

Document Control Sheet

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The British Embassy School Ankara

First Aid Policy

POLICY STATEMENT

The BESA is committed to providing adequate first aid provision in order to deal with accidents and incidents affecting employees, children and visitors. The arrangements within this policy are based on the results of a suitable and sufficient risk assessment carried out by the School in regards to all staff, pupils and visitors. The School will take every reasonable precaution to ensure the safety and wellbeing of all staff and pupils.

BESA will ensure that appropriate first aid arrangements are in place for our children, staff and any visitors to our premises. This includes providing sufficiently trained employees for our needs and maintaining an adequate supply of first aid equipment.

It also involves providing enough information to staff to enable first aid assistance to be sought during normal school hours. Our school will also ensure that adequate provision is made for activities undertaken outside school hours and on trips outside of the premises.

The policy for first aid is based on the Dept for Education and Skills 'Guidance for First Aid in Schools' and although not subject to UK health and safety law, BESA will endeavour to maintain at least the minimum requirements of this legislation. This policy should be read in conjunction with the "Health and Safety Policy".

1 RESPONSIBILITY

1.1 According to the DfEE, in its document "Guidance on First Aid for Schools", the employer is responsible for the health and safety of their employees and "anyone else on the premises".

1.2 The Headteacher of the School, or in her absence the Deputy, has ultimate responsibility for Health and Safety at school. It follows therefore that he/she must, with the support of other professionals, ensure that:

- The school environment is safe; that a Health and Safety Policy is in place
- Guidelines and rules promoting safety are adhered to, and
- All staff in the school have an adequate awareness and knowledge of health and safety issues.

1.3 First Aid at BESA is administered by the School Nurse or designated First Aider in the absence of the afore mentioned individual (teachers or other staff, who have undertaken a current practical training in First Aid).

1.4 Unless they hold a recognised and valid first aid certificate, the secretary and other staff are *appointed persons* (see guideline in 'Guidance on First Aid for Schools' DfEE for definition; 'an appointed person is someone who takes charge when someone is injured or taken ill') and are therefore expected ONLY to give first aid treatment for which they have been trained/ to administer. Teacher's conditions of employment do not include giving first aid, although any member of staff may volunteer to undertake these tasks. Teachers and other staff in charge of pupils are expected to use their best endeavours at all times, particularly in emergencies, to secure the welfare of the pupils at the school in the same way parents might be expected to act towards their children. In general, the consequences of taking no action are likely to be more serious than those of trying to assist in an emergency.

2 PROVISION

2.1 How many First-Aiders are required?

a) An appointed person is the minimum UK legal requirement but each organisation must assess needs for additional provision based on a risk assessment.

At BESA, account should be taken of the fact that all first-aiders may not be in the school at the same time (due to sickness, residential trips, nurse not being on-site etc) and because of this, first-aid training should be given to more than the minimum recommended number of people to ensure adequate coverage at all times.

b) Schools such as BESA with early year provisions should follow Early Years Foundation Stage guidance and ensure that there is always at least one person on the premises (and on outings) who has a 12-hour Paediatric First Aid certificate.

2.2 A First-Aider will have undergone specific training according to guidance set out by the Health and Safety Commission. The nurse is primarily responsible for administering first aid and updating other staff. They will hold and maintain an accredited first aid qualification. There are in 2018 at least 20 staff with a current accredited 12 hour Paediatric First Aid Training

3 IMMEDIATE ACTION WHEN DEALING WITH AN INCIDENT

3.1 First Aiders and others are taught the following steps in dealing with any emergency:

1 DANGER: Assess the situation, protect yourself, others and the casualty from danger and try to make the area safe without attempting to do more than is reasonable Go to Step 2

2 RESPONSE: Check the casualty for a response. If responsive give aid or summon help from first aider. If not responding Step 3

3. AIRWAY: Check and ensure the airway is open. Go to Step 4

4. BREATHING. Check for breathing, If breathing, put in recovery position if appropriate or stay with casualty and give or summon help. If not breathing ensure an ambulance is summoned and they are told the casualty is not breathing. A staff member should immediately bring the defibrillator to the scene if anyone present is trained to use it. Go to Step 5

5. CPR. Nurse/First aider or in their absence anyone with training should start CPR and- if trained- defibrillation until professional help arrives

Prioritise most severe injuries first if multiple casualties

Contact parent and Headteacher if the incident is serious

Ensure there is a written record of the incident

Please refer to Emergency Health care numbers chart which is in the nurse's office, staff room and Hall.

4 PRACTICAL STEPS IN THE SCHOOL SITUATION

4.1 The Teacher or lunch monitor is usually the first person to be involved in managing an accident or sudden illness. He/she must therefore carry out at least steps 1 and 2 above himself.. The School Nurse/First Aider will decide (depending on the nature and the severity of the problem) whether the casualty should be moved. Much of this is common sense; a basic knowledge of safety and First Aid is also required.

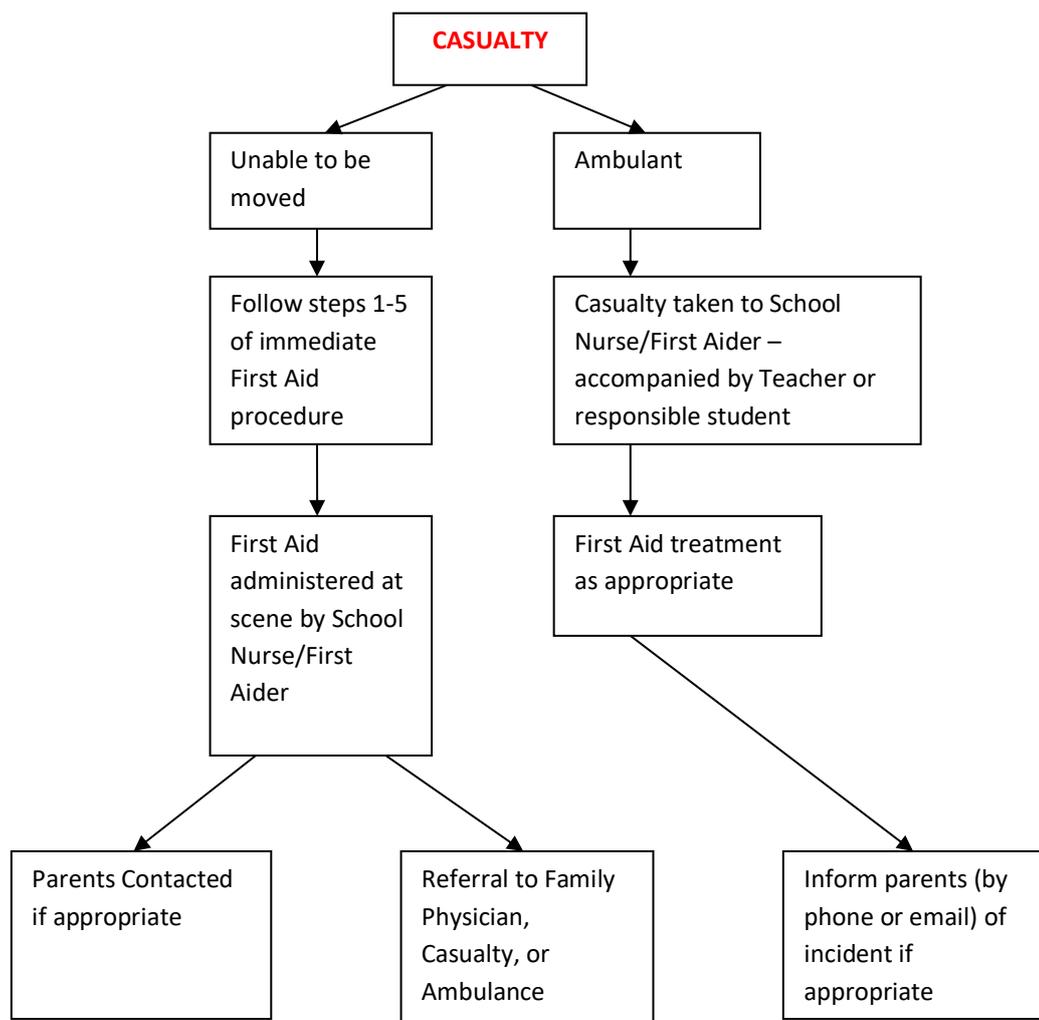
4.2 The teacher also has responsibility for the rest of the class, so will, if necessary, send or take the casualty to the Nurse's room where First Aid help is available. In the case of minor aches and pains or minor injuries a student feeling unwell may be accompanied by another student to visit the School Nurse.

4.3 The accompanying student should return to class as soon as the casualty has been handed over to a responsible adult. However, any pupil with an underlying serious health issue or allergy and whose photo is displayed on the 'severe allergy/medical issues notice should be accompanied by an adult unless there is a very minor injury without illness. Alternatively, the School Nurse /First Aider can be summoned to the scene of an incident. In this case the teacher should stay with the casualty and send a responsible student or adult for help. 4.4 First Aid treatment is given either where the casualty has been injured or in the Nurse's room. Continuing care is given if necessary either at school or by sending the casualty home or to hospital. The School Nurse/First Aider and/or Headteacher decide whether the casualty needs to be transported by car, taxi or ambulance. In the event of a less serious injury that requires physician follow-up or examination, it is the parents responsibility to transport an injured pupil if a visit to the Casualty department or doctor for evaluation is deemed necessary.

4.5 Due to the incidence of serious tick borne disease potential in Turkey, ticks should only be removed in school after checking whether this is the parents wish (which should be stated in writing also) and it should be undertaken only if the nurse or first aider is confident to do so.

4.6 First Aid kits and an appropriately trained member of staff is to be provided for all activities outside of school, which will be subject to a risk assessment as per relevant policy

Section 5 PROCEDURE FOR ACCIDENTS AT SCHOOL



MINOR ACCIDENTS

5.1 Minor accidents will be treated by the following staff in order of preference as follows:

- a) School Nurse
- b) Other staff with certified First Aid training.
- c) School Secretary/Other staff with previous First-Aid Training/Lunchtime Supervisor.

5.2 All staff dealing with injuries should have some first aid knowledge / training and be updated according to their qualification requirements by the nurse. Staff without sufficient knowledge should ensure they request the assistance of those who do and only take action as far as their own knowledge permits.

5.3 It is essential that any first aid treatment given is recorded on School Base with a log of the name, nature of problem, time, and treatment given. Normally, this will be done by the school nurse but other staff members may leave a written hard copy record for the nurse or secretary to enter if they have dealt with the incident

5.4 Due to the incidence of serious tick borne disease potential in Turkey, ticks should only be removed in school after checking whether this is the parents wish (which should be stated in writing also) and it should be undertaken only if the nurse or first aider is confident to do so.

SERIOUS/SEVERE ACCIDENTS/EMERGENCY PROCEDURE

5.4 The Headteacher or Deputy must be informed, via the Secretary or office staff, as soon as possible in the event of a serious incident. When a student is involved, the parents are also informed by telephone. If the parents cannot be contacted immediately the Headteacher, deputy or nurse must act “in loco parentis”.

5.5 If a child has a special medical need and his/her parents want the school to treat/act on a specific manner, they are responsible for providing the school with the relevant medical protocol (symptoms, actions to be taken, provide specific medications and required forms (see ‘Medication in School Policy’)) In its absence and in an emergency situation, the school nurse and the Head Teacher will decide the best course of action with the information at hand. Parents will be advised immediately by the school nurse whether additional care, evaluation, consultation with a doctor or transportation to hospital is advisable

5.6 In a serious emergency, a casualty would be taken to the nearest Casualty department appropriate to their requirements. This decision will be made by the ambulance service but the School Nurse or Headteacher may advise/request a particular hospital such as Guven private hospital if there is an arrangement on an individual Care Plan or if the parent has already agreed to fund this.

5.7 Depending on the decision made by parents and the nurse, the following courses of action may be taken:

- a) Local doctor contacted - child taken .
- b) Child taken to hospital, accompanied by nurse or staff member who speaks Turkish if they are not native speakers.
- c) . If the parent is planning to drive alone, an assessment of whether they are too distressed to do this safely and should take a taxi.

5.8 Any child with suspected back or neck injuries should only be moved under professional supervision or if the situation is life threatening. If specialist transportation is required, an ambulance should be called for this purpose

- a) Under professional supervision by medical personnel present on the scene
- b) If the situation is life threatening (for example, blocked airway)

5.9 A record of all serious accidents (that is, any accident that is deemed severe enough to inform/summon the parent by telephone during the day) must be made on the electronic incident log on Google Drive and this will normally be done by the school nurse. Staff witnessing the accident may be asked to complete in addition to the person treating the injury if different. In the school nurse absence, it is the responsibility of the staff dealing with the incident to ensure this information is recorded.

Whenever possible, the school nurse or a member of staff with paediatric First Aid training will deal with body spillages. However, all staff should be made aware by an annual training programme (at the beginning of the school year) of the need for infection control with correct disposal of infectious materials

and the wearing of gloves when handling such material or body fluids (see guidelines for dealing with spillage of bodily fluids under Infection Control Policy).

6 Staff First Aid

6.1 The above principles also apply to any staff accident or incident. However, a log of any incident and treatment should be kept in a hard copy book which is located in the nurse room and/or if necessary in the staff medical file.

6.2 Staff emergency contact numbers will be referred to when emergency services or hospital treatment is needed.

6.3 Staff living alone should not be sent home alone if they have significant accident/illness that means they are likely to need to attend the casualty department. They should be accompanied by someone, a relative or other Turkish speaker and a follow up enquiry about their welfare should be made..

Quantity , Contents and Location of First Aid Kits/Defibrillator

The quantity and Contents of kits may be modified according to need but the following are considered a minimum requirement for BESA

Defibrillator:

This is kept clearly visible in the Nurse room hanging on the far wall along with a face mask. It contains a set of both adult and paediatric pads. The nurse is responsible for checking and recording this is working on a monthly basis.

An emergency services list is kept in the medical/nurse room and other strategic places, such as staff room and Hall and by First Aid containers.

As a minimum, employers are required to provide a fully stocked first aid container on each site. (Reference to Guidance on First Aid for Schools, DfEE)

There are First Aid kits located around the school in the following locations:

- Stocks and supplies in draws and cupboards of Nurse's room
- Other areas with at least a minimum provision of supplies:
 - Hall
 - Cooking Room
 - Green Pitch
 - Science room
 - Library
- Gate at School entrance (this one is stocked and maintained by the Embassy personnel)
- First aid kits conforming to Turkish required standards are in place on school service buses. The school bus company is responsible for stocking and updating their contents.

First Aid Bags for Residential and Day Trips (located in cupboard in nurse's office)

- X2 Large Rucksacks for Residential Trips

- X2 Black Rucksacks and/or 2 small Green Bags for Day Trips

Residential Trip First Aid Kit Contents:

Front Pocket:

Gloves, vomit bags, wet-wipes, tissues, ,

2nd (middle) Pocket

Notepad and pencil, CPR face mask, bag with plasters and dressings with tape, wipes, eye pad and thermometer, bottle water as eye wash

Mosquito repellent – as needed

3rd Main Pocket

First Aid Manual, 2 disposable ice packs, rescue blanket, plastic box with scissors, tweezers, tick twister if rural activity, spoons, pack of sanitary pads

Bag of Bandages: 2 crepe, , 3 triangular, 2 stretch

Bag of dressings: 2 sterile eye pads, 1 blister kit, 1 sterile burn plaster 4.5x6.5cm, , 1 large bloodstopper, 1 small bloodstopper, Medicines (kept in drug cupboard): 1 bottle Calpol, 1 pack Zyrtec, 1 tube antihistamine cream (Fenistil), 1 box paracetamol, sunscreen

Black Rucksack Minimum Contents for Day Trips:

Front Pocket

3 pairs disposable gloves, tissues, 5 vomit bags, wet wipes notepad and pencil

Main Pocket

First aid leaflet, CPR face mask, 12 plasters, 2 triangular bandages, 2 sterile dressings, 5 individually wrapped wound cleaning wipes, 2 sterile eye patches

First Aid in an Emergency booklet

Back Pocket

Bottle of water/eyewash, sunscreen, (check expiry of suntan lotion)

Ice packs (single disposable) x2

Minimum Supplies for small first aid kits in school areas and for short trips

Vomit bags and wipes

CPR face mask

Individually wrapped plasters

Eyewash pod/bottle

Eye pad

Triangular bandage

Dressings

Disposable gloves

Notepad and pencil

References:

1. First Aid at Work. The Health and Safety (First Aid) Regulations 1981
2. Update on the review of the Health and Safety (First Aid) Regulations 1981
www.hse.gov.uk/firstaid/review/dec05.htm
3. Guidance of First Aid for Schools DfEE 2000 revised 2014
4. First Aid at Work; Your Questions Answered <http://www.hse.gov.uk/pubns/indg214.pdf>

