

First Aid Policy

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1. Introduction

West Norfolk Academies Trust must, according to health and safety law, provide first aid personnel and equipment for its staff in case they are injured or become ill at work. Although it is not required by the law in most cases, we also provide first aid cover for other people who are not our employees but come to our premises as visitors. It should be noted that within an educational setting student are identified as visitors.

2. What does First Aid include?

The term *First Aid* means treating someone who is injured or unwell to keep them alive or stop their condition worsening until medical help arrives and treating minor injuries which do not require medical help.

First aid does not normally include giving medicines.

3. Responsibilities

Managers must see that appropriate first aid provision is made for their staff. This provision may be arranged by individual managers or in conjunction with premises managers as we often provided first aid cover for everyone using a building rather than for each group of staff.

Managers and premises managers will, in most cases, also need to provide first aid cover for clients and visitors.

4. First Aid Needs Assessment

First aid provision is no longer based upon fixed numbers of first aiders per member of staff and a list of required contents of first aid boxes. Instead, the approach we are now required to use involves making an assessment at our own workplaces and determining for ourselves: the numbers and types of first aiders we need; what we need in our first aid boxes, and whether we need any other facilities or equipment. This is called a *first aid needs assessment*.

The aim of the first aid needs assessment is to produce first aid provision that is tailored to our own individual workplaces, the people who work there and the risks they face from the work that they do. The process of performing the first aid needs assessment is explained at Annex A to this document.

NOTE - Where it is a requirement for first aid provision to extend to cover non-employees, such as pupils, it is strongly recommended that the requirement be factored in when completing the first aid assessment.

According to the findings of your first aid needs assessment, you will need to provide appropriate first aid personnel.

In selecting a first aider, the following factors should be considered:

- reliability and communication skills
- aptitude and ability to absorb new knowledge and learn new skills

- ability to cope with stressful and physically demanding emergency procedures
- availability to respond to an emergency immediately

First aiders will be expected to:

- give immediate help to casualties with common injuries or illnesses and those arising from specific hazards at the school or college or on educational visits
- when appropriate, ensure that an ambulance or other professional medical help is called

However, as a <u>minimum requirement</u>, irrespective if your first aid needs assessment identifies that you do not need any trained first aiders, you will at least need to see that you have an appointed person available. The role of an appointed person is to: look after any first aid equipment; take charge if there is an incident, and call and liaise with the emergency services when this is necessary. You must see that appointed persons are instructed on and clear about their duties. Appointed persons do not necessarily require any first aid training although a basic understanding is beneficial.

5. Training Requirements

It is the responsibility of employers to ensure that their first aid staff have received the appropriate first aid training delivered by a competent first aid training provider.

If the requirement for first aid is expected to extend to cover non-employees such as pupils then training provision may need adjustment to suit this additional need. Training provider courses are often aimed at adult first aid and would need adapting to cover first aid requirements on children. The school or college should discuss any specific needs with the training provider in advance as they will often tailor courses specifically to the needs of the school or college.

Note – Paediatric first aid is a mandatory requirement for all EYFS and Primary school settings. See Para 5.1. It is not a requirement in secondary school or college settings.

First aid certificates are usually valid for 3 years. Employers should arrange retraining before certificates expire. Once a certificate expires, the individual would have to undertake another full course to be reinstated as a first aider. It is strongly recommended that first aiders undertake annual refresher training to maintain their basic skills and keep up to date with any changes in procedures.

5.1 Training requirement EYFS

Early years education providers, including schools, must meet the paediatric first aid requirements set out in the statutory framework for the early years foundation stage (EYFS). This includes arrangements for off-site activities involving young children such as educational visits.

The EYFS requires that at least one person who has a current paediatric first aid (PFA) certificate should be always on the premises and available when children are present and should accompany children on outings.

Paediatric first aid training must be renewed every 3 years and should be relevant for workers caring for young children and where relevant, babies. Employers should consider, via their first aid needs assessment, the number of children, staff and layout of premises to ensure that a paediatric first aider is able to respond to emergencies quickly.

6. Records and reporting

It is strongly recommended that schools and colleges keep a record of all incidents involving staff, students, students, and visitors, which require first aid staff to be in attendance. This will help identify trends in accidents and areas for improvement as well as when to review first aid needs assessments.

The record should be readily accessible, and details recorded should include:

- date, time, and place of incident
- name of injured or ill person
- details of the injury or illness
- details of what first aid was given
- what happened immediately after the incident (for example, went home, went back to class, went to hospital)
- name and signature of first aider or person dealing with the incident

This record is not the same as the statutory accident book although schools and colleges can choose to combine them.

6.1 Reporting of Injuries, Diseases and Dangerous Occurrences (RIDDOR)

In addition to the recording of incidents there is also a statutory responsibility to report on all reportable incidents as defined under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR). RIDDOR differentiates between employees and students within an educational setting and lists separate criteria for both.

All RIDDOR reportable incidents should be reported using the incident form at Annex C. All forms should be forwarded to the West Norfolk Academies Trust Estates Manager for review, investigation, and reporting to the HSE.

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Under RIDDOR, the responsible person (WNAT Estates Manger) must report the following work-related accidents, including those caused by physical violence, if an employee is injured, wherever they are working:

- accidents which result in death, or a 'reportable specified injury' must be reported without delay
- accidents which prevent the injured person from continuing their normal work for more than seven days (not counting the day of the accident but including weekends and other rest days) must be reported within 15 days of the accident.

6.2 Reportable Specified Injuries to employees

- 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), which: cover more than 10% of the body or cause significant damage to the eyes, respiratory system or other vital organs
- 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
 - requires resuscitation or admittance to hospital for more than 24 hours.

6.3 Physical violence to employees

Some acts of non-consensual physical violence to a person at work, which result in death, a specified injury or a person being incapacitated for over seven days, are reportable. In the case of an over-seven-day injury, the incapacity must arise from a physical injury, not a psychological reaction to the act of violence. Examples of reportable injuries from violence include an incident where a teacher sustains a specified injury because a student, colleague, or member of the public assaults them while on school premises. This is reportable because it arises out of or in connection with work.

6.4 Occupational diseases for employees

Employers must report occupational diseases when they receive a written diagnosis from a doctor that their employee has a reportable disease linked to occupational exposure. These include:

- carpal tunnel syndrome
- severe cramp of the hand or forearm
- occupational dermatitis, e.g. from work involving strong acids or alkalis, including domestic bleach
- hand-arm vibration syndrome
- occupational asthma, e.g. from wood dust and soldering using rosin flux
- tendonitis or tenosynovitis of the hand or forearm
- any occupational cancer
- any disease attributed to an occupational exposure to a biological agent.

NOTE – Stress related illnesses are not reportable under RIDDOR

6.5 Incidents involving students and visitors

Injuries to students and visitors who are involved in an accident at school or on an activity organised by the school are only reportable under RIDDOR if the accident results in:

- the death of the person, and arose out of or in connection with a work activity
- an injury that arose out of or in connection with a work activity and the person is taken directly from the scene of the accident to hospital for treatment (examinations and diagnostic tests do not constitute treatment).

If a student injured in an incident remains at school, is taken home or is simply absent from school for a few days, **the incident is not reportable.**

How do I decide whether an accident to a student 'arises out of or is in connection with work'?

The responsible person at the school should consider whether the incident was caused by:

- a failure in the way a work activity was organised (e.g., inadequate supervision of a field trip) the way equipment or substances were used (e.g., lifts, machinery, experiments etc); and/or
- the condition of the premises (e.g., poorly maintained, or slippery floors).

So, if a student is taken to hospital after breaking an arm during a D&T class, following a fall over a trailing cable, **the incident would be reportable**.

If a student is taken to hospital because of a medical condition (e.g., an asthma attack or epileptic seizure) **this would not be reportable**, as it did not result from the work activity.

This means that many of the common incidents that cause injuries to students at school tend not to be reportable under RIDDOR, as they do not arise directly from the way the school undertakes a work activity. Remember, in all these cases, you only need to consider reporting where an accident results in a student's death or they are taken directly from the scene of the accident to hospital for treatment. There is no need to report incidents where people are taken to hospital purely as a precaution

6.6 Incidents to students during sports activities?

Not all sports injuries to students are reportable under RIDDOR, as organised sports activities can lead to sports injuries that are not connected with how schools manage the risks from the activity. The essential test is whether the accident was caused by the condition, design or maintenance of the premises or equipment, or because of inadequate arrangements for supervision of an activity. If an accident that results in an injury arises because of the normal rough and tumble of a game, the accident and resulting injury would not be reportable.

Examples of reportable incidents include where:

- the condition of the premises or sports equipment was a factor in the incident, e.g., where a student slips and fractures an arm because a member of staff had polished the sports hall floor and left it too slippery for sports.
- or there was inadequate supervision to prevent an incident, or failings in the organisation and management of an event.

6.7 Incidents to students in a playground?

Most playground accidents due to collisions, slips, **trips**, and falls are not normally reportable. Incidents are only reportable where the injury results in a student either being killed or taken directly to a hospital for treatment. Either is only reportable if they were caused by an accident that happened from or in connection with a work activity.

This includes incidents arising because:

 the condition of the premises or equipment was poor, e.g., badly maintained play equipment; or • the school had not provided adequate supervision, e.g., where risks were identified, but no action was taken to provide suitable supervision.

6.8 Physical violence involving students

Violence between students is a school discipline matter and not reportable under RIDDOR, as it does not arise out of or in connection with a work activity.

6.9 Other scenarios involving students

Injuries to students while travelling on a school bus

If another vehicle strikes the school bus while students are getting on or off and students are injured and taken to hospital, this is normally reportable under RIDDOR. However, you do not have to report deaths and injuries resulting from a road traffic accident involving a school vehicle travelling on the public highway under RIDDOR. These are classed as road traffic incidents and are investigated by the police.

Incidents involving students on overseas trips

RIDDOR only applies to activities which take place in Great Britain. So, any incident overseas is not reportable to HSE.

Incidents to students on work experience placements

If students are on a training scheme or work placement, they are deemed to be employees for the period of the placement. In these circumstances, the employer, as the responsible person, should report a death, injury, or disease to a student, which arises out of or in connection with work. This means the wider range of reporting categories for employees is applicable.

6.10 Dangerous occurrences

These are specified near-miss events, which are only reportable if listed under RIDDOR. Reportable dangerous occurrences in schools typically include:

- 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.

7. First aid kits

There is **no** definitive list of what should be in a first aid kit, nor the number of kits required to be held on site. The contents and number of kits will be determined by the first aid needs assessment.

A guide to standard contents is provided in Annex C. Kits should be regularly inspected by the nominated person to ensure contents remains sufficient and within date.

8. Medication

First aid does not include administering medication. It is recommended that medication is not normally kept in first aid kits and that the nominated person be responsible for administering of medication.

9. First aid rooms

First aid rooms are normally only necessary where employees are engaged in higher risk activities. Some larger premises may have sick rooms in case staff are taken ill and schools may provide quiet rooms where children can be treated for minor injuries.

10. Automated External Defibrillators (AEDs)

AED's are provided in some, but not all, West Norfolk Academies Trust premises. This is decided based on first aid needs assessments.

Training in the use of AEDs can provide additional knowledge and skills and may promote greater confidence in the use of a defibrillator where it is provided.

Annex A to WNAT First Aid Policy

First Aid Needs Assessment.

The purpose of a first aid needs assessment is to determine the first aid provision: personnel; equipment and facilities that is needed in each workplace.

Managers are the best-placed people to make decisions on what first aid provision their own staff will need.

You need to consider all the relevant factors involved to reach your conclusion as to what is required. No single factor can be used to accurately assess what your first aid needs will be. As an example, the number of employees on site, whilst being considered, is not the only basis for determining your first aid needs. In general terms, the larger your workforce, the more first aid personnel you will need. However, you need to balance the number of employees (and non-employees where this applies) against the risks associated with their activities. It may be that you only have a few employees, but the work is extremely hazardous — here, first aid requirements would be far greater than for a low-risk environment where there may be many employees.

Complete the form below considering the circumstances of your own workforce/workplace.

At the end of the form there is space for you to record your decisions on the numbers and types of first aid personnel and first aid equipment that you will need.

Name and address of premises /site		
Factors	Guidance	Comments (box is expandable)
Does your workplace have low level hazards such as those that might be found in offices?	The minimum provision is: - an appointed person to take charge of first aid arrangements - a suitably stocked first aid box	
Does your workplace have higher level hazards such as chemicals or dangerous machinery? Consider science and Tech departments.	You should consider: -providing first aiders -providing suitably stocked first aid boxes -the precise location of first aid equipment -informing the emergency services of specific hazards in advance	
Do your work activities involve special hazards such as working at height, working with acids or in confined spaces? Consider site teams / caretakers	You should consider: -providing first aiders -additional training for first aiders to deal with injuries resulting from special hazards -additional first aid equipment -the precise location of first aid equipment -providing a first aid room -informing the emergency services of specific hazards in advance	

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The nature of the workforce

The particular needs of young workers, trainees, pregnant workers and employees with disabilities or particular health problems, where known (eg asthma, diabetes, peanut allergy, epilepsy or a history of heart disease), should be addressed

How many people are employed on site?	Generally, the larger the workforce, the greater the first-aid provision that is required. However, employee numbers should not be the sole basis for determining first-aid needs. A greater level of provision may be required when fewer people are at work but are undertaking more high-risk tasks such as maintenance work. This is a general guide to first aid personnel requirements. It should be balanced against the other factors applicable to your premises / operations. Where there are small numbers of employees, the minimum provision is: — an appointed person to take charge of first aid arrangements. — a suitably stocked first-aid box. Where there are large numbers of employees, ie more than 25, even in low- hazard environments, you should consider providing: — first-aiders. — additional first-aid boxes	
Are there any inexperienced workers on site, or employees with disabilities or particular health problems?	You should consider: — additional training for first- aiders; — additional first-aid equipment; — local siting of first-aid equipment. Your first-aid provision should cover any work experience trainees	

What is your injury / ill health record (i.e. what injuries / illness has occurred and where)	Ensure your first-aid provision will cater for the types of injuries and illnesses that have occurred in your workplace. Monitor accidents and ill health and review your first-aid provision as appropriate.	
Do you have employees who travel a lot, work remotely or work alone?	The assessment should determine whether those who travel long distances or are continuously mobile should carry a personal first-aid kit. Are your communications arrangements appropriate?	
Do any of your employees work shifts or out of hours?	You should ensure there is adequate first-aid provision at all times people are at work.	
Are the premises spread out, e.g. are there several buildings on the site or multi floor buildings?	You should consider how the size of the premises could affect quick access to first-aid facilities. For example, whether additional first-aid provision is needed on a site with more than one building, or whether the distance between buildings is such	
	that additional provision would be unnecessary. If you have a multi- floor building you should consider how many first-aiders or appointed persons will be required to give adequate provision to employees on each floor. You should also consider employees who work in self- contained areas and how their needs are assessed and met.	
Is your workplace remote from emergency medical services?	If you are remote from emergency medical services you may need to consider emergency transport arrangements should an incident occur. Consider too how employees can summon help – do they have easy access to a phone?	

Do any of your employees work on shared / multi occupied sites, occupied by other employers or other sections of WNAT?	You can either decide to make separate provision for your employees, or you may wish to have an agreement whereby one of the employers / partners takes responsibility for all the first aid facilities. If you have the situation where another employer / partner is taking care of the first aid provision you need to fully explain your identified hazards and risks to them so that you can be satisfied that the provision is adequate for your needs. A written agreement is always recommended to help avoid misunderstandings	
Do you have sufficient provision to cover absences of first aiders or appointed persons?	It is essential to ensure first aid cover is available at all times people are at work. You need to ensure that there is cover for both planned and unplanned absences of first aid personnel. Remember to cover situations such as lunch breaks, planned annual leave, training courses and for unplanned absences such as sick leave.	

Do members of the public / people using When assessing your first aid needs you should take into account the number of non-employees (visitors, people using our services, our services / students etc visit or use your students for example) that may use or be present in the building at premises? any one time. As an example, a museum may have 15 employees but possibly 100 visitors each day. As a result, first aid provision should be based on 115 people using those premises. In other premises, for example schools, the relationship and degree of responsibility we have for the students, means that we would normally make comprehensive provision for their first aid needs. There are DfE first aid requirements for some children. If you are organising a large event at your premises, you will need to ensure adequate first aid assistance is available, including quick access to medical and ambulance services.

Pasad upan your findings above, you will now be in:

The provision of first aiders and first aid equipment

Based upon your findings above, you will now be in a position to make decisions on the personnel and equipment that you will need.

First Aid Training provides guidance on the training of first aiders and the WNAT contract for first aid training

Personnel	Numbers Required (ensure this includes cover for holidays / sickness etc)	Comments / Action (including dates for actions)
Appointed person	, ,	
Emergency First Aider		
First Aider		
First Aider (or another employee) with additional training (specify training)		
Equipment	Number and type required, location	Comments / Action (including dates for actions)
First Aid Equipment (first aid boxes etc.) required.		

Assessor's name (please print)	Assessor's signature	Date assessment completed
Manager's / Premises Manager's name	Manager's / Premises Manager's	Date received
(please print)	signature	
		Date for review
	Reviewed by (name)	Remarks
The assessment should be reviewed at least		
annually.		
Date of review		

Incident Report Form

The injured person, a responsible person completing the form on behalf of an injured person, or a responsible person reporting the incident must complete parts A, B, C and D. Please complete in block capitals.

A. About the incident Type of incident (<i>Tick applicable box</i>)	C. About the person injured/involved
 Type of incident (<i>Tick applicable box</i>) Accident resulting in injury 	1. Name
□ Near miss/ accident not resulting in injury	
☐ Dangerous occurrence ☐ Violent incident (Physical or verbal)	2. Home address and post code
Antisocial behaviour (not violence but causing distress or	
disruption)	
 ☐ Work-related ill health (including illness with gradual onset) ☐ Damage to building or property 	
(Complete all of Part A then go to Section D)	
Date of incident/onset of illness 3. Time (24 hr clock Incident Only)	
:	Home phone number
Address/site where incident happened	
	4. Age 5. Male Female
	6. Status of injured person (Tick applicable box)
	☐ Trust employee
5. Exact location on above address/site	- Employee number Client (Go on to 10)
	Student (Go on to 10)
6. Describe task or activity taking place and what happened	On training scheme/work experienceVoluntary worker
, , , , , , , , , , , , , , , , , , , ,	Someone else's employee (E.g. contractor)
	☐ Member of public (Go on to part D)
	7. Job title/occupation
	8. Department
B. Outcome of the incident	o. Separation
How was the person involved affected?	
☐ Near miss/ No physical injury☐ Dangerous occurrence	9. If 'Someone else's employee' ticked above give
☐ Verbal assault	name and phone number of employer
☐ Minor injury☐ Unconscious/needed resuscitation	
Taken directly to hospital from the scene of the	
incident for treatment of the injury	10. Name and address of normal work base, e.g. unit
☐ Hospitalised for over 24 hours☐ Specified injury or fatality (Defined under RIDDOR)	or school (If different to address in box A.4)
Ill health (Describe nature of illness below)	
List injuries/illness	

D. About the person who has completed Parts A - C (* Delete as applicable)
I am the ☐ injured person named in part C ☐ a responsible person reporting the incident and confirm that this report records

the incident as described.

Signed: Prir	nt Name:	Date: / /	Dept/School:
Once Parts A-D	are complete please pa	ass this form onto the responsible	line manager.
3	an estimated date will suffice als of how the injury is work related to the relevant manager/sup kind of incident achinery, or object y carrying	d or exacerbated	line manager.

2.	Why did the incident happen? (Describe below) 3. Please tick any relevant factors that contributed to the incident No risk assessment of task/activity PPE not worn/provided Insufficient training/instruction Inadequate supervision Work pressure/lack of concentration Work procedures not followed Condition of the workplace Behaviour (third party/client) Lone working None of above
4.	Has this incident (same task, activity, etc.) occurred before in your area Yes No of responsibility? (Not necessarily to the same person)
5.	Has the incident resulted in absence from work? No absence from work or change in work activities 1 to 3 days absence from work 4 to 7 days absence from work Over 7 days absence, expected absence, or incapacity for usual work (report injury to HSE)
6.	Did the injured person receive First Aid? ☐ Yes ☐ No Name of First Aider:
7.	Have you involved the injured person in the investigation
8.	Follow up action (Describe what has, or will be done to prevent a recurrence) Action taken, or to be taken Name of person responsible for action
9.	Were there any witnesses to the incident?
	Provide names and addresses or telephone numbers (Attach any relevant statements)
10.	If a violent incident or antisocial behaviour were the Yes No Crime number police informed?
F.	About the person who has completed Part E (To be signed by the person completing part E)
	The information contained in this incident report is correct to the best of my knowledge.
Sigr	ed: Date: / / Tel:
Prin	t Name: Position:
G.	What to do with the completed form Please forward the completed form to
•	The completion of this form will provide information required by the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations and the Social Security (Claims and Payments) Regulations. Completion of this form is not an admission of liability. Information on this form will be stored on a database in accordance with the Data Protection Act.

Annex C to WNAT First Aid Policy

Recommended contents list for first aid kits

- 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)
- sterile eye pads
- individually wrapped triangular bandages, preferably sterile
- safety pins
- large sterile individually wrapped un-medicated wound dressings
- medium-sized sterile individually wrapped un-medicated wound dressings
- disposable gloves

Travelling first-aid kits

Again, there is **no** mandatory list of items to be included in first-aid kits for travelling workers but they might typically 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 (hypoallergenic plasters can be provided, if necessary);
- individually wrapped triangular bandages, preferably sterile;
- safety pins;
- large sterile un-medicated dressing;
- individually wrapped moist cleansing wipes;
- disposable gloves.