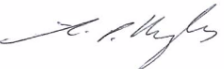




# FIRST AID POLICY

## To supplement the Health and Safety Policy

### Document Control

Description	By Whom	Date
Established	WM	Jan 17
Latest Review	JA / WM / AW WM	Sep 2020 Jan 2021
Approved by TLT		23/2/2021
Next Full Review due	Jan 2023	

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## Introduction.

This document describes the procedure adopted by **The Harmony Trust** for the provision of first aid within all academies. There is additional guidance for the management of first aid within the Covid-19 risk processes which can be found separately.

## Responsibilities

### The Principal / Head of Academy:

- Arrange for all new staff to complete a health and safety induction (usually with the Business / Office manager)
- Determine the required first aid provision within the academy
- Authorise payment for first aid material
- Make sure that appointed first aiders are trained and certification is up to date
- Designate a member of staff to take a lead on first aid. This is usually a first aider or the Office manager.

### **The Lead First aider:**

- Review the risk assessment for first aid
- Take appropriate corrective actions where required
- Make sure that appropriate signs are positioned detailing first aiders and location of the first aid boxes
- Review first aid treatment after the report of any incident

### **First Aiders:**

- Attend first aid training and refresher training when required
- Ensure the first aid kit is properly stocked and stored. The list of contents should be in the first aid box.
- Attend to incidents requiring first aid and make decisions based on their training and experience.
- Complete accident forms (minor accident forms or current AIRS forms as appropriate)

### **All school employees:**

- Familiarise themselves with the location of the first aid boxes
- Be aware of the emergency procedures
- Support first aiders or SLT in emergency situations

### **The Office manager / Business Manager**

- Arrange for first aid training, to ensure all first aider's certificates are in date, and there are no gaps in the academy.
- Provide details as required by emergency services as necessary

### **Competence**

The nominated first aiders will attend a certified first aid at work course followed by refresher courses as required. The type of course will depend on their role and the area of the academy they are based in.

### **First Aid Procedures**

First aid procedures will reflect current practice as directed during first aid training. Any changes to procedures will be shared with the lead first aider and disseminated to all members of staff.

- If immediate hospital treatment is required an ambulance will be called. The parents will be contacted and arrangements will be made to meet them at the hospital. A member of staff will accompany the child to the hospital but WILL NOT sign for any treatment to be carried out.
- If immediate treatment is not required, the parent is contacted as soon as possible and the child is made comfortable and reassured by a member of staff known to the child, who will stay with him/her. In this case it will be the parents' decision whether to go to hospital or not.
- A minor incident will be assessed by the designated first aider and the injury treated appropriately. The child will be settled back into the setting and observed.

### **First Aid procedures for a bumped head**

- If a child has a bumped head, a first aider will administer the necessary treatment, record the injury on the accident form and ensure a bumped head letter is given to the child to take home. A telephone call home should also be made to ensure parents are made aware. Please be aware of the need to keep medical information confidential so hand the bumped head note directly to the parent if possible.
- The first aider must let the class teacher know to ensure that careful observations of the child after the incident are carried out.
- For head injuries or any other injuries which leave a visible mark (or cause other concerns), a member of SLT will be informed, and a phone call made for parents to come and assess their child themselves if they wish to.

### **PPE**

- First aiders will be expected to wear gloves and any other PPE which is appropriate for the circumstances (including aprons, face masks, overalls, face-shields as required)

### **Accident and Emergency Procedure**

In the event of a major accident, appropriate medical help will be sought immediately by any responsible adult and a qualified first aider will take the lead in this process. The Senior Leadership Team (SLT) of the relevant school will also be instrumental in the decision making process but in terms of treatment for a sick or injured person, the decision of the trained first aider is final.

In non-life threatening situations which require medical attention, SLT will liaise with the first aider to make the decision as to whether the child needs to go to hospital or if they can wait

for the parent/carer to come to school. In case of any incident which requires examination by a medical professional, an AIRS form will be completed at the earliest opportunity and a copy sent to the Compliance team.

A decision to call 999 and seek emergency help should **NEVER** be delayed in order to seek out SLT. In obvious life-threatening situations, the first action is to call 999. A first aider and SLT must also be summoned immediately.

Where a decision is less obvious, a first aider should be called immediately (this should be a First Aid at work trained member of staff). A member of SLT should also be called. The decision of the First Aider will then be actioned.

## **Recording, Reporting and sharing information**

All first aid undertaken should be recorded. For pupils, if it is a minor injury, this should be recorded on the minor incidents form. For adults, and any pupil injuries of a more serious nature, this should be recorded on an AIRS form. Instructions as to which form to use, is on AIRS training notes and on the front of AIRS forms, copies of which can be found in each academy.

AIRS forms should be forwarded to the Trust compliance team and followed up with investigation by SLT. Completed investigation forms should also be forwarded to the Compliance team.

The minor accidents should be analysed by the admin teams and reported to the Compliance team every term. This is so that monitoring can occur and trends noted.

All minor accident forms, AIRS forms and accident analysis, should be uploaded to Safety2Business, the online portal containing all key Compliance documentation for the Harmony Trust.

## **Equality Impact Assessment**

Under the Equality Act 2010 we have a duty not to discriminate against people on the basis of their age, disability, gender, gender identity, pregnancy or maternity, race, religion or belief and sexual orientation. This policy has been equality impact assessed and we believe that it is in line with the Equality Act 2010 as it is fair, it does not prioritise or disadvantage any pupil and it helps to promote equality in our academies.

## **Data protection statement**

The procedures and practice created by this policy have been reviewed in the light of our Data Protection Policy.

All data will be handled in accordance with the Trust's Data Protection Policy.

Data Audit For This Policy					
What ?	Probable Content	Why ?	Who ?	Where ?	When ?
First aid policy	Name, address, medical issues, nature of injury and treatment	As needed for H&S reporting person	Principal / SLT, Trust central team, staff or other representative as required as part of the analysis process, medical teams	Kept on file at academy (and Trust central where appropriate) Kept on S2B online	Held as part of H&S retention procedures

As such, our assessment is that this policy :

Has Few / No Data Compliance Requirements	Has A Moderate Level of Data Compliance Requirements	Has a High Level Of Data Compliance Requirements
		✓

## Policy Monitoring and Review

The Policy will be monitored regularly by the Trust's Head of Safeguarding (or delegated to a competent member of staff). A review of the Policy shall be carried out by the Trust bi annually, and/or when there are changes in legislation, and/or when an incident occurs.

## Appendix 1 – Minor accident form



**THE HARMONY TRUST**  
BELIEVE • ACHIEVE • SUCCEED

### **Minor Accident/Incident Report**

*(for internal use only)*

*(to be completed by the office)*

**Ref no:**

Child's Full Name:	
Date:	Time:

#### **Place of accident/incident (please tick)**

KS1 Playground	<input type="checkbox"/>	KS2 Playground	<input type="checkbox"/>	Classroom	<input type="checkbox"/>
Pitch	<input type="checkbox"/>	Corridor	<input type="checkbox"/>	Hall	<input type="checkbox"/>
Early Years (indoor)	<input type="checkbox"/>	Early Years (Outdoor)	<input type="checkbox"/>	Other (where?)	<input type="checkbox"/>

#### **Accident/incident details including parts of the body which are injured:**

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Bump/Bruise	<input type="checkbox"/>	Vomiting/Nausea	<input type="checkbox"/>	Nosebleed	<input type="checkbox"/>
Headache	<input type="checkbox"/>	High Temperature	<input type="checkbox"/>	Head Injury	<input type="checkbox"/>
Cut/Graze	<input type="checkbox"/>	Asthma	<input type="checkbox"/>		<input type="checkbox"/>
If other please specify:					

#### **Cause of accident/incident:(tick which apply)**

Moving Around	<input type="checkbox"/>	Vehicle accident	<input type="checkbox"/>	Fall from height	<input type="checkbox"/>
Violent Incidents	<input type="checkbox"/>	Sports injury – school lesson	<input type="checkbox"/>	Slip, trip fall, (same level)	<input type="checkbox"/>
Contact with	<input type="checkbox"/>	Sports injury – non school lesson	<input type="checkbox"/>	Mechanical handling	<input type="checkbox"/>

Exposure to		Fire/explosion		Manual handling	
Equipment, tools...					
If other please specify:					

**Treatment Given (ice pack applied, cleaned, covered etc..)**


**Any other information (sent home, advised to see GP, hospitalised, phone call home):**

e.g. – equipment damaged, impact of weather,

<b>Incident Reported By:</b>		
<b>First Aider:</b>	<b>Signed</b>	<b>Name</b>



## Appendix 2 – AIRS form

Form No HS 0001 Page 1	<b>Accidents / incidents / Dangerous Occurrences Incident Report form</b>	
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This form is to be used by Harmony Trusts schools, where relevant, for the recording of accidents / incidents and near misses. The form is intended for prevention and statistical purposes, and to comply with reporting of Injuries Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR). A copy of sections 1 to 5 maybe given to any injured person if requested.

### Section 1

Name of Academy	Name of Person Completing Form
Academy Address -	Job Title
Telephone Number of Academy	First aider Yes/No

### Section 2

<b>INJURED PERSON Part a (STAFF)</b>				
Forename:		Surname:		DOB
Address		Employee:		Job Title
		Employee No:		Did he/she do any work after the incident/accident? Yes / No
If no, when did they finish work? Time:		Normal hours of work on day of incident/accident: From: To:		Was employee at time of incident/accident undertaking a recognised part of his/her duties? Yes / No
<b>INJURED PERSON Part b</b>				
Mark with a cross				
Non-Employee	Pupil	Volunteer	Contractor	Member of Public
Forename:		Surname:		DOB:
Address		Was the person taking part in any school organised activity? Yes / No		Was the contractor at time of incident/accident undertaking a recognised part of his/her contractual duties? Yes / No

Author: AJ Woodhouse  
Compliance Officer

Issue No 1

Date Issued:  
Review Date: August 2019

## Accidents / incidents / Dangerous Occurrences Incident Report form



### Section 3

**PLACE WHERE THE ACCIDENT / INCIDENT HAPPENED:** include address if occurred off site – please be specific

**DATE AND TIME OF ACCIDENT / INCIDENT:**

**DESCRIPTION OF ACCIDENT / INCIDENT:** Include any Additional Information: *(e.g. circumstances leading up to the accident /incident, or height fell, depth of pool water, etc. for verbal abuse please record language used):*

Author: AJ Woodhouse  
Compliance Officer

Issue No 1

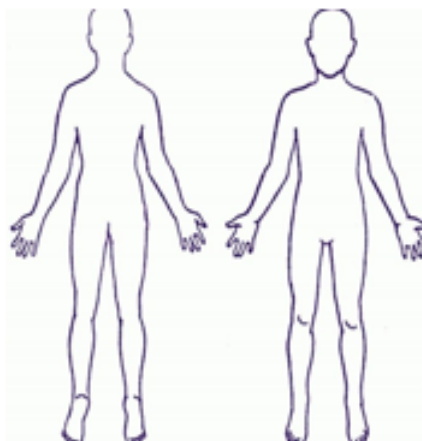
Date Issued:  
Review Date: August 2019

## Accidents / incidents / Dangerous Occurrences Incident Report form



### Section 4

Part of Body (indicate L or R where necessary):
Nature of Injury (eg fracture, sprain, cut, etc):
Treatment given:
First aid treatment given by:
Was the injured person taken to hospital from the scene of the accident/incident? Yes / No
If yes, which hospital or Emergency Treatment/Walk in Centre?
Were they detained? Yes / No If yes, how long?



<i>The next questions relate to Employees only...</i>	
Has the injured person visited their own Doctor as a result of the accident / incident? Yes / No	Has the injured person been unable to do their work for 7 or more days as a result of the accident/incident? Yes / No
Has the injured person needed any reasonable adjustments to enable to continue to come to work? Yes / No	Has the injured person been referred to Occupational Health? Yes / No

### Section 5

<b>ABUSE</b>	The account should detail as fully as possible what happened. Try and include the following: WHO was involved, WHERE did it happen, WHAT happened, WHEN did it happen, WHY did it happen. Include the precise text of any abusive language used.
Date of incident	Time of incident
Location of incident	Specific area
Details of incident:	

### Section 6

Author: AJ Woodhouse  
Compliance Officer

Issue No 1

Date Issued:  
Review Date: August 2019

## Accidents / incidents / Dangerous Occurrences Incident Report form



WITNESS TO ACCIDENT	
Name	Name
Address	Address

TO WHOM WAS ACCIDENT REPORTED	PERSON MAKING ACCIDENT REPORT:
Parent / Guardian: Yes / N/A	Name
Signature	Signature

Author: AJ Woodhouse  
Compliance Officer

Issue No 1

Date Issued:  
Review Date: August 2019