



### First Aid Policy (A7)

Scope:	Whole School (Including Boarding)
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#### Linked documents

This Policy should be read in conjunction with the following published documents

- Health and Safety Policy (A9)
- Medical Policy (Internal)

#### Definition

- First Aid The initial assistance given to a sick or injured person until full medical treatment is available.
- First Aider Those members of the school community who are in possession of an Emergency or First Aid at Work certificate or equivalent.

#### Acronyms

D&T	Design and Technology
CLEAPSS	Consortium of Local Education Authorities for the Provision of Science Services
iHasco	Name of an online training company used by the School
CPD	Continuing Professional Development
CoSHH	Control of Substances Hazardous to Health
EVC	Educational Visits Coordinator
EYFS	Early Years Foundation Stage
H&S	Health and Safety
RIDDOR	Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013
PPE	Personal Protective Equipment

#### Availability

This Policy is available to parents and prospective parents on the school website, and a printed copy may be requested from the school office / Pupil Services Team.

## Contents

Roles and Staff .....	3
Policy Statement.....	4
Policy Procedure.....	6
Responsibilities .....	8
Appendix A: The Legal Position .....	10
Appendix B: Whole School First Aid Risk Assessment.....	11
Appendix C: Medical Information .....	13
Appendix D: Whole School Arrangements .....	14
Appendix E: First Aid Boxes.....	17
Appendix F: First Aiders & First Aid Box Locations .....	19
Appendix G: Accident Reporting .....	20
Appendix I: Prep School Near-Miss or Minor Injury Record.....	21
Appendix J: Senior School Near-Miss or Minor Injury Record .....	22
Appendix K: Accident/ Incident Record .....	23
Appendix L: Head Injury Protocol.....	24
Appendix M: Sharps Disposal Protocol .....	27

# Roles and Staff

## Role Definition

**Staff** Every member of staff, whether paid or unpaid, including volunteers, agency or supply staff, Directors and Advisory Committee members.

## Current Personnel

**Mrs Hannah Ryan** – School Nurse (ext 381 / 7007)

**Mrs Wendy Smith** – Operations Team Leader (ext 7017)

**Ms Ana Brady** – Head of HR (ext 278)

**Mrs Gilly Staley** – H&S Advisor (ext 272)

**Mrs Claire Taylor** - Sports Physiotherapist (ext 290)

# Policy Statement

## Scope

This Policy applies to all departments of the Wisbech Grammar School Senior School (including Boarding), the Prep School and EYFS Department.

## Breadth

This Policy states the arrangements in place for providing first aid support across the campus, for pupils (including boarders) from EYFS up to Upper 6th form, to our and other staff and visitors to the school as necessary.

## Aim

The aim of this Policy is to ensure that:

- We are able to meet our responsibilities under the Health and Safety (First Aid) Regulations 1981 and under the requirements set down by the Department for Education,
- Appropriate first aid arrangements and information about those arrangements are in place for our pupils, Staff and any visitors to our premises,
- We have sufficient numbers and sufficiently trained employees to meet our needs across the School, ensuring that first aid assistance can be sought during working hours,
- We have sufficient numbers of trained Paediatric first aiders, who are required for pupils in the prep school,
- We maintain an adequate supply of first aid equipment.

## Administering First Aid

- The First Aider and injured pupil/staff member are to ensure that they have followed hand hygiene guidance before and after the episode.

For the purposes of the school environment, PPE will include:

- Gloves,
- Aprons,
- Face mask,
- Face shield (if there is a risk of splashing of bodily fluids).

**Please note that gloves and apron are single person use and must be changed before leaving the first aid situation and hand hygiene performed. They must be disposed of in a clinical waste bin.**

Please see hyperlink for donning and doffing of Personal Protective Equipment please access this via the hyperlink or on T-drive under medical folder. [T:\Medical Information\PPE Putting on and taking off.pdf](#)

**Guidance for First Aiders in giving Adult CPR and Paediatric (child CPR) during COVID-19** Pandemic. Taken from government guidance for first responders 2020.

**Adult CPR** – The Resuscitation Council UK guidelines recommend that the first aider looks for signs of life and absence of normal breathing. DO NOT put cheek or ear close to casualty's mouth and if in any doubt of confirming cardiac arrest, start chest compressions ONLY until help comes. Rescuers should place a cloth or towel over victim's mouth if there is perceived risk of infection and to continue compressions or use AED. If first aider has access to PPE face mask, disposable gloves and eye protection, these should be worn. After administering CPR first aiders should wash hands with soap and water and where this is not available to use hand gel. If there is a likelihood that the first aider may have been exposed to Covid it's recommended to monitor symptoms for 14 days.

**Paediatric CPR** – Paediatric arrest is unlikely to be caused by cardiac arrest and is likely be a respiratory cause. It's important to summon help immediately and where possible use a face shield and administer rescue breaths; the risk is small of transmitting COVID compared to the risk of taking no action, as it will result in certain cardiac arrest.

[\[Withdrawn\] COVID-19: guidance for first responders - GOV.UK \(www.gov.uk\)](#)

[Confusion around what to do during COVID-19 when someone's in a cardiac arrest could cause delay in life-saving action, warn charities | Resuscitation Council UK](#)

## Policy Procedure

The following are general first aid related procedures to be followed by Staff:

- If you are aware that an employee or pupil has been taken ill, or has had an accident, follow the responsibilities as listed below. You should not attempt to give first aid treatment yourself unless you have been trained to,
- The individual concerned should be taken to the nearest available First Aider. If there is no one able to assist in the immediate vicinity the individual should be taken to Pupil Services Reception,
- Pupil Services is the first point of call for all casualties if no First Aider is immediately available,
- First Aid trained Pupil Services staff will then facilitate First Aid for the casualty as necessary,
- As a general rule, we ask parents to take any child who requires hospital treatment to hospital, as we cannot guarantee which hospital is the preferred one (geographically for the family) nor can we guarantee how long any pupil and staff members will be required to stay at hospital for,
- Should this not be possible or there likely to be a significant delay in parents collecting the pupil, all employees are insured to carry pupils and other employees to hospital in their cars under the schools insurance, under these circumstances,
- Car journeys to hospital should only be undertaken if the patient is medically fit enough to be transported in this manner, with or without another employee to assist. If in doubt, please call an ambulance,
- If an ambulance is called for, please ensure the correct address is given (Chapel Road or North Brink) and if possible, a member of staff is designated to go out and meet them to direct them to the appropriate place. Emergency services must be given accurate instructions on where to report to reduce any delay in finding the casualty,
- If you need to access a first aid kit for personal use, do not remove it from its designated place,
- Any loss or damage to first aid equipment must be reported to Housekeeping or the School Nurse,
- If a first aid kit is poorly stocked, this should also be reported to the relevant persons above. All of the main School vehicles carry a first aid box, with additional eye wash. These vehicles include the minibuses, car and tractors.

### **Additional Procedures Specific to the Boarding House(s)**

During the School Day boarding pupils will receive first aid if required using the same procedure for day pupils.

Out of school hours first aid will be provided by Boarding Staff using facilities and equipment within the Boarding House.

## **Additional Procedures Specific to Prep School**

At all times there will be a Classroom Assistant on duty to deal with any first aid problems. Details of the named person are included in the daily duty rota. There are also small first aid kits which can be taken to the playground to deal with any minor incident; again, one member of staff is responsible for taking charge of these.

### **Head Injuries**

Please ensure that any child who bumps their head is given a sticker to inform Staff and parents (parents should also be contacted and informed however minor it is thought to be). If in any doubt please ask a suitably trained first aider (holding a 2-day paediatric certificate), the School Nurse or School Physio to check the child and report the incident to parents immediately. Head injuries should be logged on Return2Play where appropriate after a thorough assessment.

Please also refer to the Head Injury protocol found in Appendix L for further guidance on the management of head injuries.

### **Types of Injuries/Issues**

- Where a child presents themselves as unwell an initial assessment of their condition is made, and they may then be monitored in Pupil Services for a period. If deemed necessary, the parent(s) are contacted to collect the pupil and take them home,
- Where a pupil is vomiting (with or without diarrhea), the parent(s) are contacted as a matter of course and asked to collect their child. The parent(s) are then asked to keep their child at home for at least 48 hours (about 2 days) AFTER the last episode,
- Headaches- paracetamol should be offered after other methods of treatment have been considered/implemented such as increasing fluid intake, rest, or fresh air,
- (only if parents have given their verbal consent, by phone or in person, on request of Pupil Services staff or School Nurse. Administration is recorded on SIMS in medical events with time medication has been given. Pupils must be witnessed taking any medication. Where a pupil presents with a rash they are placed in the nearest available medical room and an assessment is made. If deemed necessary, the pupil's parents/guardians are contacted.

Where a more serious accident has occurred involving pupil(s), Staff, parents or other adults, the details of the accident / incident are recorded on a specific form and given to the appropriate member of staff detailed on the top of the form. All near misses should also be recorded on the appropriate near miss form.

### **The Parent/School Contract**

A medical form, outlining past and current medical problems, including allergies and present treatment, is sent to each parent to complete before the pupil commences at the school. The Parent/School Contract (clause 7.3) also requires that parents sign to acknowledge parental consent for emergency treatment.

# Responsibilities

## Heads of Department

- Will ensure that the first aid arrangements for their department, as noted in the risk assessment table below, meet their requirements.

## First Aid Personnel

- Respond promptly to requests for assistance if able,
- Summon further help if necessary,
- Look after the casualty until recovery has taken place or further medical assistance has arrived,
- Report details of any treatment provided,
- Report any accident/incident which led to the first aid being necessary,
- Following their training as given,
- Ensure that if dealing with a pupil who then needs to go to hospital with a member of staff but without their parents, the confidential medical information which the school holds for them travels with them to hospital to inform the medical staff of issues known to the school,
- Ensure that parents are informed without delay if deemed necessary.

## Pupil Services First Aiders

Responsibilities include all listed above for First Aid Personnel but additionally they must:

- Ensure that they always obtain the history relating to a pupil not feeling well, particularly in the cases of headaches, to ensure that no injury or trauma has caused the pupil to feel unwell,
- If a pupil feels unwell due to an injury or trauma advice should be sought from the School Nurse. If unavailable, parents should be advised to seek medical advice from their GP or A&E depending upon severity. Ensure that parents are informed without delay if deemed necessary.

## School Nurse

- At the beginning of each academic year ensure that relevant Staff are aware of pupils with medical conditions as appropriate,
- Update the medical charts displaying pupils who may require emergency treatment relating to a condition at least annually,
- Offer advice and assistance to First Aiders as needed,
- To organise an in-house trainer or external trainer, as applicable,
- Work as part of the Health and Safety Committee attending termly meetings to monitor First Aid Provision within School.



### **All Teaching Staff will**

- Familiarise themselves with the first aid procedures in operation. They will also ensure that they know who the current First Aiders are,
- Be aware of specific medical details of individual pupils when publicised by the School Nurse,
- Ensure that their pupils/tutees are aware of the procedures in operation,
- Never move a casualty until they have been assessed by a qualified First Aider unless the casualty is in immediate danger,
- Send for help from Pupil Services as soon as possible either by person or telephone, ensuring that the messenger knows the precise location of the casualty,
- Ensure that parents are informed without delay if deemed necessary,
- Reassure, but never treat a casualty unless Staff are in possession of a valid first aid certificate or know the correct procedures. Such Staff can start emergency aid until a First Aider arrives at the scene. Send a pupil who has minor injuries to Pupil Services, if they can walk where they will be seen; this pupil should be accompanied,
- Send a pupil who feels generally 'unwell' to Pupil Services, unless their deterioration seems uncharacteristic and is causing concern. Contact Pupil Services/School Nurse if concerned,
- Ensure that they have a current medical consent form (including contact details of each pupil's own GP) for every pupil that they take out on a school trip which indicates any specific conditions or medications of which they should be aware,
- Have regard to personal safety,
- Report all accidents to themselves at work.

### **All Support Staff will**

- Call the Pupil Services First Aider, unless they are a first aider themselves, to treat any injured pupil. This should be done by telephone on 01945 583631 or on the internal system by dialing '0',
- Support the Staff/First Aiders in calling for an ambulance or contacting relatives in an emergency.

Staff are briefed on First Aid procedures as part of their induction by the Head of HR or the H&S Advisor. The first aid procedure is also briefly outlined within the relevant section in the Teacher's Guide.

## Appendix A: The Legal Position

We are required to report any serious injuries, accidents, dangerous occurrences or diseases to the Health and Safety Executive under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR). Under these regulations we must report the following:

- Deaths,
- Specified injuries,
- Over 7-day injuries,
- An accident-causing injury to pupils, members of the public or other people not at work, under certain circumstances,
- A specified dangerous occurrence, where something happened which did not result in an injury but could have.

Our duty to provide first aid at work is governed by the Health and Safety (First Aid) Regulations 1981. These require us to carry out a risk assessment to determine what first aid facilities and personnel are necessary to meet the needs of our business. We are also required to review this assessment periodically to ensure that current provision is adequate. To comply with these Regulations, our assessment has considered several factors, including the following:

- Type of department,
- Type of activities run by or within any given department,
- Buildings layout,
- Proximity of School buildings to emergency medical services,
- Needs of travelling and/or lone workers,
- Provision during term time and holiday time,
- Type of skills likely to be required by both teaching and support staff.

We have ensured access to a fully automated AED (Defibrillator) for Staff or trusted person to use within the chair store/annexe in Skelton Hall.

## Appendix B: Whole School First Aid Risk Assessment

We have assessed that each department or activity requires the following:

Department	Specific Risk/Risk Level	Level of training required by at least one staff member in each school area. Any additional control measures required?
General Academic and Support Departments (low risk)	Lower risk activities (teaching, training in classroom environments)	Emergency First Aid at Work or Paediatric Emergency First Aid
D&T	Higher risk activities	Emergency First Aid at Work Eye washes and burns dressings in first aid boxes plus any other items considered necessary by the Head of Department.
Estates Department and Grounds	Higher risk activities, lone work	Emergency First Aid at Work – preferably held by 2 or more members of each team. Estates and Grounds vehicles must carry first aid kits and eye washes. First aid kits must contain all necessary items for work being carried out.
Pupil Services	All injury types	Full First Aid at Work. Paediatric First Aid course)  Shirley Davies holds a Paediatric First Aid Certificate Tracy Kimber holds a Paediatric First Aid Certificate.
F&N	Higher risk activities	Emergency First Aid at Work. Blue plasters, and burns dressings additionally supplied in First Aid Boxes. A shower head available to assist with treatment of burns if needed.
Sciences	Higher risk activities	Emergency First Aid at Work. Eye washes and burns dressings in first aid boxes plus any other items considered necessary by the Head of Department.
Art and Textiles	Higher risk activities	Emergency First Aid at Work. Eye washes in first aid boxes if cannot guarantee face access to a tap, plus any other items considered necessary by the Head of Department.
Sport (on and off site)	Higher risk activities	Emergency First Aid at Work. Any additional First Aid training advised or required by the relevant sporting body. Additional items within first aid boxes should include ice packs and sprays plus any other items considered necessary by the Head of Department. Each member of sports staff has their own First Aid Kit Bag which they are responsible for maintaining. Additional supplies obtained from Claire Taylor – School Physiotherapist.

		AED close by in Skelton Hall chair storeroom. AED also available at the Hudson Leisure Centre.
Catering	Higher risk activities, lone work	Emergency First Aid at Work. First aid kit should contain burns dressings, eye washes and many additional dressings and catering plasters. The kit may also contain any other items considered necessary by the Head of Department.
Operations Services (including Housekeeping and Custodians)	Lone work, work with chemicals	Emergency First Aid at Work for the on-site manager. Staff members must know where first aid kits are held in their relevant departments. Where work may not be carried out in easy reach of a first aid box, one must be carried with the staff member. Porterage vehicles must carry a first aid box.
Specific on or off-site activities/trips – medium to high-risk activities	Falls, heat exhaustion, contact with water, hypothermia, road accidents	Emergency First Aid at Work. Any additional First Aid Training advised or required by the relevant governing body. First Aiders and provision are examined for each trip by the trip organiser as part of the risk assessment for the trip. First aid kits should include all relevant and additional items such as foil survival blankets and heat packs plus any other items considered necessary by the Activity Leader/Head of Department. These are booked out through the School Nurse when required.
Lone workers (general)	Falling ill or being injured whilst alone at work.	Emergency First Aid at Work. Where work may not be carried out in easy reach of a first aid box, one must be carried with the lone worker, i.e., within the vehicle being used to access remote area.
Boarding House	All injury types	Boarding Staff to receive the First Aid at Work qualification plus additional training as required to support pupils.

Please note, each Department can amend the arrangements for first aid within their area depending upon the perceived risk and additional controls required. Please notify the School Nurse/H&S Advisor of any changes.

## Appendix C: Medical Information

All parents are required to complete a medical form when their child enters the school, giving details of any existing conditions, allergies or regular medication. We also keep relevant information about the medical requirements of children who come to the school for an assessment or to attend a Taster Day or an Open Day.

Information is entered into SIMS and kept confidentially within the pupil's file. Some children may have specific medical needs that may necessitate the use of emergency treatment e.g., administering an adrenaline pen. Charts detailing these pupils are kept within the following areas:

- Pupil Services,
- School Nurse Office,
- Skelton Hall Office,
- Staff Common Room,
- Staff Work Room,
- Prep School Staff Room,
- Food and Nutrition Room (only accessible by staff not pupils),
- All 3 Science rooms (only accessible by staff not pupils),
- Custodian Office,
- Sports Office,
- Hazel House,
- Warren House,
- The Medical Annexe.

Staff are briefed as necessary and are provided with details of specific medical needs for pupils in their classes.

If you are unfamiliar with any medical conditions, please ask the School Nurse.

If children return to school following an illness and need to continue taking medication, their parents must complete a consent form giving the school permission to administer these medicines to loco parentis. Such medicines will be kept securely in the medicine cupboard in Pupil Services or in the fridge if required (which is in Pupil Services medical room or with the School Nurse in the Medical Annexe fridge).

**Designated staff only will supervise the administration of these. Designated staff have received training from the School Nurse in administering medicines. All medicines given must be witnessed and the form signed, dated and the time of administration recorded by the administering staff. Medicines must never be kept within a first aid kit.**

## **Appendix D: Whole School Arrangements**

### **First Aid Treatment areas**

There are two Medical Rooms; one is located next to Pupil Services (this medical room has several toilets accessible a few metres away in Russell Hall) and the Medical Annexe is in the main carpark with 2 bedrooms with 2 beds in each room for pupils to rest if unwell. The Medical Annexe has 2 bathrooms/toilets and both rooms have call bells.

First aid can be administered in either of the medical rooms noted above. Only one ill/injured pupil should be in the Pupil Services medical room at a time to ensure the individual's privacy and confidentiality and to maintain good infection control practices.

If an individual is placed in either of the school medical rooms, Pupil Services must be made aware to provide additional support if needed and to ensure evacuation in the event of an alarm.

N.B. If the person concerned has a severe injury or issue, they should be dealt with in situ and assistance called for as appropriate. Care must be taken to provide the individual with as much privacy and dignity as possible in the given situation.

### **Infection Control**

First Aiders must ensure that they take precautions to avoid infection and must follow basic hand hygiene procedures as instructed in their training.

All first aid kits and medical rooms have gloves and small clinical waste bags that must be used when administering first aid.

Any clinical waste including used dressings or items containing bodily fluid must be placed in a bag and go into the clinical waste bin within the Pupil Services medical room or Nurse Annexe Office. Items can be transferred through the school and be placed within either bin as long as they are in a sealed bag during transport.

If any bodily fluids are spilt onto carpets or upholstery a member of the custodian team must be contacted to dispose and clean of this. Custodians hold appropriate spill kits for this purpose.

Should an individual experience diarrhoea or vomiting, the Operations Services Team Leader, Cleaning Supervisor or cleaner in that area must be informed to arrange for the affected areas to be thoroughly cleaned to minimise any risk of infection. Whilst awaiting cleaning, this area should not be used; toilet cubicles for example would need to be displayed as out of use.

Please see Appendix M for information regarding disposal of sharps.

## First Aid Recording

All first aider visits or treatments must be recorded on the appropriate Accident/Incident or relevant Near Miss or Minor Injuries form (shown in Appendix I and J). These are in the Prep School staff room and within Pupil Services. Copies can also be obtained from the Health & Safety folder on the T: Drive. These forms must be completed as thoroughly as possible and must include the date/time and any first aid given. Forms are then passed on to the appropriate member of staff listed on the top of the form.

## Staff training

All Staff undertaking first aid duties on behalf of School Staff will be given full training in accordance with current legal requirements.

First aid training for Staff is undertaken on a voluntary basis, unless the requirement forms part of their job role (usually noted on a Job Description) and as such, forms part of their contract of employment at the school.

The school provides various levels of first aid training for Staff:

- a. **Full First-Aiders** receive the 3-day First Aid at Work course. These persons can be called upon to attend Staff, pupils, and visitors to the School.
  - A small number of staff will be trained to this level and then retrained at 3-year intervals. Currently these staff are situated within Nurse Annexe and physiotherapy and member of teaching staff DofE trip leader. These persons may also receive annual refresher training through attendance at an Emergency First Aid at Work course.
- b. **Emergency First-Aiders** receive the Emergency First Aid at Work course.
  - Most teaching staff receive this training and are then retrained every 3 years,
  - Additional refresher training can be undertaken by higher risk departments, such as Sports and Pupil Services and this can be provided annually or as additional inset training.
- c. **Paediatric Full First-Aiders**
  - A small number of staff will be trained to this level and then retrained at 3-year intervals. Currently these Staff are members within Pupil Services, the Reception Class Teacher, and the Senior Deputy Head of the Prep School. This is in accordance with EYFS requirements. The School Nurse is a Paediatric trained Nurse,
  - These persons may also receive annual refresher training through attendance at a Paediatric Emergency First Aid course.
- d. **Specific and/or additional first aid training relevant to a specific activity/event**
  - The Sports Department have Sports First Aid training,
  - Our Duke of Edinburgh Award Leader/Trainer has Outdoor First Aid training.

Where necessary, all line managers will be expected to re-organise working hours to enable Staff to attend. The School will do its best to ensure that sufficient notice of both initial training courses and any refreshers are given to managers to assist with this planning.

Staff who administer first aid according to their training in the course of their employment, would be covered by employer's liability insurance.

### **AED/Defibrillator**

The school has an AED/Defibrillator located in the storeroom of Skelton Hall for use on any person on the school premises who may require it.

The defibrillator is a fully automatic machine and hence is designed to be used without training. The school has shown the basic training DVD associated with the unit at inset training however and it is also located on the T drive:/under health and safety/staff documents for Staff to access and watch as a refresher at any time. There is also some additional information held here to remind Staff of the key issues to remember, as well as to give guidance on which electrodes to use on which age children.

Children aged 7 and over should have adult pads used to ensure that the shock delivered is sufficient for the child. Children under the age of 7 should have paediatric pads applied.

Alongside the AED is a kit containing gloves, a pocket mask, pair of scissors, razor, and wipe. There is also a clipboard containing useful quick reference sheets.

The AED is maintained by the School Nurse. The School Nurse is responsible for ensuring that items are in date and replaced as needed.

Weekly checks are made by the School Nurse during term time and by the Operations Services Team Leader during school holidays.

There are 2 emergency adrenalin pens located next to the AED in the dining hall (Skelton Hall) One adrenalin pen is for children aged under 6 years and another for those children 6 years and above.

### **Visitors**

It is our policy to offer first aid assistance to visitors to our premises. Should a visitor feel unwell or have an accident, then the employee supervising their visit should call for a first aider. If the visitor has had an accident, the employee dealing with the incident is responsible for ensuring that an Accident/Incident Record form is completed at Pupil Services.



## Appendix E: First Aid Boxes

### Locations

As the School is comprised of several buildings there are many First Aid Boxes around the site to ensure that one is always easily accessible. There are 43 across the campus. See Appendix G for exact locations. All boxes are marked with a white cross on a green background.

### Content

There is no standard list of items which must be held in a first aid box, however there is an HSE/BS 8599 standard guidance which can be followed if suitable for the department or area concerned. N.B. All first aid boxes contain suitable disposable gloves. All gloves are vinyl and latex free.

The choice and number of items in the box need to be suitable for the risks in each department. The table under section 3 of this Policy shows the basic risk assessment for first aid within the school, however, additional risks can be identified by individual departments, and this can then be used to amend the choice of contents. For instance, a department may need lots of plasters, only one triangular bandage but may need additional items such as eye washes or burns dressings.

As a basic guide and where there is no special risk, the minimum stock of first-aid items in a low-risk department (as advised by the HSE) could be:

- A leaflet giving general guidance on first aid, e.g., HSE leaflet Basic advice on first aid at work,
- 20 plasters of varying useful sizes,
- Two slings (preferably sterile),
- One pack of gauze swabs,
- Two sterile eye pads,
- Four individually wrapped triangular bandages (preferably sterile),
- Six safety pins,
- Six medium-sized (approximately 12cm x 12cm) individually wrapped sterile unmedicated wound dressings,
- Two large (approximately 18cm x 18cm) sterile individually wrapped unmedicated wound dressings,
- One pair of disposable gloves.

Dependent upon the department type and risks associated, you could also consider including the following:

- A disposable ice pack
- An eye wash
- Scissors which can cut through thick fabric
- Burns dressings
- Foil survival blanket
- A resuscitation face shield
- Nitrile gloves (medical gloves which are more resistant to puncture)
- Adhesive tape

Tablets or medicines should not usually be kept in a first aid box.

Eye washes are not routinely kept in or near to a first aid box but should be used whenever a risk to eye health is present and a mains water tap is not or might not be in the immediate vicinity (in the event of mobile working). Wherever eye risks are present away from a tap, an eye wash should be provided.

First Aid Containers are checked termly by the Operations Services Team Leader. For a precise list of First Aid Container contents please see the Operations Services Team Leader.

When an item from a First Aid Kit is used or a kit found to be low on supplies, the Operations Services Team Leader needs to be informed to replenish stock. Additional stock is also held by the School Nurse and the School Physiotherapist.

Any expired First Aid items are passed on to the School Nurse to use for training.

### **Travelling First Aid Bags**

The School Nurse holds First Aid Kits that can be booked to take on School trips if needed. These need to be requested in advance to ensure their availability and to obtain any additional items that may be required according to the risk assessment for a specific trip.

Sports Staff each have their own First Aid Kit Bag supplied by the School Physiotherapist. Each member of staff is responsible for maintaining their own kit bag; additional supplies can be obtained from the School Physiotherapist.

### **School Vehicles**

The School Minibuses and Grounds tractors all have a fully stocked First Aid Kit accessible inside. These are also maintained by the Operations Services Team Leader. All vehicle kits have eye washes.

# Appendix F: First Aiders & First Aid Box Locations

## Location of first aid boxes

### Whole & Senior School:

- Dwight Centre room 7
- Dwight Centre Cafe6
- D & T Work Room
- D & T Barn
- Music Cottages: upstairs
- Admin Cottages: upstairs
- Art: room 1
- Languages: room 12B
- Textiles upstairs
- Caretakers Office
- Corridor off Russell Hall
- Food and Nutrition
- Staff Room
- Sports Hall: foyer
- Mobile: 40B
- Between rooms 24-25
- Room 32
- Room 34 (Foyer)
- Pavilion
- Skelton Hall: servery
- Skelton Hall: kitchen
- Maintenance Shed
- Harecroft House: Admissions Foyer
- Harecroft House: Kitchen
- Harecroft House: 16
- Minibus (YR20 EYS)
- Minibus (YT20 ZPD)
- Tourneo (YS69 WJA)
- Tractor (EU08 PW)
- Tractor (EX16 UVR)

### Prep School:

- Between rooms 53-50
- Toilets (upstairs)
- Staff Room
- SENCO (wall outside)

### Vehicles:

- Minibus (YR69 HDC)
- Minibus (YR69 HFF)
- Minibus (YR69 HFG)
- Minibus (YR69 HFH)
- Minibus (YR69 HFC)
- Minibus (YS18 OGA)
- Minibus (YS18 OFY)
- Minibus (HX67 DPF)

Member of Staff responsible for this document: School Nurse Administration  
Document last updated: September 2022

## Qualified First Aid Staff

First Aid at Work (3 day course) The following persons are trained to this level:

- Operations Services – Wendy Smith
- Pupil Services (Paediatric) – Shirley Davies
- EYFS (Paediatric) – Emma Oram, Megan Gillings, Emma Brown, Suzanne Doherty, Heidi French
- School Nurse/Physiotherapist (Paediatric) - Hannah Ryan, Claire Taylor
- Human Resources (Paediatric) - Sharon Spittle

Emergency First Aid at Work (1 day course) The following persons are trained to this level as a minimum standard:

### Whole School and Senior School:

- T Ablett
- M Barrington
- G Beck
- R Bedford
- K Bradley
- A Brady
- C Cole
- D Cook
- S Cooper
- M Deller
- A Dighton
- S Duncan
- S Emerson
- L Feaviour
- S Fox
- D Garfoot
- S Goodier
- A King
- P Lewis
- C Liston
- K Mann
- L Manning
- J Miller
- H Milton
- D Nunn
- G Nunnerley
- G Nuttall
- H Ryan
- E Simmonds
- S Spittle
- G Staley
- S Taylor
- K Timmis
- C Van Zwieten
- H Wakefield
- P Webb
- S Webb
- F Whatling
- K Welbourne
- S Doherty
- L Esser
- H French
- L Lesniak
- K Neaves

### Mini Bus Drivers:

- L Branco
- G Cleverley
- J Esser
- J Limbrick
- P Smith
- P Staniforth

### Prep School:

- J Page
- S Cook
- S Davies

## Appendix G: Accident Reporting

It is essential that the school is informed of all accidents, incidents and near-misses which occur either on the school site or off-site but during a school activity or event, such as an 'away' sporting fixture. By gathering this information, we not only meet our legal health and safety requirements, but also ensure that we are kept informed of any trends in our accidents/incidents or near-misses. By noting these, we are then in a better position to amend our current practice and reduce the likelihood of them occurring again in the future. This information is presented to the Health and Safety Committee termly in the form of statistics and charts.

### **Accident/Incident Record Form**

Should first aid need to be administered following an accident or incident, the school has an Accident/Incident Record form which is used for all adverse events which result in any significant personal injury or in damage to property. This form should also always be used if dealing with any injuries or near-misses to pupils, employees, and visitors, visiting pupils, parents, or contractors.

### **Near-Miss or Minor Injury Record Forms**

There are also two Near-Miss or Minor Injury Record forms, one for the Senior and one for the Prep School, which are used for all occurrences involving our employees or pupils, which either:

- a. Did not result in any personal or property damage, but could have done or
- b. Did result in very minor or superficial injury or harm.

To clarify, a non-significant injury may be reported as a near-miss if very minor, such as a superficial bruise, bump, burn, cut, or graze. These injuries will be subjective to the reporter and person injured however and hence if in doubt please report on an Accident/Incident Record. If there is a chance that the injury might develop into a larger problem (e.g., such as an infected cut) please report on an Accident/Incident Record.

The forms are shown in Appendices I, J and K below.

## Appendix I: Prep School Near-Miss or Minor Injury Record



### Near-Miss or Minor Incident Record – Prep School

This form should be completed for any near-miss to a pupil, visitor or member of staff which did not result in injury or damage but could have done OR for a very minor injury such as a superficial bruise, bump, burn, cut, or graze. If in doubt or if there is a chance that the injury might develop into a larger problem (e.g., such as an infected cut) please report on an Accident/Incident Record.

Please hand the completed form to the Human Resources Assistant (employees), or place within the Accident Book for Prep pupils. All other forms should be given to the Health and Safety Advisor.

Name of reporting person			Pupil Name (if applicable)  Form		
Signature of reporting person					
Location of near-miss (i.e. room, area)		Where on body injured? (if applicable)		Date and time of near-miss	
Describe what happened, giving the cause if known.					
Recommendation for preventing a recurrence?					
Any other relevant information?					
Signature of parent to state informed		Signature of School representative to state parent informed			

## Appendix J: Senior School Near-Miss or Minor Injury Record



### Near-Miss or Minor Incident Record – Senior School

This form should be completed for any near-miss to a pupil, visitor or member of staff which did not result in injury or damage but could have done OR for a very minor injury such as a superficial bruise, bump, burn, cut, or graze. If in doubt or if there is a chance that the injury might develop into a larger problem (e.g., such as an infected cut) please report on an Accident/Incident Record.

Please hand the completed form to the Human Resources Assistant (employees), or the Health and Safety Advisor (for senior pupils/visitors)

Name of reporting person			Pupil Name (if applicable)		
			Form		
			Signature of pupil		
Location of near-miss (i.e. room, area)		Where on body injured? (if applicable)		Date and time of near-miss	
Describe what happened, giving the cause if known.					
Recommendation for preventing a recurrence?					
Any other relevant information?					

## Appendix K: Accident/ Incident Record



### Accident / Incident Record

This form should be completed for all accidents or incidents involving injury (not including near misses) or damage during any activity or within any area under School control. N.B. This includes off-site School events/trips/matches and includes visitors, contractors, parents and visiting pupils. Please hand the completed form to the Human Resources Assistant (employees) or the Bursar (pupils, visitors) or the Facilities Manager (Contractors)

Name of affected person		<b>Pupils Only</b>	
Their address/Name of Visiting School		Form	
Occupation		Date of Birth	
Location of accident		Name of parent/guardian	
		Date and time of accident	
Describe what happened:			
Cause (if known)?			
Nature of injury?		Name of any first aider and what treatment was given at the scene?	
Attended Hospital?		Treatment there?	
Attended with whom?		Ongoing treatment?	
Details of person completing the form (if different)		Address	
Name			
Occupation			
<b>Employees only</b>	Do you give consent to the School to disclose your personal information and details of the accident which appear on this form to safety representatives for them to carry out the health and safety functions given to them by law?		Yes – Sign here (do not sign if you do not give consent)
<b>Employer only</b>			
Is the accident reportable under RIDDOR?		If so, who reported and on what date? <i>Attach copy of report to this document.</i>	

## Appendix L: Head Injury Protocol



### Head Injury Protocol

For the purposes of this protocol a head injury is defined as any trauma to the head other than superficial injuries to the face (NICE 2014).

This protocol is for the management of head injuries sustained at school by both sporting activities and general accidents.

All pupils that have sustained a head injury will be assessed by a member of staff that has received first aid training.

If the pupil has sustained a head injury during sport, they will be assessed by a member of the Sports Staff that has received training on how to perform a SCAT5 or Pocket-CRT assessment. **Return2Play** <https://www.return2play.org.uk/> is also used to assess the pupil and to ensure that the pupil does not return to play too quickly after injury. Doctors trained in concussion assessments, determine the individual pupil's head injury status in conjunction with parents online, to determine whether and when the child is fit to return to sport. N.B. Return2Play can also be used to assess non-sporting head injuries also. If the injury has been sustained by other means, the pupil will be assessed by a first aid trained member of staff. If the pupil has symptoms beyond those that would be expected, such as more significant pain to the area of impact and/or nausea, or the symptoms cause the staff member concern, they will be referred to the School Nurse or School Physiotherapist. In the unlikely event that both members of staff are unavailable, alternative appropriate medical advice should be sought.

#### **New addition to Return2play September 2022**

Recording Injuries- Head injury v Concussion

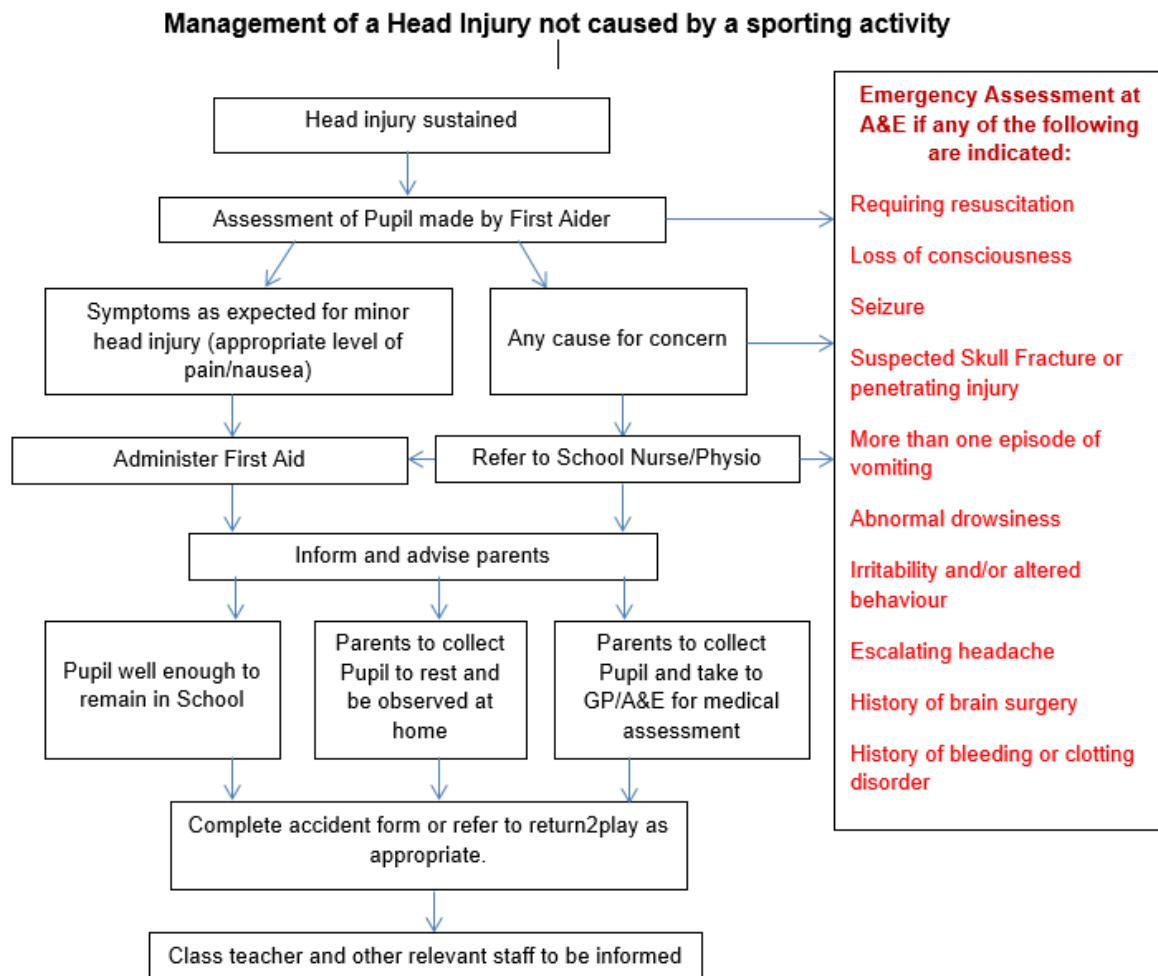
A Software enhancement for new school year. Previously the only way to access the R2P doctor was to record an injury as a concussion. In cases that aren't clear-cut so there is a new log 'head injury (possible concussion)'. This allows an appointment to be made to and the RTP medical team will make diagnostic decision either clearing injury or converting it to concussion.

The appropriate near miss or accident form must be completed for all head injuries and parents always informed however minor the injury may be thought to be and where appropriate logged on return2play – no accident form required if logged on return2 play.

Prep school pupils will be given a sticker to wear to alert members of staff that the pupil has had an injury and to keep close observation.

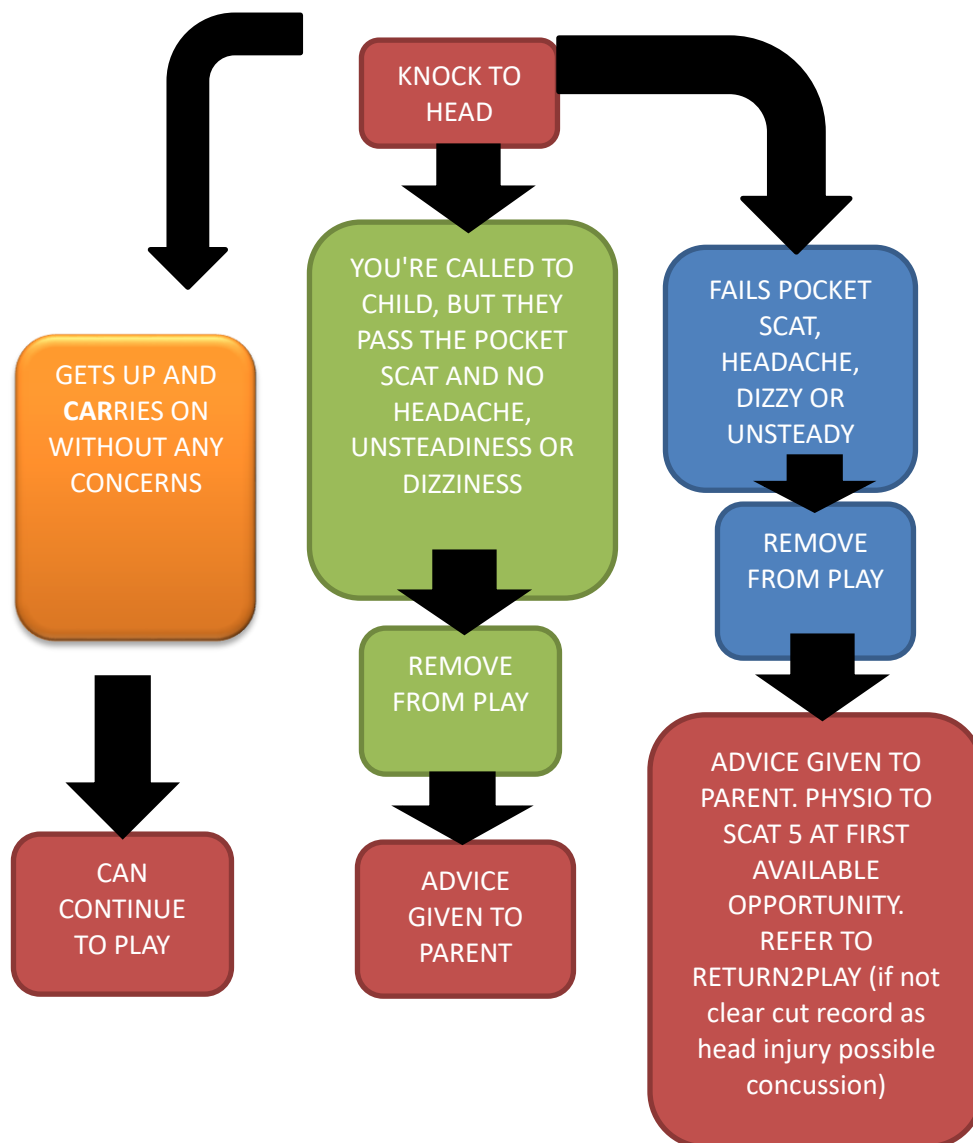


The following flow charts have been created to clearly illustrate this process:



**Pupils must be taken for emergency medical assessment if displaying any of the symptoms above at any time or the member of staff is concerned in anyway.**

## Sport Head Injury Protocol



## Head Injury Management Signs and Symptoms

### Indications for Emergency Management / A&E

- Deteriorating mental status
- Potential spinal injury
- Progressive, worsening symptoms
- New neurological signs
- Loss of consciousness
- Potential Signs of Concussion Requiring Monitoring Only
- Unsteadiness
- Disorientation
- (inability to respond appropriately to questions)
- Loss of memory
- Blank or vacant

## Appendix M: Sharps Disposal Protocol



**WISBECH**  
GRAMMAR SCHOOL

### Sharps Disposal Protocol

This protocol is for needle stick or sharps injuries where previous contamination with a bodily fluid is suspected (e.g. a needle found in an open field) It does not apply to needle stick or sharps injuries within a school department (e.g. F&N, Textiles, D&T)

The sharps disposal kit is kept within the Operations Services Office. This kit is to be used for the disposal of items such as needles or sharps that may be contaminated with bodily fluids.

In using the kit the following protocol should be followed:

- Contact the Custodians to obtain the kit.
- Wearing gloves and using the forceps, pick up the needle or sharp item.
- Place the item into the sharps bin within the kit sharp end first.
- Ensure the sharps bin is sealed after use.
- Place the forceps and gloves in the clinical waste bag.
- If applicable use the second pack within the kit to clean up any bodily fluids as per instructions.
- Use the wipe to disinfect your hands.
- Wash hands thoroughly.
- The sharps bin must be taken to a GP surgery for disposal – it will only be accepted if sealed. Please give sealed bin to the School Nurse.
- The yellow clinical waste bag must be disposed of in the clinical waste bin at pupil services.
- The School Nurse will replenish the kit.

The Health and Safety Advisor must be informed of any needles/sharps found on the school premises as soon as is reasonably practicable, using an accident/incident form.

[T:\Health and Safety\Staff Resources\Accident, incident or near miss reporting\Accident Incident Record \(Senior and Prep\).docx](T:\Health and Safety\Staff Resources\Accident, incident or near miss reporting\Accident Incident Record (Senior and Prep).docx)

#### **Needle Stick/Contaminated Sharps Injuries**

If an individual receives a needle stick or contaminated sharp injury, the following protocol must be followed:

- Encourage the wound to bleed, ideally under running water
- Wash the wound thoroughly with soap and water
- Do not scrub the wound while washing it
- Do not suck the wound
- Dry the wound and cover it using a plaster or dressing

The incident must be recorded on an Accident Form and additionally the School Nurse informed.

Urgent medical advice must be sought as treatment may be required to reduce the risk of infection. Medical advice can be obtained from the individual's GP, by calling the NHS 111 service or by attending the nearest A&E department.