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FIRST AID IN SCHOOLS POLICY

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First Aid in Schools Policy

Strategic Risk Management



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Introduction

The Health and Safety (First Aid) Regulations 1981 require employers to provide adequate and appropriate equipment, facilities and personnel to enable first aid to be given to employees if they are injured or become ill at work.

What is adequate will depend on the school's circumstances; therefore, the amount and type of first aid provision must be determined by an individual school assessment.

Employers do have responsibilities towards non employees but are not obliged under the Regulations to provide first aid for anyone other than their own staff. In the case of schools, Surrey County Council has chosen to follow the recommendations made by the Health and Safety Executive (HSE) and the Department for Education (DfE) and requires for pupils and visitors to be considered and accounted for in the first aid provision.

Definitions

First Aid at work: the treatment of injury or illness suffered at work, whether or not caused by the work being done, in order to save life and prevent conditions worsening and, in serious cases, to call an ambulance.

First Aider: someone who has undergone an approved training course and holds a current certificate of competence in either first aid at work or emergency first aid at work.

Appointed Person: someone who takes charge when someone is injured or falls ill, including calling an ambulance if required, and looks after the first aid equipment, for example, takes responsibility for restocking the first aid box.

Automated External Defibrillator (AED): a portable electronic device that automatically diagnoses and where necessary delivers an electric shock to the heart of a person in cardiac arrest.

Assessment of First Aid

The Headteacher is responsible for ensuring that an assessment of first aid needs is carried out for their school. Appendix 1 provides an assessment template. Adequate levels of first aid provision must always be available while people are on the school premises and off the premises on school visits.

The assessment should consider the following points:

- The number of staff, pupils on site and visitors to the school
- Past accident history, check the school's first aid and accident records
- Ages of the children including The Early Years Foundation Stage requirements
- Specific needs: the school's age range, staff or pupils with disabilities or special health needs
- The size of the school and whether it is on split sites and/or levels
- The location of the school, in particular its remoteness from emergency services
- Specific hazards or risks on site such as hazardous or dangerous substances highlighted in risk assessments
- Out of hours activities

When deciding on numbers of first aid personnel, other factors to consider include:

- Adequate provision for practical departments e.g. Science and Design and Technology
- First aid provision for school trips ensuring that the first aid cover back at the school remains adequate
- Cover for lunchtimes and breaks; it is good practice to encourage lunchtime supervisors to have first aid training
- Cover for absences

The law does not specify fixed levels of first aid personnel; the exact number or type of first aid personnel to have will depend on individual circumstances and should be based on an assessment of first aid needs. The HSE has provided guidance for workplaces to assist employers in determining their requirements – Appendix 3.

Schools must base their first aid provision on the results of their assessment of needs, appendix 1 provides an assessment template. To ensure that the first aid provision is adequate and remains so, the assessment of first aid needs should be reviewed at least annually or after a significant change in operation or premises.

First Aid Training

The findings of the first aid needs assessment should be used to ensure the type of training course chosen is appropriate for the circumstances and needs of the workplace.

First Aiders - First Aid at Work (FAW) - FAW training enables a first aider to give emergency first aid to someone who is injured or becomes ill while at work and equips the first aider to apply first aid to a range of specific injuries and illness. The duration of a FAW course is three days initially, with a two-day requalification course to be completed within three years for the qualification to remain valid. FAW certificates are valid for three years.

First Aiders - Emergency First Aid at Work (EFAW): EFAW training enables a first aider to give emergency first aid to someone who is injured or becomes ill while at work. Typically a one day course, the certificate is valid for 3 years.

Refresher training for first aiders: To help keep their basic skills up to date, the HSE strongly recommends that first aiders undertake annual refresher training. Typically a half day course, training organisations that run FAW and EFAW courses often offer annual refresher courses.

Appointed person: There are no legal requirements for Appointed Persons to have any approved training, however, in order to carry out their responsibilities effectively Surrey County Council requires that schools provide Appointed Persons with suitable training. The duration of Appointed Person training is usually one day and training should be refreshed every three years.

It is usually more beneficial to train staff members to the Emergency First Aid at Work.

An appointed person scenario may be appropriate for a small workplace with less than 25 employees where there are no volunteers who wish to take on a first aider role.

An Appointed Person takes care of first aid arrangements only and should not administer first aid unless they have been trained.

An Appointed Person cannot act as cover for absent First Aiders if the assessment of first aid provision has indicated that a First Aider is needed; they can only cover when the absence of the First Aider is due to 'exceptional, unforeseen and temporary' circumstances.

Early Years Foundation Stage (EYFS)

Schools and other settings with young children i.e. children from birth to the end of the academic year in which a child has their fifth birthday are required to have at least one person on site trained in paediatric first aid.

The EYFS requirements for first aid are in addition to existing first aid requirements. Schools must already have in place first aid at work provision that meets the requirements of employees and pupils; where pupils fall within the EYFS framework the provision must also meet the requirements laid out in the [EYFS guidance](#).

This requires:

- Certification in paediatric first aid with a minimum of 12 hours duration
- Certificate to be renewed every 3 years
- That at least one paediatric first aider is on site
- Where trips / offsite activities are undertaken and these activities involve any child covered by the EYFS framework then at least one paediatric first aider must accompany the children

First Aid Records

Schools must keep a record of the first aid treatment administered by First Aiders; this information can be useful for identifying accident trends and for reviewing the level of first aid cover. For minor injuries such as a graze, this can be recorded locally in an accident book. For moderate and serious injuries, these should be recorded on Surrey County Council's accident reporting system [OSHENS](#). Appendix 2 sets out the incident flowchart for schools and information on Reportable Injuries, Diseases and Dangerous Occurrences Regulation 2013.

First Aid Kits

The level of first aid equipment and facilities required will be identified in the first aid assessment. The minimum level of first aid equipment is a suitably stocked first aid box. The quantity required for larger premises should relate to the number of staff and others on the premises; the layout of the site and areas of greater risk.

First aid boxes should be clearly identifiable with a white cross on a green background, easily accessible and locations clearly signed. First aid boxes must be kept fully stocked at all times. Arrangements should be in place for checking and restocking first aid containers on a regular basis with nominated first aid personnel given the responsibility for the task. Any items in the first aid box that have passed their expiry date should be disposed of safely.

Tablets and medication should never be kept in the first aid box.

A suggested list based on HSE guidelines for the minimum contents of a first aid box for a low risk environment of contents for first aid boxes and travelling first aid kits is available in Appendix 4 to this document.

First Aid Room

The room should have washable surfaces, adequate heating, ventilation and be kept clean and tidy. A typical first aid room should contain the following as a minimum:

- A sink with hot and cold running water

- Drinking water and disposable cups
- Soap and paper towels
- A store for first aid materials
- Foot-operated refuse containers, lined with disposable yellow clinical waste bags or a container for the safe disposal of clinical waste
- A couch with waterproof protection, clean pillows and blankets
- A chair.

Where possible, the first aid room should be reserved specifically for providing first aid and a designated person should be given responsibility for the room. The room should be easily accessible to stretchers and be clearly signposted and identified.

Automated External Defibrillator (AED)

An Automated External Defibrillator (AED) is a portable electronic device that automatically diagnoses and treats life threatening cardiac arrhythmias through the application of electrical therapy, allowing the heart to re-establish an effective rhythm.

There is no legal requirement in this country to have an AED in public buildings or workplaces; however, where deemed appropriate and beneficial as the result of a site specific first aid needs assessment. See useful links for further guidance.

COVID-19

<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>

Where possible, all contact with members of the public should be carried out while maintaining a distance of at least 2 metres. Where this is not possible, the principles of the hierarchy of control should be applied, using measures such as physical barriers and alternative working practices and, as a final measure, the use of personal protective equipment (PPE).

Where it is not possible to maintain a 2 metre or more distance away from an individual, disposable gloves and a disposable plastic apron are recommended. Disposable gloves should be worn if physical contact is likely to be made with potentially contaminated areas or items. The use of a fluid repellent surgical face mask is recommended and additional use of disposable eye protection (such as face visor or goggles) should be risk assessed when there is an anticipated risk of contamination with splashes, droplets of blood or body fluids.

The first aider is to clean their hands thoroughly with soap and water or alcohol sanitiser before putting on and after taking off PPE. In all circumstances where some form of PPE is used, the safe removal of the PPE is a critical consideration to avoid self-contamination. [Guidance on putting on and taking off PPE is available](#). Use and dispose of all PPE according to the instructions and training.

CPR

If required to perform cardiopulmonary resuscitation (CPR), a dynamic risk assessment should be conducted and adopt appropriate precautions for infection control.

In adults, it is recommended that you do not perform rescue breaths or 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 after non-asphyxial arrest (cardiac arrest not due to lack of oxygen).

Cardiac arrest in children is more likely to be caused by a respiratory problem (asphyxial arrest), therefore chest compressions alone are unlikely to be effective.

If a decision is made to perform mouth-to-mouth ventilation in asphyxial arrest, use a resuscitation face shield where available.

Should you have given mouth-to-mouth ventilation there are no additional actions to be taken other than to monitor yourself for symptoms of possible COVID-19 over the following 14 days.

Useful Links

Early Years Foundation Stage Framework: <https://www.gov.uk/government/publications/early-years-foundation-stage-framework--2>

Department for Education and Employment First Aid in Schools: <https://www.gov.uk/government/publications/first-aid-in-schools>

OSHENS: <https://surreycc.oshens.com/Login/Default.aspx>

Department for Education AEDs in School: <https://www.gov.uk/government/publications/automated-external-defibrillators-aeds-in-schools>

HSE First Aid: <https://www.hse.gov.uk/firstaid/>

Covid 19: Guidance for First Responders: <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>

Appendices

Appendix 1: First Aid Assessment

Site	Assessed by	Date of assessment		
Subject	Site First Aid Assessment			
Describe the hazard	First Aid Provision impact	Describe the controls in place at present to provide First Aid provision	Areas needing more First Aid provision	Controls ok? yes/no
Person appointed to take total charge of FA arrangements. Local arrangements will apply on sites	This person will need to hold the records of training, arrange supplies of equipment on request etc			
Suitably stocked numbers of FA boxes	Bear in mind the type of injuries to be treated, review previous injury history to ensure relevant issues considered			
Are there suitable and sufficient first aiders or emergency first aiders to cover the area? (see appendix 3 for employee information, DFE guidance for schools and Early Year Setting DFE Guidance)	Take into account holiday, cover for sickness, lunch and break times.			
Information to employees on first-aid arrangements	<ul style="list-style-type: none"> • How to access • Who local first-aider is • What to do in an emergency 			
What are the risks of injury and ill health arising from the work as identified in risk assessment?	If the risks are significant more FA's may be needed			
Are there any employees or students with specific medical conditions or allergies?	<ul style="list-style-type: none"> • Additional first aiders • Additional training needs 			

Are there any specific risks, e.g. <ul style="list-style-type: none"> • Hazardous substances • Dangerous tools • Dangerous machinery • Confined spaces or heights • Activities 	Consider: <ul style="list-style-type: none"> • Specific training for FA's • Extra FA equipment • Precise siting of FA equipment • Informing emergency services • FA room 			
Are locations where different levels of risk can be identified?	May need to make different levels of provision in high risk areas			
What type of accidents and ill health have you had in the past? What type and where?	May need to: <ul style="list-style-type: none"> • Locate provision in certain areas • Review contents of FA boxes 			
Are the premises spread out or multi-floor	Consider provision in each building or on several floors			
Is there shift work or out of hours working?	Remember FA provision required at all times people are at work			
How far away is the local hospital?	Do you need to: <ul style="list-style-type: none"> • Inform local medical services of hazardous work/substances • Consider special arrangements in event of mishap 			
Do employees have to travel on business or work alone?	<ul style="list-style-type: none"> • Issue personal FA kits and training staff on use • Issue instructions on what to do in an emergency 			
Do any of your employees work at sites occupied by other employers?	Make arrangements with the site occupiers			
Do you have any work experience trainees?	Remember FA provision must cover them			
Do members of the public visit your premises?	The HSE recommends that the public and visitors are to be covered by FA provision			

	Make special arrangements to communicate first-aid information especially where English is not the first language.			
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The reporting and reviewing of incidents to SCC through OSHENS is mandatory for community and voluntary controlled schools

- **Adult (18yrs plus) accident records need to be kept for at least three years**
- **Pupil accident records need to be kept for three years from their 18th birthday.**

For further assistance contact srm.hands@surreycc.gov.uk or call Strategic Risk Management on 020 8541 9617 or 7569

What should I report on OSHENS?

- Accidents that cause injury, ill health or damage to anyone in school
- Dangerous occurrences and near misses that could have resulted in a significant injury
- Incidents of severe abuse, threats to staff and physical assault

* **Moderate injuries** involving pupils are those where significant first aid is provided; so sprains, strains, head bumps***, fractures, serious cuts

* **Moderate injuries** involving employees are any (apart from minor injuries) that require first aid

** **Verbal abuse** – employees should report incidents of verbal abuse where it has a significant impact on them and where they feel threatened.

*** Head injury in children and young people – advice for parents and carers leaflet

Healthy Surrey - Take head injuries seriously



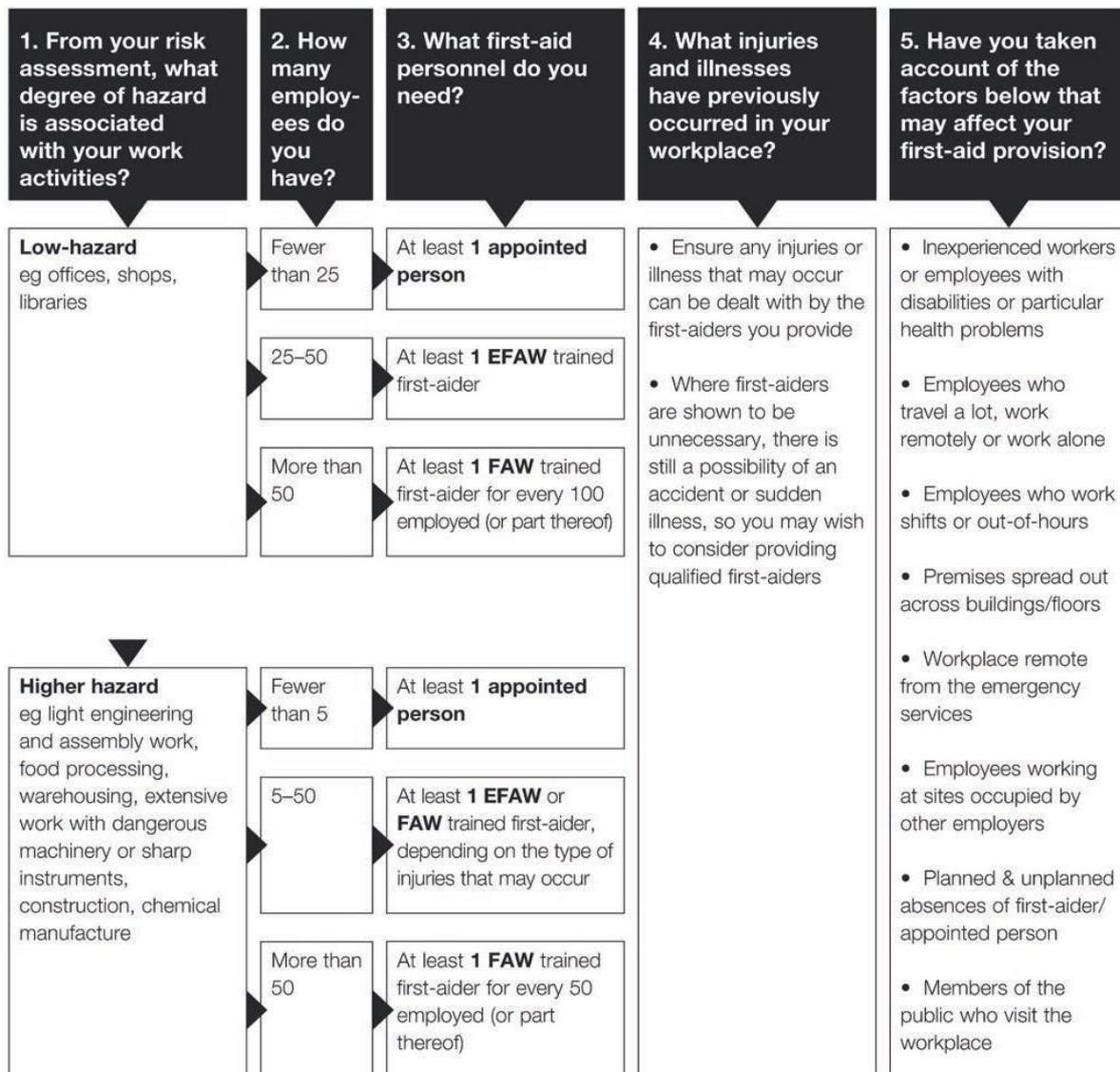
Head injury
leaflet.pdf

RIDDOR - Reporting of Injuries, Diseases and Dangerous Occurrences Regulations

Appendix 3: HSE Minimum requirement of first aiders and first aid kit

It is not possible to give hard and fast rules about the numbers of First Aiders required in each site or situation. This will depend on the circumstances and situation of the workplace and the hazards and risks present.

However, the Health and Safety Executive has given some general guidelines (below) to be followed bearing in mind the assessment to be used in Appendix 1. It should be noted that the minimum requirement is for an emergency first aider to be present when there are workers on site.



HSE suggested numbers of first-aid personnel to be available at all times people are at work.

Please refer to the Department for Education guidance for Schools and Early Year Settings.

Appendix 4: Minimum contents of a first aid container

Workplace container

- A leaflet giving general guidance on first aid.
- Twenty, individually wrapped, sterile plasters.
- Two sterile eye pads.
- Four individually wrapped triangular bandages, preferably sterile.
- Six safety pins.
- Two large individually wrapped, non-medicated, wound dressings.
- Six, medium sized individually wrapped, non-medicated wound dressings.
- A pair of disposable gloves.

This is only a suggested list for a low risk office based environment.

Travelling first aid kit

- A leaflet giving general guidance on first aid.
- Six, individually wrapped, sterile plasters.
- Two triangular bandages.
- Two safety pins.
- One, large sterile non-medicated, dressing.
- Individually wrapped, moist cleansing wipes.
- A pair of disposable gloves.