

**ST. MARY'S
MENSTC**

First Aid Policy

Published: November 2024

Date of Review: November 2025

Our Purpose

We are a pilgrim school and we journey with Mary to become the person God intends us to be.

This policy was approved by the Chair of Governors on behalf of the Academy Council.

1. GENERAL STATEMENT

It is our policy to ensure that appropriate First Aid arrangements are in place for our staff, children and any visitors to our premises. This includes providing sufficiently trained employees for our

- 4.3 If the casualty does not need urgent medical treatment but an accident or illness is causing the casualty distress, the First Aider is unable to advise parents to seek medical treatment, nor can they advise that medical treatment is not required. Instead, the First Aider will suggest to the parent that 'they may wish to have the casualty assessed by a medical professional'.
- 4.4 Spillages of blood, vomit, urine and excrement should be cleaned up promptly using a body fluids disposal kit or similar. The area should immediately be cleared and cordoned off and cleaned up. Protective gloves must be worn and the waste be cleared appropriately.
- 4.5 The school will ensure that refresher training and retesting of competence is arranged for First Aiders within the school before certificates expire.
- 4.6 Where a student returns to school following an accident, internal or external to the school, a full risk assessment and Personal Evacuation Plan will be completed on the day of return (if required)
- 4.7 The school has procured an Automated External Defibrillator (AED). Its location is clearly sign posted and communicated to all staff.
- 4.8 Where the use of the AED is required, individuals will follow the step-by-step instructions displayed on the device. AED devices are in the following locations:
- First Aid room, located in Pupil Services
 - On the external wall of the building opposite the All-Weather Pitch, this is a coded defib C159X

All codes are communicated to staff members and existing and new hirers to the school

5.

6.1 The Headteacher along with the Site and Operations Manager will ensure that any injury or accident that must be reported to the Health and Safety Executive under RIDDOR obligations is reported as soon as is reasonably practicable and in any event within 10 days of the incident. Reportable injuries, diseases or dangerous occurrences include:

- Death of a person if it arose out of or in connection with a work activity, or 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)

Specified injuries are as follows:

- 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
-

8. STORING OF MEDICATION

- 8.1 Medicines will always be stored securely and appropriately in accordance with individual product instructions, save where individual pupils have been given responsibility for keeping such equipment with them.
- 8.2 All medicines will be stored in the original container in which they were dispensed, together with the prescriber's instructions for administration, and properly labelled, showing the name of the patient, the date of prescription and the date of expiry of the medicine.
- 8.3 At the end of the academic year all medication will be returned to parents for safe disposal. Any uncollected medication will be disposed of using appropriate channels.
- 8.4 An emergency supply of medication will be available for pupils with medical conditions that require regular medication or potentially lifesaving equipment, eg an epi/pen.
- 8.6 Parents will advise the school when a child has a chronic medical condition or severe allergy so that an Individual Healthcare Plan (IHP) can be implemented and staff can be trained to deal with any emergency in an appropriate way. Examples of this include epilepsy, diabetes and anaphylaxis. A disclaimer will be signed by the parents in this regard.

9 ILLNESS AND ALLERGIES

- 9.1 When a pupil becomes ill during the school day (eg they have been sick or repeatedly complain of feeling unwell), the parents will be contacted and asked to pick their child up as soon as possible.
- 9.2 A quiet area will be set aside for withdrawal and for pupils to rest while they wait for their parents to pick them up. Pupils will be monitored during this time.
- 9.3 Where a pupil has an allergy, this will be addressed via their IHP.

10 DEALING WITH VISITORS AND/OR CONTRACTORS

- 10.1 It is our policy to offer First Aid assistance to visitors/contractors to our premises. Should a visitoBT/F3 11.04 Tf1 0 0 1 55.56 309.65 Tm0 g0 ©]TET@MC /P £1 13 EMBT704 2450.00008871

provider and holds a valid First Aid certificate in accordance with current legal requirements. This means that any First Aider at Work will attend a three-day (18 hours) course, any Emergency First Aider at Work will attend a basic one-day (6 hours) course and any Paediatric First Aider at Work will attend a two-day (12 hours) course.

12 HEALTH EDUCATION SINCE SEPTEMBER 2020

- 12.1 The School teaches children about good physical and mental health, how to stay safe on, and offline, and the importance of healthy relationships.
- 12.2 Pupils are taught about First Aid in the Summer Term of year 7. The topic is revisited and developed in age-appropriate detail in the Autumn Term of year 11. The topics of mental and physical health are taught throughout KS3, 4 and 5 PDT lessons, and via form tutors during whole school initiatives like "Hello Yellow Day" in October. Through KS3, 4 and 5, in an age-appropriate way, PDT lessons teach about healthy and unhealthy relationships, including friendship, marriage and sexual relationships, including online. Pupils are also taught about consent and illegal behaviours. In addition to covering the content of on and off-line safety in PDT lessons, Computing lessons also teach pupils about how to stay safe online.

Appendix B – Report of an Accident or Dangerous

Appendix C – Report of an Accident or Dangerous Occurrence – Staff

ST MARY'S CATHOLIC ACADEMY

ACCOUNT OF INCIDENT
(Include details of the body affected, add extra page if necessary)

WITNESS NAME(S)
(Include contact details if appropriate)

CHALLENGE (if incident reported or advice given)	YES	NO
CALLED?	YES	NO

ST MARY'S CATHOLIC ACADEMY
Boulford Road, Manton, West Yorkshire LS29 6AE
T: 01943 833000
E: admin@stmarysmanton.org
www.stmarysmanton.org
Headteacher: Mrs Margaret Holfordley

Who is undertaking the further investigation?

What is the outcome of the investigation?

returned form to Z. Fisher (H&S)

Agreed by: Leadteacher

As an academy RIDDOR (the reporting of injuries, diseases and dangerous occurrences to HSE) must be undertaken by the H&S responsible person.


Death at work or accidents involving occupational injuries leading to absence from work must be reported to HSE. Serious injuries or fatalities must be telephoned through within 24 hours. Other reportable injuries must be reported within 15 days.

The HSE specified injuries are:

- Fractures (not fingers or toes)
- Amputation
- Permanent or reduced loss of sight
- Crush injury damaging the brain or internal organs
- Burns over 10% of the body
- Head injury or loss of consciousness
- Any other injury resulting in admission to hospital for over 24 hours
- Violent incident – for example a pupil attacking a member of staff

Appendix D – Head Bump Form

HEAD BUMP FORM



ST.M
MEN

Ent Date

HEAD BUMP

rears head bump to the head at (time) which we treated

Barcode

examination

on

Tools:

- At 14 weeks gestation in the event of a severe personal trauma
- At 15 weeks gestation
- At 16 weeks gestation
- At 17 weeks gestation
- At 18 weeks gestation
- At 19 weeks gestation
- At 20 weeks gestation
- At 21 weeks gestation
- At 22 weeks gestation
- At 23 weeks gestation
- At 24 weeks gestation
- At 25 weeks gestation
- At 26 weeks gestation
- At 27 weeks gestation
- At 28 weeks gestation
- At 29 weeks gestation
- At 30 weeks gestation
- At 31 weeks gestation
- At 32 weeks gestation
- At 33 weeks gestation
- At 34 weeks gestation
- At 35 weeks gestation
- At 36 weeks gestation
- At 37 weeks gestation
- At 38 weeks gestation
- At 39 weeks gestation
- At 40 weeks gestation

G3

ch was cleaned and a cool compress and a pad brought and the gaze re-checked

Suffered a laceration to their which dressing were applied. We advise the dressing to be removed

Description of incident/injury:

free. Call 111 and speak to a highly trained adviser and immediately direct you to the best course of action.

111 is the NHS non-emergency number. It's fast, easy and supported by healthcare professionals. This will ask you a series of questions to assess your symptoms and direct you to the best course of action.

111 is available 24 hours a day, 7 days a week. You can reach 111 by phone, online or through an app. You should have quick access to 111 through your TV or on your mobile phone.

111 is available 24 hours a day, 7 days a week. You can reach 111 by phone, online or through an app. You should have quick access to 111 through your TV or on your mobile phone.

111 is available 24 hours a day, 7 days a week. You can reach 111 by phone, online or through an app. You should have quick access to 111 through your TV or on your mobile phone.