



Westgate Primary School First Aid Policy

Rationale

Children and adults in our care need good quality first aid provision. Clear and agreed systems should ensure that all children are given the same care and understanding in our school. This care should extend to emergency first aid provision, the administration of medicines, dealing with chronic conditions such as asthma or diabetes, support for pupils with disabilities or life-threatening conditions as well as our response to minor ailments and to situations where the child is in discomfort or distress.

Purpose

This policy:

1. Gives clear structures and guidelines to all staff regarding all areas of first aid and medicines;
2. Clearly defines the responsibilities and the staff;
3. Enables staff to see where their responsibilities end;
4. Ensures the safe use and storage of medicines in the school;
5. Ensures the safe administration of medicines in the school;
6. Ensures good first aid cover is available in the school and on visits.

First Aid Policy Guidelines

Child unwell

When a child says they feel unwell, staff should monitor this for a short time. If they do not improve, they should be sent to a member of the Leadership Team who will consider whether or not they should be sent home. No calls should be made without the senior teacher's agreement. The head teacher should always be informed and a member of staff briefed to contact the parents. The child should be accompanied, with their belongings, to wait in or near the office until collected. At lunchtimes, the child should be supervised by lunchtime or office staff in the key stage two building and another child or adult sent to collect their belongings from the class. If parents are unable to respond promptly, children should be given something to occupy themselves eg a reading book, while being supervised. If a parent reports that a child is unable to do PE or to go out to play due to an injury, the child should either remain supervised in the classroom or spectate at the side of the lesson and participate as much as possible, for example by refereeing or evaluating performance and providing feedback. The same process should be followed if a child is being sent home following an injury. In the case of a head bump, the child should always wait under the close supervision of an adult.

Medicines in School

Please see Managing Medication and Medical Conditions Policy.

Training

All school staff are trained in First Aid through an approved training provider and this training is renewed every three years. At the time of writing this policy, the last full refresher training took place in May 2019.

In addition, designated First Aiders receive more in-depth First Aid training and regular refresher training as set out in the qualification requirements.

A record of all staff First Aid training is maintained on SIMS.net Personnel Manager by the school senior administrator.

First Aid Kits

A basic first aid kit is taken onto the playground by Midday and Teaching Assistants so that accident can be quickly attended to in the playground wherever possible; injuries requiring greater attention are dealt with, usually in the Nurture Room. First Aid kits are stored adjacent to the Nurture Room on the designated shelving at the back of the School Hall. All classes have an emergency first aid kit that the teacher should keep in a convenient place and update as necessary. First Aid supplies are also kept in Foundation Stage and adjacent to the KS1 cloakroom area. A first aid kit should ALWAYS be taken on activities off site.

A typical First Aid Kit at Westgate should contain:

- a leaflet giving general guidance on first aid (for example, HSE's leaflet **Basic Advice on First Aid at Work**);
- individually wrapped sterile plasters (assorted sizes), appropriate to the type of work (hypoallergenic plasters can be provided if necessary);
- two sterile eye pads;
- two large sterile individually wrapped un-medicated wound dressings;
- six medium-sized sterile individually wrapped un-medicated wound dressings;
- at least three pairs of disposable gloves;
- yellow bio-hazard type plastic bags for disposing of bulky amounts of blooded waste;
- sterile dressing tape;
- sterile water pods and spray for irrigating eyes and wounds.

The following items are additionally available in the First Aid storage area:

- non-latex disposable gloves for wear by any personnel handling blood, vomit, excreta, etc;
- disposable drying materials;
- individually wrapped triangular bandages, preferably sterile;
- safety pins;
- cling film for burns and scalds;
- thermometers;
- yellow bio-hazard type plastic bags for disposing of bulky amounts of blooded waste;
- replacement supplies to replenish First Aid Kits.
- Barrier masks for mouth to mouth resuscitation

The designated first aider regularly (roughly weekly) checks the contents of first aid boxes and other first aid supplies and arranges to re-stock supplies as appropriate via the school administrator.

Injuries

The nearest adult on the playground should deal with minor grazes on the spot. Open or deeper cuts should be treated indoors and covered after they have been cleaned with water and dried with a non-adhesive wipe. Staff should be aware of any children who are allergic to plasters, and these children will be given an alternative dressing. All treatment should be recorded in the first aid log. Anyone treating an open cut should use rubber gloves. All blood waste is disposed of in one of the specialist yellow waste bags provided for this purpose and then sealed.

There are also other injuries for which a 'second opinion' should be sought– perhaps a cut which is more than just superficial or if a child is complaining about undue pain. The receiving adult must make a judgement based on common sense and experience but you should always err on the side of caution and **refer to a senior member of staff** who will then decide whether to inform the parent/carer.

1. Always ask the child how it happened and check they do not have any other injuries- even if they do not mention them themselves.
2. Refer to a senior member of staff.
3. The person who initially received the child must complete the log and appropriate form in the case of a head bump.
4. If parents are contacted, staff will describe the child's conditions and symptoms without giving advice. If a member of the office staff needs to make the call, please make sure they are sufficiently well briefed to answer the parents / carer's questions.
5. The same guidance should be followed if the incident takes place in the playground, classroom or dining room.
6. However, if in your judgment, a child obviously needs further investigation, or the parent is unable to come, call an ambulance, or make immediate other transport arrangements to the Minor Injuries Unit at Wharfedale Hospital. Make sure the parent knows and has consented.
7. Make sure the contact details are taken with the child to the hospital if not accompanied by their parent.
8. In the case of any injury deemed to be more than an ordinary bump or scrape, a CF50 form must be completed by the person who first dealt with it and handed to the head teacher, before being sent to the local authority (see also below).

Bumped heads

Any bump to the head, no matter how minor it may appear, should be treated seriously. All bumped heads should be treated with an ice pack in the first instance. Parents and carers must be informed by telephone where possible and a standard letter (see appendix) sent home in every instance. The child's teacher should be informed and keep a close eye on the progress of the child. ALL bumped head incidents should be recorded in the first aid record and referred to a member of the SLT. Symptoms to look out for include: dizziness, tingling, nausea, vomiting and confusion.

Record Keeping

A First Aid file is kept with First Aid supplies on the designated shelving in the School Hall, KS1 cloakroom and in the Foundation Stage. It contains:

- A copy of this policy
- A copy of the Managing Medications and Medical Conditions Policy
- A list of children who have a plaster allergy
- Copies of standard letters (see appendices 1a & 1b)

In addition, all accidents and instances of First Aid administration are recorded in the Accident Book, in date order (see appendix 2). There is one for each Key Stage, kept with the First Aid Supplies. Completed Accident Book records are archived by the named First Aider. All staff are responsible for ensuring that forms are correctly and fully completed.

For major accidents, including those which have required treatment at Minor Injuries, a CF50 form must be completed within 24 hours of the accident. This needs to be signed by the Headteacher, a copy taken and placed in the child's file, a copy to the parent and the original copy forwarded to Local Authority. Where an injury has occurred as the result of an assault, a CF50a must be completed instead and processed in the same way. Copies of both these forms are available in the staffroom and the First Aid file (see appendix 3).

Anaphylaxis

There are a small number of children in our school who suffer from severe allergies to food. They will be made known to all staff and a healthcare plan compiled, in conjunction with the family and healthcare professionals. This plan will be reviewed annually and training will also be carried out by the school nurse, arranged by the head teacher or school administrator in September for all staff. Clear instructions are contained in the boxes which are held in the school kitchen or the relevant classrooms.

Calling the emergency services

In the case of major accidents, it is the decision of the most senior member of the Leadership team on site if the emergency services are to be called. Staff are expected to support and assist them in their decision.

If a member of staff is asked to call the emergency services, they must:

1. Dial 999
2. State what has happened
3. The child's name
4. The age of the child
5. Whether the casualty is breathing and/ or unconscious
6. The location of the school

In the event of the emergency services being called, the caretaker or a member of the admin staff should wait at the top of Scarborough Road. If the casualty is a child, their parents should be contacted immediately and given all the information required. The contact details should be sent with the accompanying adults. If the casualty is an adult, their next of kin should be called immediately. All contact numbers for children are held in SIMS.net and staff members' details in SIMS.net and in individual Personnel files in the Headteacher's office.

Any questions regarding this policy should be raised with a member of the Leadership team. It will be reviewed annually.

Signed: (Chair of Governing Body/ committee)

Signed: (Head Teacher)

Date: 29/03/2021

See Also:

- Managing Medications & Medical Conditions Policy
- Educational Visits Policy
- Intimate Care Policy

Appendix 1a

Bumped Head Letter- staying in school



We're working
towards Artsmark
Awarded by Arts
Council England

Scarborough Road, Otley, West Yorkshire LS21 3JS

Tel: 01943 462349

Headteacher: Ms H.R. Carpenter • email: info@westgateprimary.co.uk

Date:

Dear Parents,

_____ (child's name)

had a bump on the head today, which was treated at the time by a member of staff, with no ill-effects shown afterwards at school. However, if you have any concerns or if your child starts to complain about feeling unwell, it is always advisable to check with your doctor.

Signs and symptoms of concussion

Signs of a concussion usually appear within a few minutes or hours of a head injury.

But occasionally they may not be obvious for a few days, so it's important to look out for any problems in the days following a head injury.

Symptoms include:

- a headache that doesn't go away or isn't relieved with painkillers
- dizziness
- feeling sick or vomiting
- feeling stunned, dazed or confused
- memory loss – you may not remember what happened before or after the injury
- clumsiness or trouble with balance
- unusual behaviour – you may become irritated easily or have sudden mood swings
- changes in your vision – such as blurred vision, double vision or "seeing stars"
- being knocked out or struggling to stay awake

Concussion can be harder to spot in babies and young children. One of the main things to look for is a change in their normal behaviour after a head injury, such as crying a lot, a change in their feeding or sleeping habits, or a loss of interest in people or objects.

Yours sincerely

Helen Carpenter
Head Teacher

Appendix 1b

Bumped Head Letter- Sent Home



We're working
towards Artsmark
Awarded by Arts
Council England

Scarborough Road, Otley, West Yorkshire LS21 3JS

Tel: 01943 462349

Headteacher: Ms H.R. Carpenter • email: info@westgateprimary.co.uk

Date:

Dear Parents,

_____ (child's name)

had a bump on the head at school today, and is obviously in some discomfort, so I thought it best that he/ she be sent home. If you have any concerns or if your child starts to complain about feeling unwell, it is always advisable to check with your doctor.

Signs and symptoms of concussion

Signs of a concussion usually appear within a few minutes or hours of a head injury.

But occasionally they may not be obvious for a few days, so it's important to look out for any problems in the days following a head injury.

Symptoms include:

- a headache that doesn't go away or isn't relieved with painkillers
- dizziness
- feeling sick or vomiting
- feeling stunned, dazed or confused
- memory loss – you may not remember what happened before or after the injury
- clumsiness or trouble with balance
- unusual behaviour – you may become irritated easily or have sudden mood swings
- changes in your vision – such as blurred vision, double vision or "seeing stars"
- being knocked out or struggling to stay awake

Concussion can be harder to spot in babies and young children. One of the main things to look for is a change in their normal behaviour after a head injury, such as crying a lot, a change in their feeding or sleeping habits, or a loss of interest in people or objects.

Yours sincerely

Helen Carpenter
Head Teacher

Appendix 2
First Aid Record

Day:	Date: / /	Time:
Full Name:		Year Group:
Description of Accident: 		
Treatment given: 		
Also seen by (if applicable)		
Bumped Head Letter sent home?		Yes/ No
In case of significant injury: CF50 / CF50A completed?		Yes/ No/ Not applicable
Signature:	Name:	

Appendix 3 CF50 / CF50a

[Page left blank]

Form CF / 50

Report Of An Accident, Injury Or Dangerous Occurrence

CF/50/Rev 2016
Tel: (0113) 378 8298

Notes

1. This form is for reporting ALL incidents (not including violence), dangerous occurrences and accidents involving ANY person on premises controlled by Leeds City Council and/or to any employee of Leeds City Council on ANY premises.
2. ALL relevant parts should be completed and sent to Schools HS&W Team, **Schools HS&W Team, 2nd Floor West, Civic Hall, Leeds, LS1 1UR** immediately after the incident.
3. In cases of accidents resulting in death, broken bones, amputation, dislocation, eye injury, loss of consciousness, acute illness or immediate admission to hospital, or in the event of a Dangerous Occurrence **telephone 0113 247 5763 IMMEDIATELY**
4. In cases involving violence please complete form CF/50a – Report of an assault / violent incident

PERSON INJURED: Surname _____ Forename(s) _____

Address _____ Male/Female _____ Date of Birth _____

_____ Registered Disabled Person YES/NO

Category of person: Employee ☐ Pupil ☐ Visitor ☐ Contractor ☐ Passer By ☐

Employee Details: School/base _____ Pay No. _____ Occupation _____

Pupil Details: School _____ Year/ class _____

Details of Incident

Date of incident: Day _____ Month _____ Year _____ Time _____ am / pm

Was person taken direct to hospital from the scene of the accident? **YES / NO**

Will injury prevent member of staff from normal working capacity for more than 3 days following the date of the incident? **YES / NO**

Will injury prevent member of staff from normal working capacity for more than 7 days following the date of the incident? **YES / NO**

Exact Location of incident (e.g. classroom no., hall, playing field, corridor no., playground etc.)

State what happened as fully as possible:

Did the condition of the premises contribute to or cause the accident (e.g. trip in playground due to damaged surface)? **YES / NO**

If **YES** please give details:

Witnesses – names & addresses

1. _____

2. _____

Type of Injury

Amputation	<input type="checkbox"/>	Concussion	<input type="checkbox"/>	Electric shock	<input type="checkbox"/>	Multiple	<input type="checkbox"/>	Sprain / Strain	<input type="checkbox"/>	Near Miss	<input type="checkbox"/>
Break / Fracture	<input type="checkbox"/>	Cut / Abrasion	<input type="checkbox"/>	Irritation	<input type="checkbox"/>	Poisoning	<input type="checkbox"/>	Swelling / bruise	<input type="checkbox"/>		
Burn / Scald	<input type="checkbox"/>	Dislocation	<input type="checkbox"/>	Mark	<input type="checkbox"/>	Respiratory	<input type="checkbox"/>	None Stated	<input type="checkbox"/>		
Other – please state _____											

Part of Body Affected

Arm	<input type="checkbox"/>	Back	<input type="checkbox"/>	Finger	<input type="checkbox"/>	Hand	<input type="checkbox"/>	Internal	<input type="checkbox"/>	Multiple	<input type="checkbox"/>	Neck	<input type="checkbox"/>	Torso	<input type="checkbox"/>
Ankle	<input type="checkbox"/>	Eye	<input type="checkbox"/>	Foot	<input type="checkbox"/>	Head/ face	<input type="checkbox"/>	Leg	<input type="checkbox"/>	Muscular	<input type="checkbox"/>	Toes	<input type="checkbox"/>	Wrist	<input type="checkbox"/>
Other please state _____ None stated <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/>															

Cause of injury

Animal	<input type="checkbox"/>	Drowning	<input type="checkbox"/>	Fall above 2 m	<input type="checkbox"/>	Hit by object	<input type="checkbox"/>	Physical Education	<input type="checkbox"/>	Vehicle	<input type="checkbox"/>
Bite	<input type="checkbox"/>	Electrical	<input type="checkbox"/>	Fall Below 2 m	<input type="checkbox"/>	Illness	<input type="checkbox"/>	Slip / trip	<input type="checkbox"/>	Trap in door	<input type="checkbox"/>
Collision	<input type="checkbox"/>	Equipment	<input type="checkbox"/>	Fire	<input type="checkbox"/>	Intervention	<input type="checkbox"/>	Spillage	<input type="checkbox"/>	Unknown	<input type="checkbox"/>
Glazing	<input type="checkbox"/>	Fighting	<input type="checkbox"/>	Crush/trap	<input type="checkbox"/>	Substance	<input type="checkbox"/>	Manual Handling	<input type="checkbox"/>		
Other –please state: _____											

Initial Investigation details

Has the school carried out an investigation to establish the cause of the accident	YES / NO
If YES please state who to contact for details _____	
Has any action been taken or is action proposed to be taken to prevent recurrence?	YES / NO
If YES please give brief details: _____	

Data protection declaration

<p>"Under the terms of GDPR 2018 we must inform you of the following. By signing this form you are giving your consent to Leeds City Council to process your data. The processing involved will be for the purpose of monitoring health and safety in Leeds City Council in accordance with relevant legislation. This may involve the sharing of the information you provide with local regulatory bodies.</p> <p>I consent to Leeds City Council processing the information detailed in this form. I understand that this will be used by the company in pursuance of its business purposes and my consent is conditional upon Leeds City Council complying with their obligations under GDPR 2018."</p>	
--	--

Print Name of person completing this form _____	
Signature of person completing this form _____	Date _____
If the form has not been completed by the person who has had the accident have they been consulted with and provided with a copy of this form? YES / NO They will also need to countersign the declaration above.	

Headteacher / Manager/ Head of Department name _____

Headteacher / Manager/ Head of Department Signature _____ Date _____

Please send this form to Schools HS&W Team, 2nd Floor West, Civic Hall, Leeds, LS1 1UR as soon as possible.

REPORT OF AN ASSAULT / VIOLENT INCIDENT

Notes

1. This form is for reporting **ASSAULTS and VIOLENT INCIDENTS** to any employee of Leeds City Council on **ANY educational premises**.
2. ALL relevant parts should be completed and sent to Schools HS&W Team, **Schools HS&W Team, 2nd Floor West, Civic Hall, Leeds, LS1 1UR** immediately after the incident.
3. In cases where a member of the public – but not a pupil – is violent or aggressive and the school wishes details to be forwarded to Legal Services the Personnel Officer for the school should be contacted immediately.
4. All other accidents and incidents should be reported on report form CF/50 Report of an Accident, Injury or Dangerous Occurrence.

Person subject to violence

Surname _____ Forename(s) _____

Address _____ Male/Female _____ Date of Birth _____

_____ Registered Disabled Person YES / NO

Employee Details: School/ base _____ Pay No. _____ Occupation _____

Details of Incident

Date of incident: Day _____ Month _____ Year _____ Time _____ am / pm

Was the subject injured? **YES / NO**

If **YES**, give brief details of injury received

Will injury prevent member of staff from normal working capacity for more than 3 days following the date of the incident? **YES / NO**

Will injury prevent member of staff from normal working capacity for more than 7 days following the date of the accident? **YES / NO**

Exact Location of incident (e.g. classroom no., hall, playing field, corridor no., playground etc.)

Summarise what happened (e.g. "pupil swore at teacher" or "parent threatened members of staff"):

Details of alleged assailant (if known)

Name: _____

Address _____

Male/ Female _____ Approx or known age _____ Have there been previous incidents concerning this person **YES / NO**

Witnesses – names & addresses

1. _____

2. _____

3. _____

Type of IncidentVerbal Abuse ☐ Threat (s) ☐ Physical assault – no injury ☐ Physical assault – injury sustained ☐**Part of Body Affected if physical assault**Arm ☐ Back ☐ Finger ☐ Hand ☐ Internal ☐ Multiple ☐ Neck ☐ Torso ☐
Ankle ☐ Eye ☐ Foot ☐ Head / face ☐ Leg ☐ Muscular ☐ Toes ☐ Wrist ☐Other please state _____ None stated ☐ Left ☐ Right ☐**Additional information**

Please give a more detailed account of what happened including any relevant events leading up to the incident and details of any property damage, verbal abuse and anti-social behaviour – use additional sheets if necessary and attach them to this form.

Police notificationHave the police been notified? YES / NO
If YES please give details of the Name, Number and Station of Officer(s) concerned**Initial Investigation details**

Has the school carried out an investigation into the underlying cause of the incident? YES / NO

If YES please state who to contact for details _____

Has any action been taken or is action proposed to be taken to prevent recurrence? YES / NO

If YES please give brief details: (e.g. "school has excluded pupil for 3 days" or "Legal Services have been informed")

Data Protection declaration

"Under the terms of GDPR 2018 we must inform you of the following. By signing this form you are giving your consent to Leeds City Council to process your data. The processing involved will be for the purpose of monitoring health and safety in Leeds City Council in accordance with relevant legislation. This may involve the sharing of the information you provide with local regulatory bodies.

I consent to Leeds City Council processing the information detailed in this form. I understand that this will be used by the company in pursuance of its business purposes and my consent is conditional upon Leeds City Council complying with their obligations under GDPR 2018."

Print Name of person completing this form _____

Signature of person completing this form _____ Date _____

If the form has not been completed by the person who has had the accident have they been consulted with and provided with a copy of this form? If so has the person counter signed the declaration above? YES / NO

Headteacher / Manager/ Head of Department name _____

Headteacher / Manager/ Head of Department Signature _____ Date _____

Please send this form to **Schools HS&W Team, 2nd Floor West, Civic Hall, Leeds, LS1 1UR** as soon as possible.