



FIRST-AID Policy and Guidance

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At a Glance Action

- Assess the level of equipment and personnel required
- Ensure all staff are familiar with location of equipment and identity of First Aiders
- Keep records of all first aid trained personnel
- Ensure first-aid kits are regularly checked, replenished and clearly identified

GUIDANCE AND PROCEDURES

INTRODUCTION

This guidance and procedures document sets down the standards for the provision of first-aid to staff at our school. It is intended to meet the requirements of current legislation and act as a source of guidance on first-aid provision and arrangements.

Over and above the general duty of care owed by the Authority to staff under the Health and Safety at Work etc. Act 1974, the provision of first-aid is specifically legislated for by the Health and Safety (First-Aid) Regulations 1981.

The aim of the Regulations is to ensure that employers provide adequate equipment, facilities and personnel to render first-aid to employees if they are injured or become ill at work.

WHAT IS FIRST-AID?

First-aid can be defined as follows:

- The treatment given for the purposes of preserving life and minimising the consequences of injury and illness until professional help is available, **and**
- The treatment of minor injuries which otherwise would not receive treatment or do not need further treatment from a medical practitioner.

First-aid does not include the giving of tablets and/or medicines to treat illness. (Guidance on this subject is available in Section 11 of the Schools Health and Safety Manual).

REGULATIONS

The Health and Safety (First-Aid) Regulations 1981 and their Approved Code of Practice are attempting to ensure that all workplaces have facilities to give first aid to casualties, in relation to the assessed risk.

The Regulations do not apply directly to non-employees although the Approved Code of Practice places emphasis on the need, when assessing the overall risk, to take account of all persons who have access to the premises.

The Education sector is unusual in that non-employees normally far outnumber employees. Because of this and the common law Duty of Care owed to pupils and young persons, such persons should be considered and accounted for in any first-aid provision.

RESPONSIBILITIES

It will be the responsibility of the Strategic Director – Communities, Skills and Learning to ensure that the Health and Safety (First-Aid) Regulations 1981 are adhered to within schools.

Headteachers will be responsible for ensuring the following:

- An assessment of first-aid needs appropriate to the circumstances of their workplace is carried out with reference to the guidance contained in this document
- Adequate first-aid equipment and facilities are available throughout the premises
- The appointment, where deemed to be necessary, of First-Aiders and/or Appointed Persons
- Keeping adequate records of all persons trained in first-aid within their premises and ensuring arrangements are made to refresh training as required
- All staff and others within their premises are made aware of first-aid arrangements and the location of equipment and personnel

First-Aiders or Appointed Persons will have the following responsibilities:

- To take charge in situations where personal injury or illness has occurred and where further medical help is needed by acting in accordance with their first aid training
- To ensure accidents and/or injuries to which they attend are recorded in accordance with the relevant procedures
- To ensure that first aid boxes are adequately stocked, and replenished **with approved items only**, in accordance with Annexe 1.

First Aid at Ysgol Golwg Pen y Fan

All staff are responsible for dealing with minor incidents requiring First Aid. During lesson time, First Aid is administered by the class teacher or LSA. Each campus has a designated lead first aider and staff trained in first aid.

Break and lunchtime

Each campus has a green first aid box that is taken outside at every breaktime. Each box contains up to date first aid equipment, record book, pen. There should also be a small lunchbox with ice packs.

If an accident occurs in the playground and first aid is required, then one of the staff on duty can administer first aid in the playground

Should the staff member need a second opinion then they can ask a trained first aid member of staff and request the assistance of the SLT/teacher or LSA as appropriate.

If there is any concern about what First Aid should be administered then the qualified First Aiders must be consulted.

Brecon Hospital is located near to the school and is open the same hours as the school. Staff at the hospital are always on duty and on hand should an incident occur at the school. Parents must be notified if a child needs to be taken to the hospital.

Brecon Hospital Phone Number: 01874 622443
Address: Cerrigochion Rd, Brecon LD3 7NS

First Aid Boxes

There is one main first aid box kept in the main office at each campus.
Travel first aid kits are also available.

Pupils who feel unwell

The following procedure has been adopted by all teaching staff in order to maximise the service provided to our pupils.

If a teacher feels that a pupil is not well enough to continue working in school:

The child's parent/guardian should be contacted

If pupils become ill at break or lunch times they should report to the staff on duty.

Recording Accidents

All accidents must be recorded including any treatment given in the record book. Please complete all sections.

A copy will be kept in the book and the white copy is to be given to the class teacher, to ensure they are aware and can then pass onto the parent at home time or placed in book bag/bag.

Serious incidents

If a more serious incident occurs for example:

- a. Head injuries or significant wounds;
- b. Suspected fractures
- c. A pupil unconsciousness even for a few seconds

All head injuries of any kind will be reported to parents/carers immediately. A bump to the head can be treated with the blue flexi type of ice packs covered with a paper towel or similar. The first aider is to stay with the patient for 20 minutes. If this occurs where you need to return to class etc then you must take the patient if possible, to their class and hand over to a first aider or to another first aider in the building. They are to continue what is left of the 20 mins.

Parents/carers will be contacted, inform them of the situation and assess the feasibility of the parent taking the pupil to hospital if required. When it is not reasonably feasible

for parents to take the pupil to hospital, the pupil will be taken to casualty by a member of staff who will remain with the pupil until the parent(s) arrive. Parents should be:

- a. Given the name of the hospital to which their son/daughter has been taken.
- b. Asked to attend the hospital as a matter of urgency

If deemed appropriate an ambulance will be called. Whilst the ambulance travels to the school a note should be made of 'contact names and telephone numbers' and this note should be given to the ambulance crew on their arrival at the school. We would continue to try and contact parents. A member of staff would always accompany the pupil in the ambulance.

Any accident that occurred because of the condition of the premises, occurred during a classroom activity, or required more than first aid treatment, will be reported to the County Council on the Incident Report form.

Sports and Exercise

Staff should be aware of those pupils who may become wheezy during exercise and who may need to use their inhaler before taking part. Breathlessness during an activity should result in the pupil withdrawing from the activity for that lesson. For more information, please refer to each child's medicine needs.

Animals

Staff need to be aware that some animals can cause a sudden and severe reaction. Pupils who react in this way, should not approach, handle or care for the animals.

Long-Term Medical Problems

Parents of children suffering from conditions which might require emergency treatment at any time, will ensure that an individual such as asthma, anaphylaxis, epilepsy or diabetes MUST inform the school. It is the parent's responsibility to ensure that any medication kept at school such as EpiPens are within their expiry date.

Pupils with a care plan for asthma should be asked for a list of potential triggers as this can help the pupil from a preventative outlook. Asthma inhalers should be kept in their boxes wherever possible with the prescription details. These should be sent home every half term and end of term to have their dates checked and to make sure they are in working order.

SO HOW DO I ASSESS THE RISK?

The provision of first-aid in a workplace needs to be adequate and appropriate in the circumstances. No fixed levels exist in law. Historically first-aid levels were set depending on the number of employees, this is now seen as being too narrow an assessment and must be opened up to include consideration of the following:

- The number of staff and other persons
- The nature of the hazards likely to be encountered
- The geographical layout of the premises

- Accessibility to external assistance, i.e. local Health Centre, GP, Hospital, etc.

The general risk assessment of the premises carried out in accordance with Section 3 of this Health and Safety Manual will assist in determining the level of risk throughout the premises. The individual Codes of Practice for curricular activities will also indicate the need for first-aid equipment.

In addition to the above the following notes concerning first-aid equipment, facilities and training, will give an indication as to recommended minimum levels and particular areas of concern which should be equipped with first-aid equipment.

The assessment of need should be reviewed from time to time particularly after any operating changes, to ensure that the provision remains appropriate.

There is also guidance on the level of cover in Annexe 2 of this guidance.

FIRST-AID EQUIPMENT AND FACILITIES

The assessment of need should determine the level of equipment and facilities required by each premises. The following paragraphs give details of the type of equipment and facilities available and contains certain minimum standards which must be met.

First-Aid Kits

Every campus at our school in which activities take place must have a first-aid kit as a minimum requirement. The kit must be kept fully stocked at all times (see Annexe 1).

First-aid kits should be clearly identifiable with a white cross on a green background, readily accessible and their locations made known by clear signing to employees and other persons who regularly attend the premises. Kits should be placed conveniently, and in easy reach.



Our main first-aid kit is in a central admin office.

A travelling first-aid kit must be kept in minibuses or other such vehicles and is available for off site visits.

Where activities are carried out in a location other than the main base, a suitable first-aid kit will be supplied.

Kits should contain a sufficient quantity of first-aid materials, possibly recommended items of supplementary equipment **AND NOTHING ELSE**. The use of antiseptics is not necessary for the treatment of wounds.

For information on the use of plasters please see page 9.

No medication of any kind for example, aspirin, paracetamol, antiseptic creams, burn sprays, etc., should be kept in first-aid kits nor used as a form of first-aid. The reasoning behind this is as follows:

- In the case of tablets you may not know if any medication has previously been taken, or if it has, what dosage and when, this being the case “your prescription” may adversely affect any further treatment or surgery that may later be required
- If the wrong cream were used for the wrong injury, or used inappropriately, for burns or an open wound, there may be serious scarring and long-term discomfort for the casualty. There may also be the chance of an adverse allergic reaction

First-Aid Kit Contents and Supplementary Equipment

Annexe 1 to this guidance document gives details on the correct contents of first-aid kits and of the types of supplementary equipment which may be used.

First-Aid Rooms

Educational establishments do not require a dedicated first-aid room unless there are normally more than 400 persons on the premises.

Where there are more than 400 persons on the premises then a first-aid room should be established.

In order that first-aid rooms can be effective they should:

- Be large enough to hold a couch, with enough space at each side for people to work, a desk, a chair and any necessary additional equipment
- Have washable surfaces and adequate heating, ventilation and lighting
- Be kept clean and tidy and accessible and available for use at all times when employees are at work
- Be positioned as near as possible to a point of access for transport to hospital
- Be clearly identified as ‘First-Aid Room’
- Display a notice on the door advising of the names and locations of First-Aiders.

A typical first-aid room should contain:

- A sink with hot and cold running water
- Drinking water and disposable cups
- Soap and paper towels
- A store for first-aid materials
- A foot operated refuse container lined with disposable yellow bag
- A couch with waterproof protection and clean pillows and blankets
- A chair.

If possible first-aid rooms should be exclusive for giving first-aid, if this is not possible and the room has to have dual purpose, then consideration should be given to the following:

- The activities usually carried out in the room can be stopped immediately in an emergency
- The furnishings and equipment can be moved easily and quickly to a position that will not interfere with giving first-aid.

All schools require accommodation for medical or dental examination, such facilities do not have to be dedicated to this purpose and can double up as first-aid rooms.

First-Aid Personnel and Training

There are two types of First-Aid qualification:

- First Aid at Work (FAW)
- Emergency First Aid at Work (EFAW)

A first aider is a person who has completed either a HSE registered three day first aid at work course (FAW) and attends refresher training, as required or has completed a HSE registered one day emergency first aid at work course (EFAW) and attends refresher training as required. As stated earlier the level of first aider skills, and number of first aiders required should be decided by completing the risk assessment process.

An appointed person is NOT A FIRST AIDER, but is a person who takes charge of the first aid facilities and calls the emergency services, they should not give first aid, if not trained to do so.

Levels of Trained Personnel

As an absolute minimum all educational establishments should have an EFAW person at all times when persons are at work. This must include cover for when they are unavailable through illness, leave etc.

The guidance attached in annexe 2, previously issued to schools, acts as a guide of the level of cover. However, when determining the number of trained personnel you should also take into consideration local and geographical features.

Records should be kept of all personnel who have received first-aid training including the dates of courses in order that refresher training can take place as appropriate.

INFORMATION AND COMMUNICATION

In order that first-aid equipment and personnel are available when required, it is essential that all staff and others, are aware of its existence and locations.

The location of first-aid kits should be marked by notices in prominent positions at each separate site. The identity of 'First-Aiders' should also be made known, this can also be done by displaying notices.

Information must be given to new and temporary employees as to the arrangements for first-aid at the earliest opportunity after they take up employment.

LEGAL AND INSURANCE IMPLICATIONS WHILST PERFORMING FIRST-AID

In any work that is carried out on behalf of the Council, in your own profession or as a 'First-Aider', you are covered by the Council's Insurance Scheme. This applies in the case of any injuries you may receive, including contracting a disease, or in the case of any mishap which may arise during or after treatment.

It is safe to say that in dealing with first-aid emergencies if you keep your head and follow the guidelines taught to you during your training you need not fear any legal consequences.

'First-Aiders' and other members of staff must be aware that if they are to transport casualties in their own vehicle they are covered under their own car insurance and not under the Council's scheme. They should therefore ensure that their existing motor policy covers them for business use.

CONTROL OF INFECTION

Many blood-borne micro-organisms have the capacity to infect a 'First-Aider' should blood from an already infected casualty enter an open wound or sore on the person of the 'First-Aider', for example, Hepatitis.

The HIV virus is not readily transmitted in this way, and only a small number of cases of cross infection are documented in health care circles, usually involving heavily infected patients in the latter stages of their condition.

However, the emergence of HIV/AIDS in recent years has served to concentrate attention on sensible and routine protective measures which should always be employed during the treatment of bleeding wounds, regardless of the health or otherwise of the casualty.

Due to the fact that it is impossible to be sure of who is, or is not, infected with these viruses the following precautions should be taken by 'First-Aiders':

- Treat all casualties as if they are carriers of a virus
- Always cover open wounds on your own hands with a waterproof adhesive dressing
- A pair of disposable plastic gloves should be worn when dealing with bleeding or when cleaning up body fluids or excreta
- All used gloves, waste dressings and other contaminated waste should be placed in a plastic bag for disposal
- Any blood splashes on the skin should be washed off with soap and water.
- The HIV virus has only occasionally been found in saliva, and in very small quantities when compared with blood. Therefore, the risk to the 'First-Aider' is thought to be extremely small and should not discourage a prompt response in a life-saving emergency. A protective resuscitation aid can be used where available and this may be kept in first-aid kits.
- If a cut or puncture wound by a needle is sustained, let the wound bleed, squeeze it gently but do not suck it. Wash the area in cold running water and apply a sterile dressing. Report the incident and seek medical advice immediately
- Never re-use disposable equipment or use to treat more than one casualty.

Further advice on blood borne viruses can be found in the Authorities Corporate Work Arrangement on Occupational Health – Infections and Diseases.

ALLERGIC REACTIONS TO PLASTERS

It is apparent that some employees who have attended first-aid training courses have developed the mistaken impression that plasters are banned. This has led to the belief that first-aiders should not use plasters when providing treatment to e.g. a child with a cut knee. This is not the case. Plasters (individually wrapped sterile adhesive dressings) are safe provided that they are not used on persons who may suffer an allergic reaction to certain types of plaster.

Before plasters are used, first-aiders should establish whether the person requiring treatment has any such allergy. If the person has such an allergy an alternative dressing, i.e. a non-allergic plaster or dressing, should be used. To assist in this a confirmation from parents/guardians should be sought detailing any allergies a child has before they begin school. This should be re-confirmed on an annual basis.

Persons who have no allergy to plasters can, of course, be treated with any kind of appropriate plaster (fabric or waterproof type) from the first-aid kit supply. Plaster on a continuous roll or strip should not be used because of the risk of cross infection.

FURTHER INFORMATION

Further information and advice on all aspects of first-aid in the workplace can be found in the following publications:

- Health and Safety (First-Aid) Regulations 1981. Approved Code of Practice and Guidance

CONTENTS OF FIRST-AID KITS

The contents of the kit should be replaced as soon as possible after use by the responsible 'First-Aider' or 'Appointed Person'. Kits should be clearly identified as first aid containers by being marked with a white cross on a green background.

Each kit should contain the following items with the minimum quantities indicated:

Guidance card	1
Individually wrapped sterile adhesive dressings (assorted sizes)	20
Sterile eye pads, with attachment	2
Triangular bandages	4
Safety pins	6
Medium sized sterile unmedicated dressings 12cm x 12cm	6
Large sterile unmedicated dressings 18cm x 18cm	2
Disposable gloves	1 Pair

TRAVELLING FIRST-AID KITS

The contents of travelling first-aid kits should be appropriate for the circumstances in which they are to be used. At least the following should be included:

A card giving general first aid guidance	1
Individually wrapped sterile adhesive dressings	6
Large sterile unmedicated dressing 18cm x 18cm	1
Medium sized sterile unmedicated dressings 12cm x 12cm	1
Triangular bandages	2
Safety pins	2
Individually wrapped moist wipes	1 Pack
Disposable gloves	1 Pair

STERILE WATER

Where mains tap water is not readily available for eye irrigation, sterile water or sterile normal saline (0.9%) in sealed disposable containers should be provided. Containers should not be re-used once the sterile seal is broken. At least 1 litre should be held in stock. **Eye baths/egg cups/re-fillable containers should not be used for eye irrigation**

Guidance on Level of Trained Personnel

Number of Persons Regularly On Site*	Emergency First Aid at Work	First Aid At Work
<25	1	-
25-75	2	-
75-200	2	1
200-400	3	2
400-500	4	3
>500	5	4

* Pupils, teachers and ancillary staff who are regularly at the premises - this does not include the occasional visitor