

First Aid at Work Protocol and Risk Assessment

September 2022



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Emergency Response

If emergency first aid is required reception should be the first point of contact, unless it is being dealt with within the Department. Details of location of the incident and as much detail as possible of the accident / incident should be provided. If an ambulance is required before the first aider arrives at the incident, inform reception that a call has been made.

Reception will contact emergency response first aiders via radio or phone numbers if available.

All First Aiders should report to reception if they are not available to respond to emergency call for any reason during shift.

Non-Emergency Response

All other non-emergency response incidents should be directed to student services

Attending a Response Call

First Aider on arrival at the scene should first assess the area is safe for them and others. The Operations Manager/ASBM should be informed as soon as possible if an incident is deemed to be unsafe for first aiders to approach. The Operations Manager/ASBM should also be informed if an ambulance has or needs to be called, but this is secondary to summoning the ambulance. Operations Manager/ASBM will decide if further investigation or risk assessment is required.

First Aiders should treat casualties by following the training they have received. If a first aider needs assistance or feels they need support for their decision making they should call for further (FAW) trained assistance. If for any reason you are unsure how to treat the casualty, make them as comfortable as possible as training dictates and call an ambulance.

For head and neck injuries, follow the guidance below:

The Operations Manager/ASBM should be called if the first aider considers the incident requires SLT guidance and support. All First Aid treatment decisions should only be made from the FAW attending the incident - assistance from another first aider should be sought when deemed necessary.

Once the emergency services have arrived follow instructions given by them.

Emergency First Aid Response

Contact Reception on Extension 200 Phone 01827 702205 Radio channel 6 for First Aiders and channel 3 for Facilities.

Walking Patients / Pupils Reception Medical Room

The medical room is equipped to manage all first aid needs and it is to this location that pupils are directed for cuts, sickness and other conditions that are fluid based. Central First Aid point for school and communication centre for first aid response.

Students deemed too ill to remain in school are to be monitored throughout until collected by the relevant parent/guardian.

COVID related incidents to be reported to student services and follow procedures laid out in the addendum - Appendix 7.

Walking Patients / Pupils Attendance Office

Pupils with none fluid based conditions, for example headaches, should report to Student Services. Students deemed too ill to remain in school are to be escorted (where appropriate) to the main reception/medical room and monitored throughout until collected by the relevant parent/guardian.

COVID related illnesses should be directed in the first instance to Student Services. The Editha Isolation room or The Boardroom will be the main location for anyone with COVID symptoms until parent/guardian collection.

Staff, Visitors, Contractors

Should report to Reception medical room. Information on First aid will be included on the information issued to Contractors and Visitors on arrival.

Design and Technology

All pupils and staff working in D&T block requiring first aid should report to the DT technician, if unavailable report to Reception or Student Services depending on condition.

PE Department including dance

No first aider in department. First aid cover report to Reception or Student Services dependant on condition or by contacting Reception for emergency response.

Kitchen & Hall at Breaks

All pupils and staff working in Goodere block requiring first aid should report to the Kitchen or facilities office if a first aider is unavailable report to Reception or Student Services depending on condition.

Science

All pupils and staff working in Science requiring first aid should report to the science technician if unavailable report to Reception or Student Services depending on condition.

Break time and Lunch Period

Covered by Emergency Response team.

Facilities Office

First aider can be contacted on radio channel 3.

Art

No first aider in department. First aid cover report to Reception or Attendance office dependant on condition or by contacting Reception for emergency response.

Drama/Theatre Studies

No first aider in department. First aid cover report to Reception or Attendance office dependant on condition or by contacting Reception for emergency response.

Site Team / Contractors

First aid cover for site team and contractors available on channel 3 for emergency response.

Information Points for Staff / Pupils / Visitors / Contractors

The following information will be displayed at a first aid point in each building:

How to contact a first aider
Where to go for first aid
Map showing locations of alternative first aid boxes
How to call for a first aider in an emergency
Names and picture board of the first aid team and their work locations.

First Aiders Medical Information Access

Pupils who have medical conditions information available on SIMS. Refer to Supporting Pupils with Medical Conditions Policy.

Visitors Health & Safety Information sheet issued on arrival at Reception.

Recording First Aid, Accident & Incidents

First aid forms are kept at the following locations - Reception and Student Services.

All first aid calls or treatments involving students should be recorded on SIMS: Medical - Medical Events, it is the responsibility of the first aider administering treatment to do this. SIMS is an electronic recording mechanism and is easily accessible by all first aiders.

Any accident and dangerous incident forms should be completed and passed to the ASBM to investigate and to report if required any reportable under RIDDOR, the HSE documentation will be completed and submitted by the ASBM/Operations Manager. A list of reportable accidents and incidents is available in the Facilities office.

The ASBM/Operations Manager will oversee recording in general.

Communication with Parents

Parents will be contacted if an ambulance is called or the pupil needs to be taken home or taken to their Doctors Surgery for treatment or further investigation.

The Operations Manager will act as SLT link when injuries are severe, or the first aider needs SLT support.

School Events, Trips/ Visits & Mini Buses

The risk assessment completed for Events, Trips/Visits should include provision of first aid and it is the responsibility of the EVC to ensure that this has happened. The trip co-ordinator should ensure a travel first aid kit is taken on the trip/visit. The school mini buses are supplied with a travel first aid kit.

Supporting Pupils with Medical Needs

First Aiders will be provided with information to support pupils with medical needs as required in the school policy (Supporting Pupils with Medical Conditions).

Head Injuries and Spinal Injuries First Aid Procedures

The Procedures to follow is available in all first aid boxes for first aiders to use for support and guidance when dealing with Head and Spinal Injuries. The Concussion Recognition Checklist should be used for all cases involving a Head Injury.

What to look for - Head injuries:

If you think someone has a head injury, there are six key things you should look for:

- 1. Brief loss of consciousness
- 2. Scalp wound
- 3. Dizziness or nausea
- 4. Loss of memory of events before or during the injury
- 5. Headache
- 6. Confusion

For a severe head injury, you also need to look for:

- 1. reduced level of response
- 2. loss of consciousness
- 3. leakage of blood or watery fluid from the ear or nose
- 4. unequal pupil size

What you need to do - Head injuries

- 1. Sit them down and give them something cold to hold against the injury. You can use a cold compress, or a bag of ice or frozen peas wrapped in a cloth.
- 2. Treat any scalp wounds like a bleed, by applying direct pressure to the wound.
- 3. Check their level of consciousness, using the AVPU scale below. Make a note of their reactions, especially any changes to their level of response, to pass on to the ambulance, in case you have to call one.

The AVPU scale - alert, voice, pain, unresponsive:

- A Alert: Are they alert? Are their eyes open and do they respond to questions?
- V Voice: Do they respond to voice? Can they answer simple questions and respond to instructions?
- P Pain: If they're not alert or they're not responding to your voice do they respond to pain? Try pinching them do they move or open their eyes?
- U Unresponsive: Do they respond to questions or a gentle shake?

If they are alert or responsive then they're conscious and their head injury is probably mild, but you should wait with them until they recover.

If they're not alert or responsive then they may be partially or fully unconscious and their head injury could be severe. Call 999/112 for an ambulance and explain their response to the AVPU test.

If they lose consciousness at any point, open their airway, check their breathing and prepare to treat someone who's become unconscious.

While you're waiting for an ambulance, keep checking their breathing, pulse and any changes in their level of response.

Other factors to look for:

If they:

- are over 65
- have been drinking or taking drugs
- have been unconscious for even a few seconds, or
- if you think they're getting worse

Encourage them to get medical help.

What to look for - Spinal injury

If you think someone may have injured their spine, these are the seven key things to look for:

If the vertebrae (bones protecting the spinal cord) are damaged:

- 1. pain in the neck or back
- 2. unusual shape or twist in the normal curve of the spine
- 3. soreness and/or bruising in the skin over the spine

If the spinal cord is damaged:

- 4. loss of control over limbs may not be able to move arms or legs
- 5. loss of sensation, or abnormal sensations, e.g. burning or tingling
- 6. loss of bladder and/or bowel control
- 7. breathing difficulties

What you need to do - Spinal injury

If they're conscious:

- 1. Reassure them and tell them not to move
- 2. Call 999/112 for an ambulance or ask someone else to call one for you
- 3. You need to stop their head or neck from moving to prevent further damage
- 4. To do this, kneel or lie behind their head. Rest your elbows on the ground or on your knees to keep your arms steady. Grip each side of their head, without covering the ears, to support their head in this position so that the head, neck and spine are in a straight line



5. You need to support the head until emergency services can take over, no matter how long it takes for them to come. If there is someone who can help you, ask them to put rolled-up blankets, towels or clothes on either side of the head to help support it.

If they're unconscious:

- 1. Open their airway using the jaw-thrust technique. To do this, put your fingertips at the angles of the jaw and gently lift to open the airway, avoiding tilting the neck
- 2. Then check if they're breathing
- 3. If they're breathing, continue to support their head and call 999/112 for an ambulance. If you can't maintain an open airway then carefully follow the instructions of how to put someone with a spinal injury in the recovery position.
- 4. If they're not breathing, you'll need to start CPR (cardiopulmonary resuscitation)
- 5. While waiting for help to arrive, keep checking their breathing, pulse and level of response.

Infection control

To minimise risk of infection whilst administering first aid (for example, from hepatitis B and HIV), first-aid personnel must cover all exposed cuts/abrasions on their own bodies with a waterproof dressing before administering treatment. They must also wash their hands before and after applying dressings. If the casualty is bleeding from the mouth the blood must be wiped away using a clean cloth or handkerchief.

Although mouthpieces are available for administering mouth-to-mouth resuscitation, they should only be used by trained personnel as incorrect use may cause bleeding.

Disposable nitrile/vinyl gloves and aprons must be worn whenever blood, or other body fluids are handled, and disposable materials, such as paper towels and sanitising powder, must be used to mop up any substances. All disposable items must be disposed of in plastic bags in line with the Infection Control Policy. Contaminated work areas must be suitably disinfected and soiled clothing should be washed on a hot cycle or advice given to this effect if washing sent home.

If contact is made with any other person's body fluids the area should be washed immediately and medical advice sought.

COVID Related

Editha meeting room is the isolation room for anyone presenting with COVID symptoms, the Board room is also currently being used as a temporary isolation room.

Isolation rooms have a variety of resources to assist in dealing with COVID symptoms. These include, facemasks, aprons, face visors, wipes, tissues, COVID bin, first aid kit and disposable gloves. Any items used to treat the symptoms - wipes, tissues, gloves and masks must be disposed of in the COVID bin provided and not in any general waste bins.

When the isolation areas have been used by suspected COVID cases, caretakers should be called and the room closed off until a deep clean of the area is completed.

COVID bins can be identified by the 'Catch it' 'Kill it' 'Bin it' stickers on the bin lids.

The emergency services

First aid trained staff are expected to act within the scope of their training and in good faith. They will exercise their judgement about individual situations, following the terms of this policy, summoning the assistance of the emergency services, when necessary.

On behalf of the school, first aid staff have a moral responsibility not to summon the assistance of the emergency services unnecessarily, as this may prevent their deployment to genuine emergency cases.

It is the case that the position of an injured party can deteriorate after they have left the care of school first aid staff, either to their parents/carers or professional medical staff. Provided correct procedures have been followed, with advice sought when appropriate, the school will seek to support staff should circumstances have changed after the event or alternative judgements be made with the benefit of hindsight.

The Operations Manager will act as the link between parents/carers and medical professionals in receiving feedback, on a case by case basis, which might help to inform future conduct of school staff.

Disposal of Clinical Waste Procedure

To ensure good hygiene and control of cross contamination, the following actions must be adhered to when dealing with bodily fluids.

- 1. Only use yellow bin bags for clinical waste
- 2. Put all items used during treatment and clearing up spills in to the yellow bag including the gloves used during treatment.
- 3. Seal the yellow bin bags and place them in the yellow clinical waste bin located in the medical room
- 4. Do not put yellow bin bags in to general waste skip or bins
- 5. Yellow Bin bags are located at every first aid box location or call facilities team and they will provide one for you.
- 6. 'Catch it' 'Kill it' 'Bin it' waste is collected each day, sealed in a second bin and left for up to 72 hours before being disposed of.

Cleaning Procedure Bodily Fluid Spills (normally undertaken by cleaning and/or Facilities staff)

- 1. Always ensure you have put on disposable gloves before starting to clean area
- 2. Use paper towel/ blue roll to wipe up as much of the spill as possible placing waste in to a yellow bin bag.
- 3. Using a red cloth, wipe down surface areas affected including tables, chairs, walls using the red sanitizer pre-diluted spray.
- 4. Only use yellow mops and buckets for bodily waste
- 5. After use dispose of cloth and all waste in to a yellow bin bag
- 6. The yellow bin bag should then be placed in the yellow bin located in the medical room. Do not put yellow bin bags in to the skip or other general waste bins.
- 7. Ensure your yellow mop and bucket are washout and sprayed with sanitizer after use

Appendix 1 - Concussion Recognition Checklist

Name:	Tutor Group (if applicable):					
Date: Time of inc	ident:	Fir	st Aider A	ttending:		····•
Give a brief description of the	cause of	injury (ho	w, where,	what)		
	Time: As soon as possible after your arrival with the student				Time: Approx. 30 mins after first assessment if student is still with you	
	Yes	No	Yes	No	Yes	No
Recent blow to head?						
Headache?						
Impaired / loss of consciousness?						
Dizziness?						
Memory loss?						
Confusion?						
Do the pupils constrict (grow smaller) when introduced to light source? Look out for irregular eye movements / unequal pupil size						
Poor responses?						
Slow, noisy breathing?						
Change in emotional state?						
Weakness on one side?						
Drowsiness?						
Vomiting?						
Wound / bruise to head?						
Soft area / dip in scalp?						
Nose / ear fluid leak?						
Distortion of head / face?						
Finger-nose-finger test?						
Signature of first aider						

All first aiders are expected to have their radios on when they are at work, acknowledging that there will be times when staff in student facing roles will be unavailable. It is expected that any first aid trained staff will respond. Following a first aid call please acknowledge via the radio that you have responded and are dealing with the incident so that everyone is aware.

We will monitor first aid activity and incident take-up by first aiders, to ensure that as much as possible, overall responsibility is suitably shared.

Appendix 2

Procedure

Where departments have a first aider (for example DT) students should be treated by that department's first aider. This will be communicated to all staff working in the department so the pressure on Student Services can be reduced and we do not have people trained who never do first aid. A simple information guide will be made available to staff.

Students with minor injuries or conditions to be sent to Student Services, as is our normal procedure (example need a plaster or headaches etc). This is because records for permissions and contacting parents need to be done from here.

All First Aiders issued with Radios set on channel 6, the exception is Facilities who will be on channel 3 as it is not practicable for them to carry 2 radios.

A new First Aid poster to be produced, with photos and locations of first aiders during the day and displayed at first aid box locations. Reprographics will assist Jayne Ryan in producing the posters. Instructions on how to call for an emergency response first aider to be included on the poster.

These instructions will be added to visitor and contractor information sheet issued on arrival by reception.

Appendix 3 - First aid box location list

Box No:	Box Location:		
1	Editha Staff Room		
2	Editha Science prep Room		
3	Goodere Facilities Managers Office		
4	Goodere School Kitchen		
5	Inigo Office		
6	Drayton Ground Floor Workroom		
7	Nethersole Student Services		
8	Rosetti ICT Suite		
9	Facilities Workshop		
10	Editha Maths Workroom		
11	Editha Geography Workroom		
12	Medical Room (Reception)		
13	Bramcote 1st Floor Prep Room		
14	Bramcote Ground Floor Workshop		
	Emergency EPI PEN Locations		
7	Nethersole Student Services		
12	Medical Room (Reception)		

Appendix 4 - First aid needs assessment

First Aid Needs Assessment Form

New School term 2022/23

Manager	Jayne Ryan	Date Completed:	01/09/2022	
Responsible:				
Factor to consider	Guidance fo Provision		Notes: Assessment Recommendations	
Hazards (use the findings of your general risk assessment and take account of any parts of your workplace that have different work activities/hazards which may require different levels of first-aid provision)				
Does your workplace ha low-level hazards such a those that might be foun offices and shops? Does your workplace ha	s – an appointed in charge of firs – a suitably see You should co	ed person to take st-aid arrangements; stocked first-aid box. consider:	layne Ryan organising irst aid arrangements and first aid equipment to nclude additional PPE x first aider per 100	
higher-level hazards suc chemicals or dangerous machinery?	 providing a first-aiders to resulting fron providing a first-aid box; providing a equipment; precise loc equipment; 	dditional training for deal with injuries a special hazards; suitably stocked dditional first-aid ation of first-aid	approx.1550 onsite at any one time. First aiders onsite each day. First aid boxes fully stocked and checked on a termly basis. Additional stock kept in the main medical room and PPE	
	informing the services of services of services.	ne emergency pecific hazards etc in r r	vith Jayne Ryan in acilities office st aid room in use at eception for general nedical needs.	
Do your work activities involve special hazards sas hydrofluoric acid or confined spaces?	 additional t to deal with in special hazan additional f precise loce equipment; providing a informing the 	rst-aiders; raining for first-aiders njuries resulting from	N/A	
How many people are Where there are small numbers of First aid rota in place.				
How many people are employed on site?	employees, t provision is: – an appoint charge of firs	he minimum	First aid rota in place. 5x first aiders Average of 200 staff onsite per day.	

	1 100	T
	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 equipment; 	
	– a first-aid room.	
Are there inexperienced	You should consider:	Further first aid training in
workers on site, or	 additional training for first- 	the coming months.
employees with disabilities or	aiders;	o a constant of the constant o
particular health problems?	 additional first-aid equipment; 	
Participate Participate	 local siting of first-aid 	
	equipment.	
	Your first-aid provision should	
	cover any work experience	
	trainees.	
Accident and ill-health recor		
		All incidents are
What is your record of	Ensure your first-aid provision will	All incidents are
accidents and ill health?	cater for the type of injuries and	documented via SIMS
What injuries and illness	illness that have occurred in your	with description of
have occurred and where did	workplace. Monitor accidents and	injury/illness and course
they happen?	ill health and review your first-aid	of action.
	provision as appropriate.	
Working arrangements		
Do you have employees who	You should consider:	No staff will be working
travel a lot, work remotely or	 issuing personal first-aid kits; 	remotely or lone working.
work alone?	issuing personal	
	communicators/mobile phones to	
	employees.	
Do any of your employees	You should ensure there is	No staff will be working
work shifts or out-of-hours?	adequate first-aid provision at all	shifts or out of school
	times people are at work.	hours past 6pm.
Are the premises spread out,	You should consider the need for	There are Several
eg are there several	provision in each building or on	buildings within the site.
buildings on the site or multi-	each floor.	First aiders are available
floor buildings?		to attend each building
		should an incident occur,
		telephone or radio calls
		via channel 6 as per the
		first aid procedure.
Is your workplace remote	You should:	N/A
from emergency medical	- inform the emergency services	
services?	of your location;	
	consider special arrangements	
	with the emergency services;	
	consider emergency transport	
	requirements.	
Do any of your employees	You should make arrangements	Contractors working on
work at sites occupied by	with other site occupiers to ensure	the school field will have
other employers?	adequate provision of first aid. A	their own H&S
other employers:	written agreement between	
		procedures to follow,
	employers is strongly recommended.	therefore any Tomlinson first aids will be dealt with
	recommended.	via Tomlinsons first
		aiders and not school
Davis have a William	Very all and the	staff involvement.
Do you have sufficient	You should consider:	N/A
provision to cover absences	- what cover is needed for annual	
of first-aiders or appointed	leave and other planned	
persons?	absences;	

	 – what cover is needed for 		
	unplanned and exceptional		
	absences.		
Non-employees			
Do members of the public or non-employees visit your premises?	Under the Health and Safety (First-Aid) Regulations 1981, you have no legal duty to provide first aid for non-employees but HSE strongly recommends that you include them in your first-aid provision.	Yes, visitors onsite regularly. A separate first aid form is completed for staff and visitors and documents kept in the facilities office.	
First Aid requirements based on the above assessment of needs.			
I II St Ald Tequilellie IIts base	a on the above assessinent of need	13.	
Requirement	Numbers	Location	
Requirement	Numbers Minumum of 9 first aiders onsite at	Location	
Requirement First Aider	Numbers Minumum of 9 first aiders onsite at any one time	Location Various	
Requirement First Aider Appointed Person	Numbers Minumum of 9 first aiders onsite at any one time Jayne Ryan	Various Facilities	
Requirement First Aider Appointed Person First Aid Kits	Numbers Minumum of 9 first aiders onsite at any one time Jayne Ryan One in each building being used	Various Facilities All buildings Main reception and	
Requirement First Aider Appointed Person First Aid Kits	Numbers Minumum of 9 first aiders onsite at any one time Jayne Ryan One in each building being used	Various Facilities All buildings Main reception and	

Assessing Numbers of First-Aiders & Appointed Persons

The table below illustrates the minimum number of first-aiders or appointed persons in a workplace before any other factors identified in the "Assessment of needs" has been considered.

Category based on degree of Hazard associated with work activities	Number of Employees	Suggested Number of First Aid Personnel Required
Low Hazard e.g. Offices, shops, libraries	Fewer than 25	At least 1 appointed person
Community halls, arts	25-50	At least 1 EFAW ¹ trained first aider
	More than 50	At least 1 FAW ² trained first aider for every 100 employed (or part thereof)
Higher Hazard eg. Light engineering and	Fewer than 5	At least 1 appointed person
assembly work, food processing, warehousing, extensive work with dangerous machinery or	5-50	At least 1 EFAW or FAW trained first aider, depending on the type of injuries that may occur
sharp instruments, construction, chemical manufacture	More than 50	At least 1 FAW trained first aider for every 50 employed (or part thereof)
e.g. for SBC Construction sites, Swindon		

¹ EFAW – Emergency First Aid at Work

² FAW – First Aid at Work

Services main depot,	
Ice rink, Leisure	
centres, Care homes,	
hostels and car parks	

Guidance for the Size & Number of First Aid Kits

Category of Hazard	Number of Employees	Number & Size of Kit
Low Hazard - e.g. Shops,	< 25	1 Small Kit
offices, libraries	25-50	1 Medium Kit
	>50	1 Large Kit per 100 employees
High Hazard - e.g. Light engineering and assembly work, food processing,	<5	1 Small Kit
warehousing, extensive work with dangerous machinery or	5-25	1 Medium Kit
sharp instruments, construction, chemical manufacture, etc.	>25	1 Large Kit per 25 employees