



# First Aid Policy (including policy for care of boarders who are unwell)

## 2019-2020

**The code for the First Aid room door is C789**

Date of Policy	1 <sup>st</sup> September 2019
Review date	September 2020
Policy held by	Alan Chapman
SLT Link	James Knott

The Health and Safety (First Aid) Regulations of 1981 place a general duty on employers to make first aid provision for employees in case of injury or illness in the workplace. The practical aspects of this statutory duty for employers and self-employed persons are set out in the Approved Code of Practice (ACOP). The school conforms to this code by having the required number of staff trained in First Aid at Work.

### **FIRST AID**

First Aid can save lives and prevent minor injuries becoming major ones. Tutors' conditions of employment do not include giving first aid, although any member of staff may volunteer to undertake these tasks. Staff in charge of students are expected to use their best endeavours at all times, to secure the welfare of the students at the College in the same way that parents might be expected to act. At Bath Academy we provide the necessary equipment and facilities to ensure that adequate first aid cover is available to staff, students and visitors. This provision is available at all times while people are on the College premises, and also off the premises whilst on College visits.

### **WHAT TO DO WHEN AN ACCIDENT OCCURS**

When accidents occur, minor or severe, appropriate help should be summoned immediately by calling the Appointed Person. If they are not available immediately, a first aider should be called. The Appointed Person and First Aiders can be contacted via Reception. The Appointed Person or a First Aider will decide if an ambulance should be called. However, if neither can be contacted, any

member of staff should call an ambulance if in doubt and the situation does seem serious. If a student needs to attend the casualty department, college staff will accompany them.

### **The role of the Appointed Person**

The appointed person at Bath Academy is Alan Chapman. All medical matters and first aid issues should be directed to him. Alan Chapman will take charge when someone is injured or becomes ill. He is responsible for the first aid equipment and for restocking the first aid containers.

### **The role of the First Aider**

All first aiders must complete a training course approved by the Health and Safety Executive. In the event of an injury or illness, the first aider should give immediate help to the casualty.

### **First Aid Training**

First Aid courses are organised regularly by the College. First aiders must have updated training every three years.

### **First Aiders**

A list of holders of recognised first aid qualifications is given in Appendix I and is displayed in Queen Square and Chapel Row offices. Trained First Aiders are:

Tina Burton  
Alan Chapman  
John Freeman  
Sam Hollingshead  
Natalia Knott  
Rachael Trainor

### **First Aid Information**

Basic first aid and CPR techniques are displayed in areas of the College as deemed necessary by the Appointed Person. These are regularly updated.

### **First Aid Accommodation**

The College provides a First aid Room in Queen Square where treatment can be administered.

### **First Aid Boxes and defibrillator**

First Aid boxes are situated at various locations around the school and are signposted throughout. They are checked termly by the Appointed Person. If items are used from a first aid box, they should be logged in the accompanying record book and the Appointed Person informed so that they can be replaced.

The defibrillator is located in the First Aid Room in Queen Square. The numerical code is C789.

### **Out of College Hours**

Out of College hours, staff/students in the boarding house have access to first aid equipment.

### **Off-site Activities and Trips**

The member of staff in charge of the activity or trip should obtain a first aid container from the Office Administrator. He/she should ensure that he/she has any specialist equipment that may be required as detailed in the activity risk assessment. One member of staff should have a current first aid qualification. It is the responsibility of the person organising the activity or trip to ensure there is adequate cover.

### **Risk Assessment**

This should be reviewed annually or at any time after an injury has occurred. Subject teachers in high risk areas are responsible for their own First Aid risk assessment. This should be carried out the help of the Appointed Person. The Principal and the Appointed Person should carry out the College First Aid risk assessment.

### **Students with Special Medical Needs**

The Appointed Person with the help of the Principal will draw up an individual health care plan for students with medical needs. Parents are responsible for supplying information about medicines that their son or daughter needs to take while at College, and for letting the College know of any changes in the prescription or the support needed. The parent or doctor should provide written details including:

1. Name of medication
2. Dose
3. Method of administration
4. Time and frequency of administration
5. Other treatment required
6. Any side effects

In addition parents must provide written consent for the treatment and administration of medication by a member of staff. All Health Care plans will be held on ISAMS with copies for boarders held in the boarding house.

### **Hygiene/Infection Control**

All staff should take precautions to avoid infection and must follow basic hygiene procedures. Single-use disposable gloves are to be found in all first aid containers. The office staff will inform staff of any infectious diseases and any necessary precautions. Parents/guardians may also be notified in writing. Students and staff must remain absent until 24 hours after their last bout of vomiting or diarrhoea.

### **Dealing with spillages of bodily fluids**

All body fluids potentially carry the risk of infection. Employees are expected to fully comply with the controls set out in this procedure. As it is not possible to identify all circumstances where employees are not at risk from disease associated from body fluids, controls are based on the concept of 'Universal Precautions'.

### **Control of risks (Universal Precautions)**

- Wash hands before and after every potential contact and avoid hand to mouth/eye contact
- Wear gloves when contact with blood or body fluids is anticipated
- Protect skin lesions and existing wounds by means of waterproof dressings and/or gloves
- Avoid use of, or exposure to needles and sharp objects, where unavoidable take care in their disposal
- Avoid contamination of the person by waterproof or plastic apron
- Control surface contamination by blood and bodily fluids through containment and appropriate decontamination procedures
- Dispose of all contaminated waste and linen safely. Waste must be placed in a biohazard bag and dealt with as clinical waste.

### **Clean up and decontamination of spills of bodily fluids**

Contact Site Manager to use decontamination granules/tablets in line with manufacturer's instructions.

If body fluids come into contact with eyes, mouth, or open wounds, the following precautions should be taken:

- Wash affected part thoroughly
- Encourage wounds to bleed
- Affected persons should go to an Accident and Emergency Department as soon as possible

### **Reporting of Accidents**

Bath Academy is bound under the regulations laid down by RIDDOR (Reporting of injuries, diseases and dangerous occurrences regulations, 1995) under this we are required to report to the Health and Safety executive. If an employee or pupil is involved in an incident this should be recorded in the accident book as soon as is reasonably possible, by the person dealing with the incident.

Forms for staff accidents are kept in Reception. Forms for pupil accidents are kept in Reception in school and by the house parents in the Boarding House. On completion, the form should be given to the Appointed Person and filed in the pupil's file after any appropriate action.

Minor injuries, such as trips, bumps should be recorded in the school incident book in Reception or Boarding house incident book.

'Near miss' incidents should be reported as soon as possible to the Appointed Person. These can be reported anonymously if preferred. Accidents, minor injuries and near misses are reviewed regularly by the SLT to determine any trends, which can be improved on.

The Appointed Person or person dealing with the incident will inform the parents/guardians of the student or staff as soon as possible after the incident. The Appointed Person will also inform the Principal and the Student Welfare Officer. In the event of a major incident, a designated spokesperson will issue a statement on the school's behalf.

### **Records**

A record of any first aid treatment given by first aiders should be kept. This should be on the official HSE form which can be found in the First Aid Room. This should include:

- The date, time and place of the incident;
- The name of the injured person or ill person;
- Details of the injury/illness and what first aid was given;
- What happened to the person immediately afterwards;
- The name and signature of the first aider or person dealing with the incident.
- Copies should be given to the Appointed Person.
- Parents will be informed of any injury.

A medical questionnaire outlining significant past medical problems, current ones and present treatment, as well as known allergies must be completed for every new student. Adequate, up-to-date written medical records are kept which are distinct from any house records.

### **Administration of medication and record keeping**

Boarding staff are primarily responsible for administering personal daily medications to boarders. Where daily medication is required to be administered within the school day to day or boarding pupils this will be carried out by the Appointed Person. The dispensing of daily medications is recorded and records kept in the First Aid Room and logged on ISAMS.

## **Child Protection**

If any concerns are raised that have Safeguarding implications (eg unexplained marks or scars), while a person is being treated for first aid, the First Aider must inform the designated Child Protection officer who will take the appropriate action.

Policy Holder: Vice Principal (Boarding)  
Chairman of Board of Governors

Signature

Mr David Game

Headmaster

Signature

Mr Tim Naylor

Date: September 2019

## **Appendix I**

### **Bath Academy First Aider**

#### Appointed Person

- Alan Chapman [alan.chapman@bathacademy.co.uk](mailto:alan.chapman@bathacademy.co.uk)

#### Staff holding First Aid at Work:

Tina Burton  
Alan Chapman  
John Freeman  
Sam Hollingshead  
Natalia Knott  
Rachael Trainor

## **Appendix 2**

### **Location of First Aid Boxes**

#### Queen Square

1. First Aid Room. The code for the numerical lock is C789
2. Staff Room

#### Chapel Row

1. Office

#### Boarding House

1. House kitchen

### **Location of defribillator**

Queen Square, First Aid Room. The code for the numerical lock is C789

## **Appendix 3**

### **Care of Boarders Who are Unwell**

Boarders are supported by a Pastoral team of House parents and Matron.

Students are encouraged to register with a local doctor although they may register with any doctor of their choice who is prepared to accept them.

Dedicated accommodation is provided within the boarding house for the treatment and management of patients. One room containing two beds with en-suite facilities is available for in-patients.

#### **Risk assessments for self-medication**

Bath Academy allows some pupils to keep their own medications in a **locked** area in the boarding house and self-administer these if they have been assessed as competent to do so (Appendix 5).

The criteria used to assess the pupils are:

- The age / maturity of the pupil
- The pupils own choice
- Whether the pupil has proven himself or herself to be reliable in general and will remember to take the medication regularly at the required times
- That the pupil understands why they are taking the medication
- That the pupil understands potential side effects of the medication and the risks of overdose
- That the pupil can effectively store the medication in an individual locked area
- That the pupil understands that they should never give the medication to anyone else, even if they have similar symptoms.
- That the pupil agrees to come to Boarding staff weekly with their medication for audit of compliance with the prescription and school policy.

These criteria will be assessed by the Appointed Person prior to the start of self-administration and on a weekly basis during the continuation of the treatment. If at any point the above criteria are not being met the right to self-administer may be withdrawn from the pupil until such time as the assessment criteria are again met.

#### **Competency to consent to Medical Treatment**

A pupil's ability to consent to, or refuse, medical or dental treatment should be acknowledged. This is based on so-called 'competency' and not age. The doctor, dentist or nurse proposing the treatment must judge whether or not the pupil understands the nature of the treatment, as well as the consequences of refusal, and can thus be deemed 'competent'. Parental consent is required for any pupil not deemed competent, although the limitations of obtaining 'blanket' consent to treatment, before the pupil enters the school, should be recognised.

#### **Administration of medication and record keeping**

Boarding staff are primarily responsible for administering personal daily medications to boarders. Where daily medication is required to be administered within the school day to day or boarding pupils this will be carried out by the Appointed Person. The dispensing of daily medications is recorded and records kept in the First Aid Room and logged on ISAMS.

The Boarding House is stocked with paracetamol in their original packaging, which may be issued under the following circumstances:

1. The boarder presents themselves with a headache or upset stomach.
2. The boarding staff check ISAMS to see when the last time paracetamol or other medications were administered to the child.
3. Dispense in accordance with manufacturer instructions only.
4. Record any dispensed paracetamol on ISAMS and complete the 'Paracetamol Stock Sheet (Appendix 4)'. Inform the Appointed Person when running low on stock.
5. If in doubt, ask the Appointed Person for advice.

### **Illness during the Day**

If a boarder is taken ill during the day they are sent to the Receptionist who will contact the Appointed Person. If the student is to be medicated the Appointed Person will make an online record and ensure the boarding house team are aware of this. Often the student will be sent back to lessons. If the student is considered not well enough to be in lessons they will be taken back to the boarding house. The Appointed Person will inform the parents. If the child needs to be seen by a doctor Matron will organise this for the same day. The Appointed Person will inform the parents.

For serious or contagious illnesses, students may be collected by their parents. If not, students will sleep in the boarding house. If the illness spreads, areas in boarding houses will be sectioned off to accommodate pupils.

### **Illness at Night**

Students who are ill at night can contact a member of the boarding staff. They will assess the student and act as a reasonable adult. All boarding staff have First Aid certificates. The Appointed Person is on call for advice or will, if needed, visit the boarding house. 999 calls will be made in serious circumstances.

### **Hygiene and Infection Control**

All staff should take precautions to avoid infection and must follow basic hygiene procedures. Staff should have access to single-use disposable gloves and hand-washing facilities. House staff are trained by the Site Manager in the safe clean-up of bodily fluids.

### **Immunisation**

Pupils should be up to date regarding routine immunisations in accordance with schedules issued by the Department of Health. Those who are not fully immunised should receive appropriate immunisations as soon as practicable, both for their own protection and for that of the wider school community. This will be organised by the Health Centre for those parents who request it.

### **Dental Care**

Students are encouraged to register at a local dentist. Dental care should be made preferably in the school holidays, so as to minimise disruption to academic work.

### **Accident Insurance**

All pupils should be covered by adequate accident insurance as part of their Visa requirements or by the EHIC for European students. Other students are requested to take out appropriate insurance.

### **Health Advice, Health Promotion and Counselling**

Health advice for pupils, staff and parents is provided. Health promotion is provided as a component of PSHE.

## **Emergency Situations**

First Aiders must be trained to recognise and respond appropriately to the emergency needs of children with chronic medical conditions such as asthma, diabetes, epilepsy and severe allergic reaction.

Children with **asthma** need to have immediate access to their reliever inhalers when they need them. Spare inhalers must be provided by parents and kept in the First Aid Room in school.

Children with **epilepsy** - concerns about safety should be discussed with the child and parents as part of their health care plan.

Children with **diabetes** should be able to manage their own medication, which should be discussed with child and parent as part of the health care plan.

**Anaphylaxis** – parents and child should discuss allergies as part of their health care plan. Pre-loaded injection devices should be provided by the parents in the correct container, labelled with their child's name and updated medicines. If the school has to give this injection an ambulance must always be called.

## **Physical Contact with Children**

The treatment of children for minor injuries, illness or medical conditions may involve members of staff in physical contact with children. Any treatment should:

- Not involve more contact than necessary
- Be undertaken by staff who have volunteered to be designated to the task
- Be carried out wherever possible, in front of other children or adults
- Be recorded
- Be notified to parents

## **Requirements**

- Parents are given advice about keeping their children away from school for 48 hours after a sickness or diarrhoea bout
- Parents will always give permission for every medicine administered to their child and then informed when medicine is given in school
- Parents are informed of any incident or accident involving their child and the first aid applied

## **Accompanying students to appointments**

If a student needs to attend the casualty department, college staff will accompany them.



## Appendix 5

### PUPIL SELF-ADMINISTRATION OF MEDICATION RISK ASSESSMENT



Separate form to be completed for each medication

Name of pupil:

Date of Birth:

Boarding House:

Medical Condition:

Name of medication:

Dose of medication:

Frequency/timings of medication:

Start date of treatment:

Review/end date of treatment:

Medication can be stored in pupil's own locked facility. YES / NO

Pupil understands never to give their medication to another pupil YES / NO

Pupil has proven themselves to be reliable YES / NO

Full understanding of reasons for medicine YES / NO

Awareness of potential side effects YES / NO

Pupil knows how and when to take medication YES / NO

Important: If a pupil is not keeping medication locked away or staff are concerned about their ability to self-medicate, the right to self-medication will be removed.

Pupil signature:

Date:

Boarding staff signature:

Date: