



VLC EDUCATION
TRANSFORMING LIVES

FIRST AID POLICY

POLICY STATEMENT

VLC is conscious of its obligations under the Health and Safety (First Aid) Regulations 1981, and guidance from the Department for Education and Skills, the Education Service Advisory Committee and the Local Education Authority, to provide adequate and appropriate first aid facilities and personnel for members of staff, students and students and visitors. This policy seeks to ensure that VLC is a safe place for all staff, volunteers, visitors and students, and to outline the arrangements that VLC has in place regarding first aid.

This Policy Statement will be reviewed on a regular basis and where it is necessary the Policy Statement will be amended and, the amendments will be notified to all persons.

First aid provision must be available at all times while people are on VLC's premises.

PRINCIPLES AND PRACTICE OF FIRST AID

First aid is the skilled application of accepted principles of treatment on the occurrence of any injury or sudden illness, using facilities or materials available at the time. It is the approved method of treating a casualty until placed, if necessary, in the care of a doctor or removed to hospital. First aid treatment is given to a casualty to preserve life, to prevent the condition worsening and to promote recovery.

STUDENTS' HEALTH INFORMATION

Students' health issues, including behavioural issues, and existing medical conditions are requested when a student is referred to VLC, using our 'New Student Information Form' or EHCP or Learning Information Form (LIF). Agencies may choose to provide us with additional information regarding a students' health conditions should they so wish.

It is the policy of VLC to not reject any student. Furthermore, in accordance with the Equality Act 2010, VLC will not reject any student on the basis of a disability or medical condition. Instead SLT will ensure that appropriate risks are identified and mitigated against through verbal briefings and, if necessary, formal training.

TRAINED AND QUALIFIED FIRST AIDERS

Trained and qualified first aiders are those members of staff who have attended a course of training on first aid (eg. Emergency First Aid at Work) and have a valid current first aid certificate. It is the policy of VLC to have at least one trained first aider at each centre. VLC's training schedule means that all staff are trained biannually.

The duties of the trained and qualified first aiders are:

- to assess the situation where there is an injured or ill person;
- to give immediate, appropriate treatment bearing in mind that a casualty may have more than one injury and that some casualties will require more urgent attention;

- to arrange, without delay, for the casualty to be transported to a doctor, hospital or home, according to the seriousness of the condition. The first aiders responsibility ends when the casualty is handed to the care of the doctor, a nurse or other appropriate person. The first aider should not leave the incident scene until they have reported to whoever takes charge and have ascertained whether they could be of any further help;
- taking responsibility for the first aid room and its contents;
- completing the Accident Report Book.

In addition, the first aider is responsible for the management of the first aid container. This includes:

- ensuring that there is an adequate supply of all the prescribed materials in the first aid boxes and kits;
- that the contents of first aid boxes and kits are restocked after use;
- that items are not used after the expiry date which is shown on the packets; and
- that items are disposed of safely.

The treatment of minor illnesses such as the administration of tablets and/or medicines falls outside the definition of first aid. For this reason the treatment of minor illnesses does not form part of the training of a first aider and therefore first aiders must not administer tablets and/or medicines.

There are named first aiders on site at all centres at all times.

Any child who carries an Epi-pen must be accompanied by a member of staff trained in administering an Epi-pen.

FIRST AID EQUIPMENT AND PAIN RELIEF

The location of first aid boxes, travelling first aid kits and other supplementary equipment are as follows:

- St Margaret's Centre - main office
- Cubbington - office
- Shottery - office
- Harbour - office
- Arise - all staff carry a First Aid kit with them.

There is no mandatory list of items for a first-aid container. However, the HSE recommend that, where there is no special risk identified, a minimum provision of first-aid items would be:

- a leaflet giving general advice on first aid;
- 20 individually wrapped sterile adhesive dressings (assorted sizes);
- two sterile eye pads;
- four individually wrapped triangular bandages
- (preferably sterile);
- six safety pins;
- six medium sized (approximately 12cm x 12cm) individually wrapped sterile unmedicated wound dressings;
- two large (approximately 18cm x 18cm) sterile individually wrapped unmedicated wound dressings;
- one pair of disposable gloves.

Pain relief medication may be stored in the first-aid container. For example, this may include paracetamol, ibuprofen and/or throat sweets. However these will only be given when the first aider can

be sure that the individual taking them has not already taken the maximum level of pain relief. Any administration of pain relief will be recorded in VLC's Accident Report Book. The written record should include details of the need for the medication, the conversation which took place to confirm that no other medication had been taken, and the dose administered. A student's parent/carer will also be informed of any medication given.

HYGIENE AND INFECTION CONTROL

All staff should take precautions to avoid infections, and must follow basic hygiene procedures. Hand washing facilities are available in the toilets (male/female/staff) at each Centre. All members of staff have a responsibility to ensure that hands are cleaned before they administer first aid. Each first aid box will provide staff with access to single use gloves.

Special care will be taken when dealing with blood or other bodily fluids, and in the disposal of dressings and/or first aid equipment.

STUDENT MEDICATION

Medicines should only be given when it is necessary and essential to a child's health or school attendance. Medicines should not be given on an ongoing basis, unless prescribed by a doctor.

Medicine (both prescription and non-prescription medication) must only be administered to a child where written permission (Parental Administration of Medicine Form) for that particular medicine has been obtained from the child's parent or carer.

VLC will only accept prescribed medicines if these are in date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage. The exception to this is insulin, which must still be in date, but will be available to schools inside an insulin pen/pump, rather than in its original container.

Prescription medicines – will only be prescribed by a doctor with a recognised pharmacy label on the medication

Over the Counter Medicines – the medicine is in date, and staff will check how long the medication can be taken for on the label. Storage requirements will be checked. Staff will find out when child started to take the medication and ensure that medication is not given for longer than the prescribed number of days on the label. Should a parent/carer wish to give longer, they will require a prescription from the doctor to do so, and then the bottle will have a pharmacy label with instructions.

SELF-MANAGEMENT

Children who can take their own medicines themselves or manage procedures, will have the appropriate level of supervision.

If it is not appropriate for a child to self-manage, then staff will help to administer medicines and manage procedures for them.

If a child refuses to take medicine or carry out a necessary procedure, staff will not force them to do so, but follow procedures agreed in the individual healthcare plan. Parents will be informed so that alternative options can be considered.

VLC staff support and encourage children who are able to take responsibility to manage their own medication from an early age and this is encouraged. The age at which children are ready to take care of and be responsible for their own medicines varies.

STORAGE OF MEDICINES

All medicines will be stored safely in a locked container. Medicines should not be stored with food. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens should always be readily available to students and not locked away.

School staff may administer a controlled drug to a child for whom it has been prescribed. Staff administering medicines will do so in accordance with only the prescribers instructions and not the parent/carer instructions.

Record Keeping – every student who has medication given to them at VLC must have a form completed (Record of Administering Medication).

Disposal of Medicines

Where no longer required, medicines will be returned to the parent for safe disposal. Sharp boxes will be used for the disposal of needles and any other sharps.

CONTACT WITH THE AMBULANCE SERVICE

If an ambulance is required:

- dial 999;
- tell the operator that you want the Ambulance Service;
- wait for the Ambulance Service to answer;
- give the address where help is needed;
- give any other necessary information.

HEAD LICE

Transmission of lice within the classroom is relatively rare. Lice are only transmitted by direct, prolonged, head-to-head contact.

On seeing a living, moving louse, VLC will inform parents, and advise parents that treatments are available on prescription after a consultation with their GP. Students with head lice will not be prevented from attending VLC.

PHYSICAL/INTIMATE CONTACT

Teaching and learning can, generally speaking, occur without the need for staff/volunteers to have physical/intimate contact with students. Touch between staff/students must:

- have a clear and legitimate purpose;
- not involve more contact than is necessary;
- be explained to the student personally, in a straightforward and reassuring manner, so that the student is aware of the focus of the activity;
- cease immediately if the student appears distressed by or voices concern at the touch;
- where possible, accounting for staff availability and first aid training, be undertaken by persons of the same sex as the student;
- where possible, accounting for urgent needs and the safety of all students, be in the sight of another member of staff.

It is acknowledged that, as situations arise, it may be necessary for staff/volunteers to have physical contact with students in order to manage students' disabilities and/or injuries and to administer first aid. VLC will seek to ensure that such contact is made only when necessary, and that staff communicate with students as to the need for the contact.

In addition, it is noted that students' may have particular needs which require more regular physical and/or intimate contact in order to enable them to access their learning. For example, a student may require physical positioning, or intimate care for their health, comfort or dignity. VLC will make reasonable efforts to accommodate students' needs in this way. Students' needs will be discussed during the referral process, and a written procedure for the student will be drawn up. Following this, VLC's risk assessment will be duly updated.

Intimate personal care tasks can include:

- body bathing other than to arms, face and legs below the knee;
- toileting, wiping and care in the genital and anal areas;
- dressing and undressing;
- application of medical treatment, other than to arms, face and legs below the knee;
- supporting with the changing of sanitary protection.

Where incidences of physical/intimate contact has been made following an accident, injury or illness, this will be recorded in VLC's written record.

REPORTING

Under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR) some accidents must be reported to the Health and Safety Executive (HSE). As per statutory requirements, VLC will notify the HSE of fatal and major injuries, and dangerous occurrences without delay eg. by telephone. This includes accidents which occur during the course of VLC's activity and result in death or major injury and accidents which prevent the injured person from doing their normal work for more than three days this includes accidents which occur as a result of physical violence. This will be followed up within ten days with a written report on Form 2508.

Other reportable accidents, which do not require immediate notification, will be reported to the HSE within ten days on Form 2508.

VLC will keep a hard copy, written record of all accidents, injuries, diseases or dangerous occurrences. This will include a record of any first aid treatment administered by first aiders and appointed persons. The record should be completed using VLC's Accident Report Form include:

- the date, time and place of the incident;
- the name of the injured or ill person;
- details of the injury/illness and the first aid that was given;
- what happened to the person immediately afterwards (eg. went home, resumed normal duties, returned to learning, went to hospital);
- the name and signature of the first aider or person who dealt with the incident.

This record enables VLC to identify trends and possible areas for improvement in the control of health and safety risks, can be used for reference in future first aid needs assessments, and is helpful for insurance and investigative purposes.