates, and the dates of additional, specific or refresher training.

Some accidents must be reported to the HSE. RIDDOR 1995 will be followed in these cases. Fatal and major injuries and dangerous occurrences must be reported immediately by telephone followed up with a written report on Form
2508 within ten days. Other reportable accidents not requiring immediate notification must be reported on Form 2508 within ten days.

All records relating to incidents and first aid will help the Academy identify accident trends and can be used for first aid assessments, staff professional development and may be helpful for insurance and investigation purposes.

COMMUNICATION WITH PARENTS/CARERS

Where a student has been treated, the Academy should report the treatment to the child’s parent/carer. Depending upon the nature of the incident this could be by telephone or letter and may require immediate contact.

BUMPS ON THE HEAD

A qualified first aider will know the procedure for dealing with a child who has a bump to the head and in any serious case the child will be taken to hospital either by a member of staff or the parent. However, sometimes the effects only become noticeable after a period of time – perhaps several hours.

The Academy has a system for monitoring the child and for informing the parent. Any child who has had a head injury, no matter how apparently minor it appears should be given a ‘bumped head’ note to show each teacher for the remainder of the day. Each teacher whose lesson the child attends should be asked to keep a look out for signs of drowsiness or distress. The student should take the note home to the parent/carer, advising that in case of undue drowsiness, sickness or dizziness they should contact their GP or local hospital Accident & Emergency department immediately.

PROTECTION FROM DISEASES CARRIED IN BODILY FLUIDS

There are a number of infectious diseases that can be transmitted by contact with blood and other body fluids. Many such diseases do not necessarily present symptoms in the person who is carrying the bacteria or virus that causes the disease. It is important that responsible hygiene procedures are always followed whenever any first aid is being given. Such procedures will include the use of single-use disposable gloves, plastic aprons, hand washing before and after giving treatment.

DISPOSAL OF CLINICAL WASTE

Any blood or other body fluid waste produced within the Academy should be disposed of using yellow bio-hazard type disposable bags. Items that should be disposed of as clinical waste will include soiled nappies; disposable cloths used for cleaning vomit or faeces; any blooded waste. The bags should be collected on a regular basis.
HIGHER RISK AREAS IN THE ACADEMY

Practical subjects, including Technology and Art, Science and PE present special risks and each of these areas should have their own first aid facilities and ideally a first aider. However, this may not be possible, and staff should be aware of immediate remedial measures they can take whilst awaiting the arrival of the first aider.

IMMEDIATE REMEDIALSE MEASURES FOR LABORATORY ACCIDENTS

The First Aid Regulations do not necessarily require there to be a qualified first aider among specialist subject staff. Nevertheless, all staff will wish to carry out remedial measures immediately while waiting for first aid or professional medical treatment. The following advice covers common laboratory accidents and is intended as a supplement to any local guidance on dealing with non-laboratory events, e.g. epileptic fits.

The following guidance is reproduced from the CLEAPSS manual for Science but may apply equally well for other practical subjects:

- **Chemical splashes in the eye**
  Immediately wash the eye under running water from a tap for at least 10 minutes. The flow should be slow and eyelids should be held back. Afterwards, the casualty should be taken to hospital.

- **Chemical splashes on the skin**
  Wash the skin for five minutes or until all traces of the chemical have disappeared. Remove clothing as necessary. If the chemical adheres to the skin, wash gently with soap.

- **Chemicals in the mouth, perhaps swallowed**
  Do no more than wash out the casualty’s mouth. After any treatment by the first aider, the casualty should be taken to hospital.

- **Burns**
  Cool under gently running water until first aid arrives.

- **Toxic gas**
  Sit the casualty down in the fresh air.

- **Hair on fire**
  Smother with a cloth.

- **Clothing on fire**
  Smother by pushing the casualty to the ground, flames underneath. Spread a thick cloth or garment on top if necessary. A fire blanket is ideal but use only if very close by.
• **Electric shock**
  Use a non-conducting object, such as a wooden broom handle, to switch off or pull out the plug. If it is necessary to move the casualty clear, use a broom handle or wooden window pole or wear rubber gloves. Summon a first aider and medical assistance immediately and inform them that the person has suffered an electric shock. Do not approach the casualty unless you are certain the electrical supply is off.

• **Bad cuts**
  Apply pressure on or as close to the cut as possible, using fingers or a pad of cloth. Leave any embedded large bodies and press round them. Lower the casualty to a chair or the floor and raise the wound as high as possible.

**EMERGENCY FIRST AID FOLLOWING TRAUMA TO THE TEETH**

Following trauma to the mouth, it is important that the child is assessed by a dentist as soon as possible, even if there is no apparent damage to the teeth. This treatment may be provided by the child’s dentist, by the Community dentist at the nearest Community Dental Clinic, or by any other dentist who can be contacted and is willing to provide immediate treatment. It is not advisable to attend hospital for the urgent dental treatment required as valuable time may be lost during travelling or waiting while more serious accident cases are treated.

When one or more of the permanent front teeth are completely knocked out immediate first aid is essential for successful treatment. This advice does not apply to teeth with broken roots or baby teeth, neither of which should be reimplanted.

• Pick the tooth up carefully by the crown – the shiny part which is usually visible in the mouth.

• If the tooth looks quite clean do not worry about further cleaning, but if it has been badly contaminated with dirt or mud, GENTLY wash under warm tap water, or milk.

• Do not scrub, or apply any form of disinfectant.

• Next, push the tooth gently back into the socket, still holding the crown only. If this is done quickly it is not usually painful. Get the child to bite on a clean handkerchief to hold the tooth in place and accompany the child to the dentist as soon as possible.

• However, if no-one is prepared to attempt this, the tooth should be stored in milk and taken with the child to the dentist immediately.

• Do not store the tooth in water, or disinfectants such as Savlon or Milton. **Do not** wrap the teeth in a wet or dry handkerchief.
• **Go to the dentist as soon as possible** If the tooth has been stored in milk it may be possible to re-implant it up to twelve hours after the accident. However, chances of success are greatest within thirty minutes and are still high up to two hours later. After receiving dental treatment, if anti-tetanus protection is required, the child will need to attend the family doctor.

**THE USE OF STAFF CARS IN EMERGENCIES**

Staff who may be called upon to transport children to hospital in an emergency using their own car should ensure that their insurance covers this use. In most cases it will, but if in doubt, staff should check the policy or verify this with their insurers.

**HOSPITAL CONSENT FORMS**

It is unlikely that Academy staff who take students to hospital after accidents will be asked by the hospital to sign consent forms but if asked they should decline. The hospital will have procedures for obtaining consent from other sources if the parent/carer is not available.

**OTHER USERS OF THE ACADEMY PREMISES**

The Academy encourages mutual co-operation and assistance between the other users of the premises such as our catering and cleaning contractor staff and the Academy in first aid matters. The contract services may have their own first aiders or appointed persons or may need to use the Academy’s provision. The Academy and its contractors will exchange information about first aiders, etc in case there is a need for help and assistance in an emergency.

Groups taking out lettings of the premises will be informed where the first aid facilities are.

**RELIGIOUS AND CULTURAL CONSIDERATIONS**

Students’ record cards should have an appropriate entry regarding this and this should be known to the first aider or teacher who may have the duty of taking the child to hospital in emergency if the parent is not available.
MEDICAL TREATMENT POLICY

Introduction

We want all our students to take full advantage of the varied opportunities provided by the Academy. Those with medical needs should therefore expect the best possible care.

All medical information we receive is treated in confidence subject to our data protection procedures. Relevant staff receive information relating to individuals to promote their safety and wellbeing.

Aim

It is essential that all students feel safe at the Academy, including those in need of medical help, support and assistance. With this in mind, we wish to take a sensible and common sense approach.

Procedure

If a student needs to bring medication into the Academy, we wish to be notified by the parent/carer in writing. We ask this so that we can support that student and advise others in the unlikely event of further medical attention is required.

We also ask that medication be left in the Medical Room, where it will be securely stored. Medication can then be dispensed under the supervision of a first aider.

Where a student has to carry special medication with them at all times, or where all staff should be aware of emergency treatment procedures for an individual student’s condition, the parent, carer or relevant health professional should inform the first aiders so that arrangements can be made for relevant special procedures and staff training.

The Medical Room

At times students are unfit and need to seek the advice of the first aiders. The Academy takes a sensible approach to this and will contact the parent/carer if it is felt that the student is unfit to return to lessons. Where a student notifies a member of staff that they are feeling unwell, that member of staff should ensure that the student arrives at the Medical Room as quickly as possible.

Calling the Emergency Services

Acting in loco parentis the Academy reserves the right to contact the Emergency Services prior to contacting the parent/carer themself, the emphasis being to respond as rapidly as possible to an accident or incident which requires or may require professional medical attention. The parent/carer will of course be contacted as soon as practicably possible.
Parental responsibility

Parents and carers are responsible for alerting us to medical conditions or needs including any information and guidance that they feel will help us to provide effective care for their child. The guidance may require General Practitioner endorsement.

The records of students joining the Academy are sent automatically. Therefore it is important that parents/carers keep details of their child’s medical records up to date so that the correct information is provided to us.

First Aiders

There are three main first aiders at the Academy, the names of whom are kept in Reception and displayed in the staffroom.

Adults requiring medical attention

The same procedures apply to adults as well as to students, with next of kin being the point of contact.