

Ludlow Junior School

First aid and Intimate Care Policy

Reviewed: February 2024

To be reviewed: February 2027



1. Aims

The aims of our first aid policy are to:

- Ensure the health and safety of all staff, pupils and visitors
- Ensure that staff and governors 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. Legislation and guidance

This policy is based on advice from the Department for Education on first aid in schools and health and safety in schools, and the following legislation:

- The Health and Safety (First Aid) Regulations 1981, 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
- The Management of Health and Safety at Work Regulations 1992, which require employers to make an assessment of the risks to the health and safety of their employees
- The Management of Health and Safety at Work Regulations 1999, which require employers to carry out risk assessments, make arrangements to implement necessary measures, and arrange for appropriate information and training
- The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013, 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
- Social Security (Claims and Payments) Regulations 1979, which set out rules on the retention of accident records
- The Education (Independent School Standards) Regulations 2014, which require that suitable space is provided to cater for the medical and therapy needs of pupils

This policy complies with our funding agreement and articles of association.

3. Roles and responsibilities

3.1 Appointed person(s) and First Aiders

All Paediatric First Aid and/or First Aid at Work trained personnel are responsible for:

- Taking charge when someone is injured or becomes ill
- 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

First aiders are trained and qualified to carry out the role (see section 7) and are responsible

for:

- Acting as first responders to any incidents; they will assess the situation where there is an injured or ill person, and provide immediate and appropriate treatment
- Sending pupils home to recover, where necessary
- Filling in an accident report on the same day, or as soon as is reasonably practicable, after an incident
- Keeping their contact details up to date

3.2 The board of trustees has ultimate responsibility for health and safety matters in the school but delegates responsibility for the strategic management of such matters to the school's EHT who should ensure that adequate frameworks and structures exist in school to be compliant with the guidance

The Board has ultimate responsibility for health and safety matters in the school, but delegates operational matters and day-to-day tasks to the headteacher and staff members. Members of the business team will monitor and record the training, renewal dates and numbers of first aiders and ensure basic compliance in this area

3.3 The EHT is responsible for the implementation of this policy, including:

- Ensuring that an appropriate number of trained first aid personnel are present in the school 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 staff are aware of first aid procedures
- Ensuring appropriate risk assessments are completed and appropriate measures are put in place
- Undertaking, or ensuring that managers undertake, risk assessments, as appropriate, and that appropriate measures are put in place
- Ensuring that adequate space is available for catering to the medical needs of pupils
- Reporting specified incidents to the HSE when necessary
 - The SENDCO will support families in developing medical health care plans where medical needs have been identified that can be reasonably supported in school

3.4 Staff

School staff are responsible for:

- Ensuring they follow first aid procedures
- Ensuring they know who the first aiders in school are
- Completing accident reports for all incidents they attend to where a first aider is not called
- Informing the SLT or their manager of any specific health conditions or first aid needs
- Their own medication, which must be held securely in a locked cupboard and which is their sole responsibility

4. First aid procedures

4.1 In-school procedures

In the event of an accident resulting in injury:

- The closest member of staff 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, if called, will assess the injury and decide if further assistance is needed from a colleague or the emergency services. They will remain on scene until help arrives
- The first aider will also decide whether the injured person should be moved or placed in a recovery position
- If the first aider judges that a pupil is too unwell to remain in school, parents will be contacted and asked to collect their child. Upon their arrival, the first aider will recommend next steps to the parents
- If emergency services are called, the School Office will contact parents immediately
- The first aider will complete an accident report form on the same day or as soon as is reasonably practical after an incident resulting in an injury

4.2 Off-site procedures

When taking pupils off the school premises, staff will ensure they always have the following:

- A mobile phone – which with SIMS mobile connection will allow them to access school database information in an emergency – in addition to hard copies carried
- A portable first aid kit
- Information about the specific medical needs of pupils
- Parents' contact details
 - Details of first aid arrangements at the destination

Risk assessments will be completed by the class teacher/ visit leader prior to any educational visit that necessitates taking pupils off school premises.

For all trips, there will always be at least one first aider or a clear first aid plan in place on arrival

First aid equipment

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

- A leaflet with general first aid advice
- 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

No medication is kept in first aid kits.

First aid kits are stored in:

- The medical room
- Reception (in the cupboard)
- The staff room
- East Hall
- South Hall

6. Record-keeping and reporting

6.1 First aid and accident record book

- An accident form will be completed by the first aider on the same day or as soon as possible after an incident resulting in an injury
- As much detail as possible should be supplied when reporting an accident. Accident forms are available from the school office.

- Records held in the first aid and accident book will be retained by the school for a minimum of 3 years, in accordance with regulation 25 of the Social Security (Claims and Payments) Regulations 1979, and then securely disposed of

6.2 Reporting to the HSE

The School Office 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).

It is the responsibility of the school Business Manager to report these to the Health and Safety Executive as soon as is reasonably practicable and in any event within 10 days of the incident.

The school Business Manager will report these to the local authority as required within the required period.

Reportable injuries, diseases or dangerous occurrences include:

- Death
- Specified injuries, which are:
 - Fractures, other than to fingers, thumbs and toes
 - Amputations
 - Any injury likely to lead to permanent loss of sight or reduction in sight
 - Any crush injury to the head or torso causing damage to the brain or internal organs
 - Serious burns (including scalding)
 - Any scalping requiring hospital treatment
 - 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 heat-induced 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:
 - The collapse or failure of load-bearing parts of lifts and lifting equipment
 - 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

How to make a RIDDOR report, HSE

<http://www.hse.gov.uk/riddor/report.htm>

6.3 Notifying parents

The first aider or class teacher will inform parents of any accident or injury sustained by a pupil, and any first aid treatment given, on the same day, or as soon as reasonably practicable.

For minor injuries this will be via a first aid slip or direct contact. Head injuries and other more severe injuries a phone call home and/or informing parent/carer on collection will be required.

6.4 Reporting to Ofsted and child protection agencies

The Headteacher will notify Ofsted of any serious accident, illness or injury to, or death of, a pupil while in the school's care. This will happen as soon as is reasonably practicable, and no later than 14 days after the incident.

The Headteacher will also notify the LADO of any serious accident or injury to, or the death of, a pupil while in the school's care.

7. Training

All school staff are able to undertake first aid training if they would like to.

All first aiders must have completed a training course and must hold a valid certificate of competence/training to show this. The school will keep a register of all trained first aiders, what training they have received and when this is valid until. The business team will maintain a renewal schedule

Staff are encouraged to renew their first aid training when it is no longer valid. It is the responsibility of the member of staff to be aware of the expiration date of their certificate and to notify the Business Manager of this within six months of the date.

8. Monitoring arrangements

This policy will be reviewed by a member of the Senior Leadership Team every year.

At every review, the policy will be approved by the Headteacher and trustees

9. Links with other policies

This first aid policy is linked to the

- Health and safety policy
- Policy on supporting pupils with medical conditions
- Managing Medicines policy

Intimate Care aspects of supporting pupils

In intimate care situations, the child's safety, dignity and privacy are of paramount importance.

Children requiring intimate care will be treated respectfully at all times.

'Intimate care' covers any task that involves the washing, touching or carrying out a procedure to intimate personal areas and is associated with bodily functions and personal hygiene, including, toileting, washing, dressing, and menstrual care.

Staff at the school who provide intimate care will do so in a professional manner. Staff are aware of safeguarding issues and will have relevant training (eg: health and safety, child protection, manual handling) before providing intimate care. No child should suffer distress or pain as a result of receiving intimate care.

All members of staff within our teaching and learning team and wellbeing teams may be asked to support intimate care. Members of the administrative team and first aiders are also expected to support this work sensitively

Staff will work in partnership with parents or carers to provide care appropriate to the needs of the individual child and together will produce a care plan. The care plan will set out:

- What care is required
- Number of staff needed to carry out the task (if more than one person is required, reasons will be documented)
- Additional equipment required
- Child's preferred means of communication (eg verbal, visual)
- Child's level of ability – what tasks they are able to carry out by themselves

Best practice

When intimate care is given, the member of staff will explain fully each task that is carried out, and the reasons for it. Staff will encourage children to do as much for themselves as they can.

If a child requires intimate care on a regular basis, it is a good idea for two members of staff to share the care between them. In this way the child should not become overly dependent on a single member of staff, and is less likely to become distressed if their usual carer is occasionally unavailable.

However, parents' views on the number of staff providing personal care to their child must also be taken into consideration – some children may simply be unable to cope with more than one carer.

We have policies in place that promote safe recruitment, as well as having sound staff supervision, safeguarding and intimate care procedures; together these ensure that should a child need consistent care from one member of staff, the child's safety and well-being will not be compromised.

Protecting children

Staff should familiarise themselves with the Local Safeguarding Children Board booklet Recognising The Signs Of Child Abuse and the What To Do If You're Worried A Child Is Being Abused flowchart. The school's procedures reflect the guidance in the Government guide. Staff also receive annual and update Child Protection and Safeguarding Training.

All staff are also directed to read the relevant sections of KCSiE 2023 and have received an audio version of this

If a member of staff is concerned about any physical changes to a child, such as marks, bruises, soreness etc, they will inform the DSL (designated safe guarding leader) immediately. The Safeguarding Children policy will then be implemented.

Should a child become unhappy about being cared for by a particular member of staff, the DSL will look into the situation and record any findings. These will be discussed with the child's parents or carers in order to resolve the problem. If necessary the manager will seek advice from outside agencies.

If a child makes an allegation against a member of staff, the procedure set out in the Safeguarding Children policy will be followed.

Dealing with blood and body fluids

Blood, vomit, urine and faeces will be cleaned up immediately and disposed of safely by double bagging the waste and removing it from the premises in an appropriate way.

When they are dealing with body fluids, staff will wear personal protective clothing (disposable plastic gloves and aprons) and will wash themselves thoroughly afterwards.

Soiled children's clothing will be bagged to go home – staff will not rinse it. Children will be kept away from the affected area until the incident has been dealt with fully.

Staff may decide that some items are best disposed of, after dialogue with the parents or carer and that some items could be washed in school