FIRST AID POLICY

Sutton Coldfield Adventure Unit

October 2022

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1. AIMS

The aims of our first aid policy are to:

- Ensure the health and safety of all volunteers, children and visitors
- Ensure that Leaders and Trustees are aware of their responsibilities with regards to health and safety
- Provide a framework for responding to an incident and recording and reporting the outcomes

2. OUTCOMESLEGISLATION AND GUIDANCE

This policy is based on the following legislation:

- <u>The Health and Safety (First-Aid) Regulations 1981 (legislation.gov.uk)</u>, which state that employers must provide adequate and appropriate equipment and facilities to enable first aid to be administered to employees, and qualified first aid personnel
- <u>The Management of Health and Safety at Work Regulations 1992 (legislation.gov.uk)</u>, which require employers to make an assessment of the risks to the health and safety of their employees
- <u>The Management of Health and Safety at Work Regulations 1999 (legislation.gov.uk)</u>, which require employers to carry out risk assessments, make arrangements to implement necessary measures, and arrange for appropriate information and training
- <u>The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (legislation.gov.uk)</u> which state that some accidents must be reported to the Health and Safety Executive (HSE), and set out the timeframe for this and how long records of such accidents must be kept
- <u>The Social Security (Claims and Payments) Regulations 1979 (legislation.gov.uk)</u> which set out rules on the retention of accident records

3. ROLES AND RESPONSIBILITIES

3.1 APPOINTED PERSON AND FIRST AIDERS

Sutton Coldfield Adventure Unit (SCAU) will ensure an appropriate voluteer be the **Appointed Person** for first aid. Deputy Appointed Persons will be identified in each section.

The appointed or deputy appointed person is responsible for:

- Taking charge when there are significant injuries, or someone becomes significantly ill requiring more than basic first aid.
- Ensuring there is an adequate supply of medical materials in first aid kits, and replenishing the contents of these kits
- Ensuring that an ambulance or other professional medical help is summoned when appropriate

In line with Government legislation, SCAU will appoint **at least** 1 trained first aider for every 50 people on site as listed in Appendix 1. The names of the first aiders will circulated to all leaders.

First aiders are trained and qualified to carry out the role. Their main duties are:

- To complete a training course approved by the Health and Safety Executive.
- At SCAU they are required to give immediate help to casualties with common injuries or illnesses and those arising from specific hazards at school.
- When necessary, ensure that an ambulance or other professional medical help is called.
- To record any injuries, they respond to using the appropriate format.

3.2 RESPONSIBILITY OF THE TRUSTEES

The Trustees have ultimate responsibility for health and safety matters in SCAU, but delegates operational matters and day-to-day tasks to Section Leaders.

3.3 SECTION LEADERS

The Section Leaders are responsible for the implementation of this policy, including:

- Ensuring that an appropriate number of trained first aid personnel are present at SCAU meetings / camps at all times
- Ensuring that first aiders have an appropriate qualification, keep training up to date and remain competent to perform their role
- Ensuring all leaders are aware of first aid procedures
- Ensuring appropriate risk assessments are completed and appropriate measures are put in place

- Undertaking, or ensuring that leaders undertake, risk assessments, as appropriate, and that appropriate measures are put in place
- Reporting specified incidents to the HSE when necessary, through the RIDDOR process

3.4 FIRST AIDERS

First aiders are responsible for:

- Ensuring they follow the First Aid Policy
- Completing the accident form for all incidents they attend to

4. FIRST AID PROCEDURES

4.1 SCAU PROCEDURES

In the event of an accident or illness:

- The closest volunteer present will assess the seriousness of the injury and seek the assistance of a qualified first aider, if appropriate, who will provide the required first aid treatment
- The first aider will administer first aid as per their training. Further first aiders may be asked to assist if the incident is serious.
- If, in the case of illness rather than injury and the first aider judges that a child is too unwell to remain at SCAU, the first aider will contact parents and be asked to collect their child. Upon their arrival, the first aider will brief the parents on the incident
- If emergency services are called, the First Aider or if not available the section leader will contact parents immediately
- The relevant First Aider will complete an accident form on the same day or as soon as is reasonably practical after an incident resulting in an injury.

4.2 CAMP AND OFF SITE PROCEDURES

When taking children off site, either on camp or away from HQ, leaders will ensure they always have the following:

- A mobile phone
- A portable first aid kit
- Information about the specific medical needs of children
- Contact numbers for the other leaders
- Contact numbers for parents
- A Risk assessment will be completed by the lead section leader prior to any visit that necessitates taking children off SCAU HQ.

There will always be at least one first aider with a current paediatric first aid certificate on SCAU trips and visits,

5. FIRST AID KITS

While there is no statutory list of contents for a first aid kit, SCAU will provide kits in line with the Health and Safety Executive (HSE) guidance. SCAU will have **a minimum** of one first aid kit for each 50 people on each site. First Aid Kits will be labelled and accessible.

A mobile first aid kit will be taken whenever children are taken off site. The Appointed person and/or deputy appointed persons will monitor the contents of First aid kits and mobile first aid kits on a monthly basis and restock any depleted items.

A typical first aid kit in our school will include the following:

- Regular and large bandages
- Eye pad bandages
- Triangular bandages
- Adhesive tape
- Safety pins
- Disposable gloves

- Antiseptic wipes
- Plasters of assorted sizes
- Scissors
- Cold compresses
- Burns dressings

6. RECORD KEEPING AND REPORTING

6.1 FIRST AID AND ACCIDENT RECORDING

All injuries involving children or leaders will be recorded on the accident form

The Trustees for SCAU will receive email notifications for all reported accidents of injuries. Further actions and follow up will be noted within the comment box at the end of the accident report.

6.2 REPORTING TO THE HSE

The Trustees will keep a record of any accident which results in a reportable injury, disease, or dangerous occurrence as defined in the RIDDOR 2013 legislation (regulations 4, 5, 6 and 7).

The Trustees will report these to the Health and Safety Executive as soon as is reasonably practicable and in any event within 10 days of the incident.

Reportable injuries, diseases or dangerous occurrences include:

- Death
- Specified injuries, which are:
 - o Fractures, other than to fingers, thumbs, and toes
 - o Amputations
 - o Any injury likely to lead to permanent loss of sight or reduction in sight
 - o Any crush injury to the head or torso causing damage to the brain or internal organs
 - Serious burns (including scalding)
 - o Any scalping requiring hospital treatment
 - o Any loss of consciousness caused by head injury or asphyxia
 - Any other injury arising from working in an enclosed space which leads to hypothermia or heatinduced illness, or requires resuscitation or admittance to hospital for more than 24 hours
- Injuries where an employee is away from work or unable to perform their normal work duties for more than 7 consecutive days (not including the day of the incident)
- Where an accident leads to someone being taken to hospital
- Near-miss events that do not result in an injury but could have done. Examples of near-miss events relevant to schools include, but are not limited to:
 - o The collapse or failure of load-bearing parts of lifts and lifting equipment
 - o The accidental release of a biological agent likely to cause severe human illness
 - The accidental release or escape of any substance that may cause a serious injury or damage to health
 - An electrical short circuit or overload causing a fire or explosion

Information on how to make a RIDDOR report is available here: How to make a RIDDOR report, HSE <u>http://www.hse.gov.uk/riddor/report.htm</u>

6.3 NOTIFYING PARENTS

Leaders are required to inform parents/carers in person or via telephone of any injuries on the same day of the injury. In the case of a severe injury, parents will be contacted by the first aider or leader. If necessary, parents will be required to collect their child from SCAU.

If an ambulance needs to be called, a section leader or First Aider will contact parents immediately. In the case of a volunteer, the Section leader or a Trustee will inform the emergency contact.

A section leader or the first aider will accompany the child in the ambulance. They will remain at the hospital with the child until a parent or carer arrives at the hospital. A leader or the first aider will accompany another leader to the hospital as needed.

6.4 REPORTING YO CHILD PROTECTION AGENCIES

The Chair of Trustees will notify the HSE of any serious accident, illness or injury to, or death of, a child while in SCAU's care. This will happen as soon as is reasonably practicable, and no later than 14 days after the incident. The DSL will also notify local authority child protection agencies (MASH team) of any serious accident or injury to, or the death of, a children while in SCAU's care.

7. TRAINING

All first aiders must have completed a training course and must hold a valid certificate of competence to show this.

8. MONITORING ARRANGEMENTS

This policy will be reviewed every 3 years. At every review, the policy will require approval by the Trustees

APPENDIX 1: LIST OF FIRST AIDERS

FIRST AIDERS – Hydra

	Date	Expires
Dan Griffiths	28/05/2022	27/5/2025
Dan Hull	25/01/2022	25/01/2025
Mark Ivey	28/05/2022	27/5/2025
Sian Kennedy	28/05/2022	27/5/2025

FIRST AIDERS – Lynx

	Date	Expires
Joanna Garvey	28/05/2022	27/5/2025
Dan Griffiths	28/05/2022	27/5/2025
Dan Hull	25/01/2022	25/01/2025
Mark Ivey	28/05/2022	27/5/2025
John Bleasdale	25/06/2022	25/06/2025
Luke Hawtin	25/06/2022	25/06/2025
Dhanesh Mahmood	25/06/2022	25/06/2025
Kieran Brazenall	25/06/2022	25/06/2025

FIRST AIDERS – Orion

	Date	Expires
John Garvey	28/05/2022	27/5/2025
Jay Baughan	28/05/2022	27/5/2025
Ollie Cash	28/05/2022	27/5/2025
Rhea Pearson	28/05/2022	27/5/2025
Sian Kennedy	28/05/2022	27/5/2025

Risk Assessment form for Sutton Coldfield Adventure Unit activities

First Aid

NAME OF PERSON COMPLETING RISK ASSESSMENT/UPDATE:	Joanna Garvey
DATE OF RISK ASSESSMENT/UPDATE	15/10/2022

Risk Calculator

PROBABILITY-	Highly	Unlikely	Possible	Likely	Almost
CONSEQUENCE	unlikely				certain
Insignificant	1	2	3	4	5
Minor	2	4	6	8	10
Slightly harmful	3	6	9	12	15
Harmful	4	8	12	16	20
Extremely	5	10	15	20	25
harmful					

Risk Level	Control					
Trivial	No action required					
Acceptable	Risk is either highly unlikely to happen or the consequences are insignificant. Apply controls to reduce the risk. Ensure there is a suitable system in					
	place. Continue to monitor.					
Moderate	If it is reasonably practicable to undertake some action to reduce the level of risk this should be done.					
	If the risk is moderate because the consequences are extremely harmful and control measures cannot be implemented to reduce probability to highly					
	unlikely the activity <mark>should not be undertaken</mark>					
Unacceptable	Immediate must be taken to remove or reduce the risk.					
	If action cannot reduce or remove the level of risk the activity SHOULD NOT be undertaken.					
	If this level arises as the result of a DYNAMIC RISK assessment the activity should CEASE IMMEDIATELY.					

This is a dynamic risk assessment and adults should take responsibility for assessing hazards and risks and making a judgement as necessary to ensure the safety of those in their care.

First Aid & administration of medicines	Contact with body fluids (blood, vomit, urine etc) and the potential risk from HIV, Hepatitis, and other infectious diseases.	Leaders/ children	High	Children to be directed to undertake own first aid where applicable (e.g. washing grazes, application of self-adhesive dressings). If first aider needs to get closer to injured party/suspected infection with Corona virus to assess or treat they are to wear disposable PPE A leader with first aid training in each section Children's medication to be stored container in Leaders tent on camp and in kitchen at HQ if required	Check child's medical needs for allergies and specific health needs	Low
	Contamination from disposable gloves, aprons etc. contaminated with body fluids			 Assume all body fluids are infectious and follow strict hygiene procedures: Wash hands thoroughly before and after administering first aid and use disposable gloves. Skin that has been in contact with body fluids of another person must be thoroughly washed with soap and warm/hot water as soon as possible. Splashes into eyes or mouth should be rinsed freely with cold water. Encourage puncture wounds to bleed freely before thorough rinsing, drying and covering with a sterile dressing. Body fluid spillages cleaned using available absorbent materials, e.g. toilet paper, paper s cat litter or other absorbent granules. Disposable gloves and apron worn when cleaning spillages. Area cleaned with bleach or other chlorine-releasing compound. 		
Hazardous substances	Exposure to hazardous substances	First Aider / children	Medium	Ascertain what hazardous substance was involved and consult the COSHH assessment for first aid information.		Low