



THLCIC First Aid Policy

Purpose of the policy

The School recognises its responsibility to provide first-aid and will ensure that staff, pupils and any visitors while on site, have access to adequate facilities and materials at all times during the working day.

Legislation

The Health and Safety at Work etc. Act 1974 imposes a general duty on employers to ensure, so far as is reasonably practicable, the health, safety and welfare of all their employees. This extends to the provision of appropriate first-aid facilities.

The Health and Safety First-aid Regulations 1981 set out the basic requirements for the provision at work of first-aid equipment, facilities and appropriately qualified personnel. These requirements have been further expanded and updated by the production of the First-Aid Approved Code of Practice and Guidance 1997 (ACOP).

The School also receives guidance from its Health and Safety advisers, namely Arinite Ltd.

General Guidance

HMSO publish '*Guidance on First-aid in Schools*' which gives the legislation which should be followed. The regulations require employers to make an assessment of their first-aid needs within the workplace that is appropriate to their circumstances. The level of provision of first-aid facilities is based on risk assessment and the number of personnel on site. If staff consider that the first-aid provision is not adequate they should immediately make representation to Helen Webb, Director and Health & Safety Officer (HSO).

The recommendations are that there should be a minimum ratio of 1:100 fully qualified first-aiders to people in school (i.e. staff and pupils). THLCIC has no more than 25 staff and students onsite at any one time, but two qualified first-aiders will be named.

At school functions there should be a minimum of one qualified person, two for a larger event, with Emergency Aid persons making up the numbers at large events.

On day trips it is recommended that one of the two qualified First Aiders be present, but it is not essential.

On residential trips there should always be at least one Emergency Aid member of staff.

First-Aiders

The School identifies the need for trained first-aiders in sufficient numbers and at suitable locations to enable first-aid to be administered without delay.

A first-aider must hold a **current** Certificate of Competence in First-Aid at Work. Prior to expiry a 2-day refresher course and examination is required for renewal of the certificate's validity.

Account is taken of the person's normal duties because a first-aider must be able to leave to go to an emergency immediately. It is the School's policy to ensure an adequate number of non-teaching staff are trained first-aiders.

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Whilst first-aiders carry out their duties voluntarily, they do so in the course of their employment. This is important in the event of a third party claim arising from first-aid treatment. The School can give written confirmation that it fully indemnifies the staff against claims for negligence arising from the administration of first-aid to pupils or third parties, provided that the members of staff are acting within the scope of their employment at the time, hold a current approved first-aid qualification, and are following the School's guidelines in relation to the administration of first-aid.

The directors are responsible for externally facilitated first-aid training, where appropriate. Both Directors are certified first-aiders.

First-aid Code of Practice

In the first instance an injury will be assessed as to how serious it is. This does not have to be done by a first-aider. If the injury is as a result of a fall from height, a knock to the head, a wound which bleeds or an abnormal swelling, then a first-aider should be called. If in any doubt, call a first-aider. The majority of incidents involving students are merely grazes and minor bumps requiring only time for the child to get over the shock. In these cases no formal record taking is necessary. If a first-aider is summoned and attends to a student then a record must be made.

Communication

The official first-aiders are Helen Webb and Naomi Long Srirotriam. There are signs stating this, with first aid kits, in the:

- kitchen area
- reception area

If a first-aider is required, contact one of the directors who will go to the appropriate location. The emergency services can be contacted by ringing 999.

If a student requires hospital attention, parents/carers should be contacted as soon as possible and either asked to meet their child at the hospital, or where preferred, pick their child up and take them to hospital. If the student needs to travel by ambulance, the student should be accompanied by one of the staff members, where possible, a director. The member of staff will wait at the hospital until the student's parent/carer(s) arrive. In the event that a staff member is asked to accompany a student it may be appropriate for a taxi back to school to be provided.

First-aid boxes

First-aid boxes are to be found in strategic places around the School, namely the Kitchen and Reception area. Back-up supplies of first-aid equipment are to be obtained from the Health & Safety Officer.

It is important to keep the first-aid boxes fully stocked. If an item is used it should be replaced immediately from a store by the first-aider. In addition, the HSO will ensure that each box is checked termly. If first-aiders also find that supplies are running low it is their responsibility to replace missing items.

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Travelling first-aid kits

There are first-aid kits available to take to outdoor activity/events. Any first-aid items used should be replaced immediately on return from the trip. Any medicines should be checked before departure and replaced or replenished as necessary.

Attention should be paid not just to the actual contents but also as to whether items are still within date.

First-aid room

The first-aid room is the same location as the sick room.

Access to the first-aid room is available at all times when staff or pupils are on the premises. It has easy access to toilets and the entrance is wide enough for wheelchair and stretcher access.

Sick children would need to be moved out of the room before first-aid is administered. Access to the key is via the directors enabling them to monitor use of the first-aid/sick room.

A male first-aider should never be alone with a girl in the first-aid room. He should ensure that there is always a female member of staff present.

Records

After administering first-aid, the first-aider should ensure that the first-aid treatment log sheet is completed and the various copies distributed. The top (white) copy is sent to the parent, the second (pink) copy goes to the pupil file and the third (blue) copy should be placed in the appropriate box file in the directors' office. The Assistant Bursar will review the forms; matters of concern are addressed immediately and a full accident report is prepared for the Health and Safety Committee.

After administering first-aid, the first-aider should ensure that the accident book is completed.

First-aid inspection

A review of staffing, procedures and First Aid kits is undertaken at least once a year by the HSO.

THE ADMINISTRATION OF MEDICINES BY STAFF

1. The general principle at all times is **NOT** to dispense medication where at all possible.
2. However, in practical terms, students may need to bring medication into school and should do so with a covering note signed by a parent/guardian with any details of dosage clearly stated. This should be left in the directors' office. If they are going on a school trip for the day, the same procedure should be adopted, with the medication being given to the group leader.
3. This means that in normal school time no other medication, apart from that mentioned, should be dispensed. **ON NO OCCASION** should a member of staff be giving out their own paracetamol, for example, to a student or asking another member of staff to do so.
4. With regard to residential trips, the same general principles apply, i.e. if anyone is usually travel sick or is likely to suffer from migraine, then they should bring any medication with

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them and label it. If there is any doubt about the well-being of a student, then medical advice should be sought.

It will then be the decision of the group leader as to whether he or she wishes to take charge of the administration of any prescribed medication or whether he/she defers that to another member of staff eg a first aider who is willing to take that responsibility.

Likewise that person may also wish to take the role of being in charge of general first aid kit with medicines such as paracetamol for use where a student has a signed permission form.

It is best practice for only one person to be in charge of this and records should be kept.

1. Staff must make sure they are aware of any pupils in their teaching groups with anaphylaxis or diabetes.
2. Jext pens (formerly Epi-pens) - the following are recommendations:
 - the child should be carrying an Jext pen and, dependant on age, should be able to self-administer. There should be written notes from parents as to guidelines;
 - other children in class/group should be made aware of the condition;
 - copies of guidelines should be issued to all staff;
 - for some students, a spare Jext pen may be held in reception.

GUIDANCE NOTES FOR ALL STAFF

1. Anaphylaxis (Anaphylactic Shock) - severe allergic reaction

Names of Trained Staff

Helen Webb

Symptoms:

- Apprehension
- Sweating
- Feeling of Faintness
- There may be a burning sensation around the mouth
- A sensation of lump in the throat which may progress to hoarseness indicating swelling of vocal cords. Airways may be obstructed
- Headache
- Dizziness

Immediate Treatment is required

- Stay calm - get help - contact a trained member of staff
- Place child on floor in sitting position to help relieve any breathing difficulties
- Call an ambulance
- Requires Adrenalin Injection (to be administered by a trained member of staff)

Storage, administration and disposal of Adrenalin

- Parents to ensure supplies are maintained
- Store in a place known to all staff
- Dosage as specified by GP
- Dispose of syringe in jar or sealed container. Nurse or other designated (ie First Aider) will collect
- Record date, time and action taken

2. Hypoglycaemia - relevant to pupils with Diabetes

Hypoglycaemia occurs suddenly when the blood glucose levels fall below 4mmol.

Common signs and symptoms are:

- Pale or ashen skin
- Dizziness
- Confusion
- Feeling weak
- Feeling hungry
- Sweaty
- Shaky/trembling
- Nausea

This can occur because of the following:

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- Too much insulin
- Not enough food to fuel an activity
- Cold weather/hot weather
- Missed meals or snacks
- A missed or delayed meal/snack
- Vomiting

What to do if hypoglycaemia occurs:

Pupil may be able to self-administer. If not, immediately give the pupil something sugary eg Glucose tablets x 3, Lucozade, fresh fruit juice, or sugary pop (about 100 ml).

Follow this with some starchy food to prevent the blood glucose from dropping again eg sandwich or cereal bar, or fruit, or two biscuits, eg garibaldi, ginger nuts

If still hypo after 15 minutes, give some more sugary food.

Hypo stop can be massaged into the pupil's cheek if they are too drowsy to take anything themselves (check if this is kept in school for the relevant pupil).

If the pupil is unconscious, do not give her anything to eat or drink and CALL (9)999 for an ambulance. Also contact parents/carers on contact numbers immediately.

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PROCEDURE FOR CALLING AN AMBULANCE

Contact one of the directors, or send a member of staff or a student to do so. Director decides if emergency services should be called and, if so will make the call. **Directors:**

- Ring for ambulance if first-aider has not done so;
- Send message back to first-aider that ambulance is on its way;
- Ask member of staff to wait by entrance to guide ambulance;
- Inform parents;
- Inform other director, where possible.

Arrange for appropriate staff member to accompany the student to hospital and wait until parents arrive. Staff member may take a taxi back to School, where appropriate.

If an ambulance is not required, parents, where appropriate may take the student to hospital, or Helen Webb may do so. On arrival at hospital, the first-aider is no longer required and may return to School by car, taxi or public transport where appropriate.

At all stages there must be no delay.

LOCATION OF FIRST-AID KITS

- Reception
- Kitchen

This policy was last reviewed in January 2014 and will be reviewed every three years or as changes in legislation dictate.

Signed
Helen Webb
Director

Signed
Naomi Long-Srikrotriam
Director

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