



SAPIENCE
GIRLS ACADEMY

FIRST AID POLICY

2023-24

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FIRST AID POLICY

1. POLICY AIMS

Sapience Girls Academy (SGA) is committed to providing prompt and effective first aid in case of accidents, injuries, or sudden illnesses within the workplace or premises. Our aims include-

- **Promoting Safety and Well-being:** Our primary aim is to promote a safe and healthy environment for employees, visitors, and others present on the premises. We work to ensure that there is an immediate and appropriate response to accidents, injuries, or illnesses to minimize their impact.
- **Legal Compliance:** Meeting legal and regulatory requirements related to health and safety by providing adequate first aid facilities and trained personnel. Providing training to designated personnel to ensure they are competent in administering first aid. Regularly updating the skills and knowledge of first aiders to maintain their effectiveness.
- **Responsibility and Roles:** Clearly defining the responsibilities and roles of individuals involved in providing first aid, including designating trained first aiders.
- **First Aid Equipment and Facilities:** Ensuring that appropriate first aid equipment and facilities are available and well-maintained. Establishing a system for regular inspection and replenishment of first aid supplies.
- **Integration with Emergency Response:** Integrating first aid procedures into the organization's overall emergency response plan. Coordinating with other emergency response measures to ensure a cohesive approach.
- **Communication and Awareness:** Promoting awareness of first aid procedures among employees, visitors, and other stakeholders. Encouraging a culture where individuals are aware of the location of first aid facilities and understand the importance of reporting incidents promptly.
- **Continuous Improvement:** Establishing a system for regular review and updating of the first aid policy to reflect changes in the organization, regulations, or best practices. Encouraging feedback from first aiders and others involved in emergency response to improve the effectiveness of first aid measures.
- **Documentation and Reporting:** Establishing protocols for documenting incidents, first aid interventions, and any follow-up actions taken. Ensuring that reports are maintained for analysis and improvement purposes.
- **Emergency Preparedness:** Enhancing the organization's overall emergency preparedness by ensuring a swift and organized response to various types of incidents.

Overall, the aims of a first aid policy are to create a proactive and organized approach to addressing health and safety concerns within the school, with the ultimate goal of preserving life, preventing further harm, and promoting a culture of well-being.

2. ADMINISTRATION OF MEDICINES DURING SCHOOL HOURS

From time to time, parents request that the school should dispense medicines which need to be administered at regular intervals to pupils. These requests fall into two categories:

- Pupils who require emergency medication on a long-term basis because of the chronic nature of their illness (for example, asthma)
- For casual ailments it is often possible for doses of medication to be given outside school hours. The school does not administer medicines for casual ailments.

- If it is unavoidable that a child has to take medicine in school, written approval and instructions are to be given by the parent:

The medicines must be brought into school in a properly labelled container which states:

- (a) The name of the child
- (b) The name of the medicine
- (c) The dosage
- (d) The time of administration

- Medicines will be kept in a secure place by staff in accordance with safety requirements
- Paracetamol will not be administered under any circumstances

3. ASTHMA POLICY

The school recognizes that asthma is a widespread but controllable condition affecting many pupils at school. The school positively welcomes all pupils with asthma to achieve their potential in all aspects of school life by having a clear asthma policy that is understood by school staff and pupils. (Cover-teachers and new staff are also made aware of the policy.) All staff, including lunchtime supervisors, who come into contact with asthma, is provided with training from the First Aider. Training is updated once a year.

4. RECORD KEEPING

At the beginning of each school year or when a pupil joins the school, parents are asked to indicate any medical conditions their child might have included asthma on an enrolment form. Staff will be given a list of known medical conditions at the beginning of the year and are expected to follow the procedure of indicating medical conditions in their mark books/planner. Any medicines administered to pupils is recorded in the office.

5. PE, GAMES AND ACTIVITIES

- Taking part in sports, games and activities is an essential part of school life for all pupils. All teachers are made aware which pupils have asthma. Under the EO policy no pupil should be excluded from activities
- Pupils with asthma are recorded in the Medical Conditions list distributed at the beginning of the school year.
- All pupils with inhalers should be required and reminded to take them on any school activity.

Asthma sufferers who require inhalers are required to keep them on their persons at all times. Staff will allow them to self-administer when required. Letters will be sent to parents at the beginning of the school year reminding them to **send a labelled inhaler to the office available should the pupil forget to bring their inhaler.**

Where long term needs for emergency medical attention exist, such as epilepsy, the school will require specific guidance on the nature of the likely emergency and how to cope with it while awaiting paramedical assistance. Detailed written instructions should be sent to the school and the parent/guardian should liaise with their child's class teacher. If the emergency is likely to be of a serious nature, emergency contact numbers must be given where an adult is available at all times.

6. DIABETICS

After consultation with parents the school requires the following actions to be taken;

- All members of staff should be aware of a pupil's condition and relevant symptoms. Should a diabetic pupil be taken off the school premises, for any length of time, the staff member in charge is responsible for ensuring the required medicines are taken. NO RISKS SHOULD BE TAKEN.
- Pupil should always have a supply of dextrose tablets or equivalent on her person
- A further store of these items should be made available in a named secure plastic container
- A supply of Hypostop which is within its Use-By Date should be in the staff room fridge
- If applicable, a supply of emergency insulin should be in the staff room fridge
- All relevant items should be taken on Educational Visits

7. FIRST AID IN SCHOOL

All staff, both teaching and non-teaching are responsible for dealing with minor incidents requiring first aid. During lesson time if first aid is required the class teacher should send for one of the registered first aiders, preferably one of the non-teaching staff. If an accident occurs in the playground during breaks or lunchtimes and first aid is required, then one of the staff on duty in the playground should send for one of the first aiders.

Should a pupil refuse first aid treatment the Head Teacher, parents/carers must be informed immediately.

The qualified first aider in school is:

- Kishwar Naaz
- Skeena Bibi
- Maryam Zeb

8. SAFETY/HIV PROTECTION

Always wear disposable gloves when treating any accidents/incidents, which involve body fluids. Make sure any waste (wipes, pads, paper towels etc.) are placed in a disposable bag and fastened securely. Any pupils' clothes should be placed in a plastic bag and fastened securely ready to take home

9. FIRST AID SUPPLIES

First aid boxes are located in the admin office and Medical Room.

10. ALLERGIES/LONG TERM ILLNESS

A record is kept in the Reception Office of any child's allergy to any form of medication (if notified by the parent) any long-term illness, for example asthma, and details on any child whose health might give cause for concern.

11. INFECTIOUS DISEASES

INFECTION	DURATION
From time-to-time pupils contract certain illnesses through no fault of their own, for which they have to be excluded from school for a specific period of time. Below is a list of diseases and the time for which they should be kept at home: Chicken pox	6 days minimum from onset of rash
German measles	7 days minimum from onset of rash
Measles	7 days minimum from onset of rash
Mumps	7 days minimum or until swelling has gone
Whooping cough	21 days minimum from onset of cough
Impetigo	Until skin has healed

12. MAJOR INJURIES

- Fracture of the skull, spine or pelvis
- Fracture of any bone in the arm other than a bone in the wrist or hand
- Fracture of any bone in the leg other than a bone in the ankle or foot
- Amputation of a hand or foot
- The loss of sight of an eye
- Any other injury which results in the person injured being admitted to hospital as an inpatient for more than 24 hours, unless that person is detained only for observation

It might be that the extent of the injury may not be apparent at the time of the accident or immediately afterwards, or the injured person may not immediately be admitted to hospital. Once the injuries are confirmed, or the person has spent more than 24 hours in hospital, then the accident must be reported as a major injury.

Category 3- Accidents to employees resulting in more than three days consecutive absence

Category 4 Other accidents-

These are the accidents, which more commonly occur in school. Procedure to follow:

- Always fill in the School Accident Book for minor injuries (including all bumps on the head, but not minor cuts and grazes).
- This is kept in the Reception Office.
- If a child has a bump on the head you must ring home and contact the parent/guardian.
- Fill in the School Accident Book if the parent/guardian has to be sent for to take the child to the family doctor or to hospital for further treatment.

13. REPORTING SCHOOL ACCIDENTS

Certain accidents arising out of or in connection with work are reportable to the Health and Safety Executive under the requirements of the Reporting of Injuries, Diseases, and Dangerous Occurrences Regulations 2013. The following gives practical advice to schools on compliance with this duty. It is not a complete statement of the duty.

Employee Accidents

(This applies to all school employees and self-employed persons on school premises).

Any accident to an employee resulting in a fatal or major injury must be reported to the HSE immediately by telephone. The details must be confirmed on Form F2508 within 7 days.

If the accident does not result in a fatal or major injury, but the employee is incapacitated from their normal work for more than three days (excluding the day of the accident) there is no need to telephone, but Form 2508 must be completed and sent to the HSE within seven days of the accident.

Pupil Accidents (Including accidents to any visitors not at work)

Fatal and major injuries to pupils on school premises during school hours must be reported in the same way as those to employees. However, injuries during play activities in playgrounds arising from collisions, slips and falls are not reportable unless they are attributable to:

- The condition of the premises (for example, potholes, ice, damaged or worn steps etc.
- Plant or equipment on the school premises
- The lack of proper supervision

Fatal and major injuries to school pupils occurring on school sponsored or controlled activities off the school site (such as field trips, sporting events or holidays in the UK) must be reported if the accident arose out of or in connection with these activities, by phoning the following number 0345 300 9923 (RIDDOR).

If you are unsure of the address of the nearest HSE office and it is not listed in the local telephone directory, you may find out by telephoning the HSE enquiry point on 0300 790 6787.

14. NEAR MISSES

Part of ensuring the premises is a safe environment is to ensure that potential accidents do not occur. An accident is defined as an unplanned, unexpected and undesired event which occurs suddenly and causes injury or loss. A near miss is an unplanned event that has the potential to cause injury or loss.

- Ensure you understand SGA policies and objectives
- Know the emergency arrangements of RIA
- Ensure you understand the control measures, specified in the school's procedures and risk assessments.
- Ensure you have received suitable information, instruction and training in the task you are carrying out.
- Ensure you wear all personal protective equipment that is specified for the task you are to carry out.
- Staff are required to log any near misses in the incident book.

15. MONITORING THE ACCIDENT/INCIDENT BOOK

The Health and Safety co-ordinator will analyse and report on the accident/incident book on a termly basis.