



HAMPTON ACADEMIES TRUST FIRST AID POLICY

Trust First Aid policy is applicable to all schools within the Trust. Each school is responsible for creating procedures that achieve the objectives set out within this policy.

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Rationale

Hampton Academies Trust recognises that its responsibility for the safety and welfare of all students and staff is paramount.

Hampton Academies Trust will conform to all statutory requirements and recognises and accepts its responsibility as an employer for providing so far as reasonably practicable, a safe and healthy work place and working environment, both physically and psychologically, for all employees, volunteers and other workers.

Staff and students will be informed of First Aid arrangements during their induction and kept updated, as appropriate, in bulletins or staff briefings.

First aid must be provided to any person that we owe a duty of care if they are injured or become ill while on our premises or involved in an off-site activity. There must be sufficient suitably qualified first aiders and adequate first aid facilities to ensure that assistance will be provided quickly to casualties and a call made to the emergency services when appropriate.

Contractors who work on site must provide their own first aid. The Board of Trustees will ensure that the insurance arrangements provide full cover for claims arising from actions of staff acting within the scope of their employment.

To ensure that there are adequate and appropriate equipment and facilities for providing first-aid in the workplace.

Legislation and Guidance

This policy is based on the [Statutory Framework for the Early Years Foundation Stage](#), advice from the Department for Education on [first aid in schools](#) and [health and safety in schools](#), and the following legislation:

- [The Health and Safety \(First Aid\) Regulations 1981](#), which state that employers must provide adequate and appropriate equipment and facilities to enable first aid to be administered to employees, and qualified first aid personnel
- [The Management of Health and Safety at Work Regulations 1992](#), which require employers to make an assessment of the risks to the health and safety of their employees
- [The Management of Health and Safety at Work Regulations 1999](#), which require employers to carry out risk assessments, make arrangements to implement necessary measures, and arrange for appropriate information and training
- [The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations \(RIDDOR\) 2013](#), which state that some accidents must be reported to the Health and Safety Executive (HSE), and set out the timeframe for this and how long records of such accidents must be kept
- [Social Security \(Claims and Payments\) Regulations 1979](#), which set out rules on the retention of accident records
- [The Education \(Independent School Standards\) Regulations 2014](#), which require that suitable space is provided to cater for the medical and therapy needs of pupils

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Roles and Responsibilities

The Board of Trustees

The Board of Trustees has overall responsibility for ensuring compliance with this First Aid Policy. In consultation with the Executive Headteacher and Local Governing Body, the Trustees shall ensure that there are effective and enforceable arrangements for the provision of first aid throughout the Schools, periodically assessing the effectiveness of this document and ensuring that any necessary revisions are made. The Board of Trustees delegates operational matters and day-to-day tasks to the Heads of School and staff members.

Health and Safety legislation places duty on employers for the health and safety of their employees and anyone else on the premises. Within Hampton Academies Trust, this includes responsibility for all teaching staff, support staff, students and visitors (including contractors).

Heads of School

The Heads of School are responsible for the implementation of this policy, including:

- Ensuring that an appropriate number of first aiders are present in the school at all time, ensuring that they have an appropriate qualification, keep training up to date and remain competent to perform their role
- Ensuring all staff are aware of first aid procedures
- Ensuring appropriate risk assessments are completed and appropriate measures are put in place
- Ensuring that adequate space is available for catering to the medical needs of pupils
- Reporting specified incidents to the HSE when necessary

Staff

Teachers' 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 students are expected to use their best endeavours at all times, particularly in emergencies, to secure the welfare of the students at the School in the same way that 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 trying to assist in an emergency.

Adequate and appropriate training and guidance for staff who volunteer to be first aiders/appointed persons. There will be enough trained staff to meet the statutory requirements and assessed needs, allowing for staff on annual/sick leave or off-site. First aiders must complete a training course approved by the Health and Safety Executive (HSE) and ensure they receive refresher training every three years.

All staff are alert to behaviour and situations that could cause harm and will take action to prevent this. Any damage to the building that could be dangerous should be reported to a member of the Site Team.

All teaching staff are responsible for any defects in the equipment or damage to their classrooms should report such to the Site Team.

Staff responsible for leading curriculum areas are responsible for the preparation of risk assessments for their areas. The school will use CLEAPSS guidelines when drawing up risk assessments for Science, Design Technology and other specialist subject teaching areas.

www.cleapss.org.uk/

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All staff will be given a written list of students with pre-existing or known medical conditions with details of their needs and what to do in an emergency. It is the responsibility of all staff to make themselves familiar with the needs of students they teach, or oversee, both inside and outside of the classroom. An appropriate number of staff will receive training to meet the needs of students with specific medical requirements.

Staff are responsible for ensuring that they know who the first aiders are and that they follow first aid procedures. When an accident occurs within their lesson or area, they should ensure that the relevant paperwork is completed.

Parents

Parents have the prime responsibility for their child's health and should provide the school with information relating to their child's medical condition. They should ensure that medication stored by the school is in date.

Lead First Aider

The lead first aider is responsible for keeping a record of all first-aid related incidents that occur within the School. They keep a central record of all first-aid treatment given by a first aider. They are responsible for checking the first-aid containers are stocked and re-stocked as necessary. They are also responsible for ensuring the medical room is kept hygienically clean and has all the equipment and facilities required. Parents of children with known medical conditions are to give their consent to the School's Lead First Aider for drugs to be administered, if necessary. This includes allowing use of epi-pens and inhalers stored by the school. The forms for parents to give that consent are in Appendix A.

First Aiders

First Aiders must complete a training course approved by the Health and Safety Executive (HSE). The main duties are to:

- Give immediate help to casualties with common injuries or illness and those arising from specific hazards at the school. Including recommending that a student is sent home to recover.
- When necessary, ensure that an ambulance or other professional medical help is called.
- Enter details of injuries and treatment outcome on the appropriate record.
- Administer medication and keep appropriate records.
- Take charge when someone is injured or becomes ill.
- When necessary, complete an accident report on the same day, or as soon as is reasonably practicable, after an incident.
- Recognise and respond to the emergency needs of students with chronic medical conditions, the most common ones being asthma, diabetes, epilepsy and severe allergic reaction.

All staff are able to request an ambulance or other professional medical help. Examples where an ambulance would be called would include:-

- chest pain
- difficulty in breathing
- unconsciousness
- severe loss of blood

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- severe burns or scalds
- choking
- fitting or concussion
- drowning
- severe allergic reactions
- suspected broken bones

Appointed persons

An appointed person is someone who:

- takes charge when someone is injured or becomes ill
- looks after the first aid equipment e.g. restocking the first aid container
- ensures that an ambulance or other professional medical help is summoned when appropriate.

Appointed persons are not necessarily first aiders. They should not give first aid treatment for which they have not been trained. However, it is good practice to ensure that appointed persons have emergency first aid training/refresher training, as appropriate.

These courses do don't require HSE approval. They normally last four hours and cover the following topics:

- What to do in an emergency
- Cardiopulmonary resuscitation
- First aid for the unconscious casualty
- First aid for the wounded or bleeding.

Emergency first-aid training should help an appointed person cope with an emergency and improve their competence and confidence.

First Aid Procedures

In school procedures

In the case of illness:

- If a student seeks medical support, the member of staff in charge of the student will note the request and send them to the nearest appropriate location.
- If someone is taken ill and cannot be moved, the first member of staff on the scene will summon help from a First aider.

In the case of an accident or injury at school:

- The injured party should be seen by a qualified First aider
- Parents or next of kin will be contacted, where this is deemed appropriate. This includes all primary aged students and all but the most minor injuries. Parents are always contacted if a student receives a bump to the head.
- If the injuries cannot be treated at the school, arrangements will be made to transport to hospital. A member of staff will accompany the student if a parent is unable to be there.
- All witnesses must make a statement to help clarify the cause of the injury.

The First aider will keep a record of any treatment given. This includes:

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- The date, time and place of the incident
- The name (and class) of the injured or ill person
- Details of the injury/illness and what first aid was given
- What happened to the person immediately afterwards (e.g. went home, resumed normal duties, went back to class, went to hospital)
- Name of the First aider.
- Who notified the parent and whether this was by letter, phone, email or in person.
- Serious accidents affecting employees, students or visitors must be reported to the HSE on Form 2508. (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR))

Offsite Procedures

When taking pupils off the school premises, staff will ensure they always have the following:

- A school mobile phone
- A portable first aid kit
- Information about the specific medical needs of pupils
- Parents' contact details

Risk assessments will be completed by the trip leader prior to any educational visit that necessitates taking pupils off school premises.

For Primary Phase trips, there will always be at least one first aider with a current paediatric first aid certificate on school trips and visits. This is a statutory requirement for Early Years Foundation Stage.

For Secondary Phase trips, a member of staff may assume the role of an Appointed Person if there is no First aider on the trip. The Appointed person will:

- Takes charge when someone is injured or becomes ill
- Looks after the first aid equipment e.g. restocking the first aid container
- Ensures that an ambulance or other professional medical help is summoned when appropriate.

Prescribed Medicines

Medicines should only be taken to the School when essential; that is where it would be detrimental to a child's health if the medicine were not administered during the School day.

The School should only accept medicines that have prescribed by a doctor, dentist, nurse prescriber or pharmacist prescriber. Medicines should always be provided in original container as dispensed by pharmacist and include prescribers instructions for administration.

The School should never accept medicines that have been taken out of the container as originally dispensed nor make any changes to dosages on parental instructions.

It is helpful, where clinically appropriate, if medicines are prescribed in dose frequencies which enable it to be taken outside School hours. Parents could be encouraged to ask the prescriber about this.

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Non-Prescribed Medicines

Staff should **NEVER** give non-prescribed medicine to a child unless there is specific prior written permission from the parents.

A child under 16 should never be given aspirin or medicines contained ibuprofen unless prescribed by a doctor.

Controlled Drugs

All controlled drugs are to be kept locked in a non-portable container and only named staff should have access

Children with Special Medical Conditions

The School should be aware of children who have allergies or that require any special medical attention.

Refusing Medicine

If a child refuses to take medicine, staff should not force them to do so but should note this in the records and follow agreed procedures.

Hygiene Control

All staff should take precautions to avoid infection and must follow basic hygiene procedures. Staff have access to single-use disposable gloves and hand-washing facilities, and should take care when dealing with blood or other bodily fluids and disposing of dressings or equipment.

First Aid Materials, Equipment and Facilities

Hampton Academies trust will provide the proper materials, equipment and facilities at all times. First-aid equipment must be clearly labelled and easily accessible.

Hampton Academies Trust will provide at least on fully stocked first-aid container for each site. The assessment of a School first-aid needs should include the number of first-aid containers. Additional first-aid containers will be needed for spilt sites/levels, distant sports fields or playgrounds, any other high risk areas and offsite activities.

All first-aid containers must be marked with a white cross on a green background.

The siting of first-aid boxes is a crucial element in the School's policy and should be given careful consideration. If possible, first-aid containers should be kept near to hand washing facilities.

Contents of First Aid Containers

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 (see list of publications in Annex A)
- 20 individually wrapped sterile adhesive dressings (assorted sizes)
- Two sterile eye pads

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- Four individually wrapped triangular bandages (preferably sterile)
- Six safety pins
- Six medium size (approx. 12cm x 12cm) individually wrapped sterile medicated wound dressings
- Two large (approx. 18cm x 18cm) sterile individually wrapped undedicated wound dressings
- One pair of disposable gloves.

Equivalent or additional items are acceptable.

No Medication is kept in first aid containers.

The medical assistant is the person responsible for examining the contents of first-aid containers. These should be checked frequently and restocked as soon as possible after use. There should be extra stock in the School. Items should be discarded safely after the expiry date has passed.

Travelling First Aid Container

Before undertaking any off-site activities, the Heads of School should assess what of first-aid provision is needed. The HSE recommend that, where there is no special risk identified a minimum stock of first-aid items for travelling first-aid containers is:

- A leaflet giving general advice on first aid. See list of publications in Annex A
- Six individually wrapped sterile adhesive dressing
- One large sterile un-medicated wound dressing -approx. 18cm x 18cm
- Two triangular bandages
- Two safety pins
- Individually wrapped moist cleansing wipes
- One pair of disposable gloves

Equivalent or additional items are acceptable.

Additional items may be necessary for specialised activities for instance eye wash in Science labs.

Public Service Vehicles

Transport regulations require that all minibuses and public service vehicles used either as an express carriage or contract carriage have on a board a first-aid container with the following items:

- Ten antiseptic wipes, foil packaged
- One conforming disposable bandage (not less than 7.5cms wide)
- Two triangular bandages
- One packet of 24 assorted adhesive dressings
- Three large sterile un-medicated ambulance dressing (not less than 15cm x 20 cm)
- Two sterile eye pads, with attachments
- Two assorted safety pins
- One pair of rustles blunt ended scissors.

The first-aid container shall be:

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- Maintained in a good condition
- Suitable for the purpose of keeping the items referred to above in good condition
- Readily available for us; and
- Prominently marked as a first-aid container

First Aid Accommodation

Hampton Academies Trust will provide suitable and sufficient accommodation for first aid according to the assessment of the first-aid needs identified. The Education (School Premises) Regulations 1996 require the School to have a suitable room that can be used for medical or dental treatment when required and for the care of students during School hours. The area, which must contain a wash basin and be reasonably near to a WC, need not be used solely for medical purposes, but it should be appropriate for that purpose and readily available for use when needed.

Reporting and Record Keeping

Reporting of accidents and injury

Parents will be notified of ANY accident or injury that occurs to their child at school or whilst on a school led activity. Where any head injury has been received, the parent(s) will be notified by telephone.

HSE must be notified of fatal and major injuries and dangerous occurrences without delay (by telephone). This must be followed up within 15 days with a written report on Form 2508. Form 2508 can be downloaded from HSE website: www.hse.gov.uk

Other reportable accidents do not need immediate notification, but they must be reported to HSE within 15 days on Form 2508.

Reporting to the HSE

The Estates Manager will keep a record of any reportable injury, disease or dangerous occurrence. This must include: the date and method of the reporting, the time and place of the event; personal details of those involved and a brief description of the nature of the event or disease. This record can be combined with other accident records. The medical assistant keeps a record of such occurrences.

Accidents to employees the School needs to Report. The following incidents must be reported to the HSE if they injure either the School's employees during an activity connected with work, or self-employed people while working on the premises.

Reportable specified injuries:

- 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:

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- covers more than 10% of the body
- causes 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
- accidents that result in an employee or self-employed person being away from work, or unable to perform their normal work duties, for more than seven consecutive days as the result of their injury

Reportable occupational diseases:

- 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.

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.

The Schools Central record

The School should keep a record of any first aid treatment given by first aiders and appointed persons.

This should include:

- The date, time and place of the incident
- The name (and class) of the injured or ill person
- Details of the injury/illness and what first aid was given
- What happened to the person immediately afterwards (e.g. went home, resumed normal duties, went back to class, went to hospital)
- Name and signature of first aider or person dealing with incident.
- Who notified the parent and whether this was by letter, phone, email or in person.

The Administration Manager keeps a central record, the information in the record book can:

- Help the School identify accident trends and possible areas for improvement in the control of health and safety risks
- Be used for reference in future first-aid needs assessments.

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- Be helpful for insurance and investigative purposes.

In an emergency, the Head of School will have procedures for contacting the child's parent/guardian/named contact as soon as possible. It is our practice to report all serious or significant incidents including head bumps to the parents e.g. by sending a letter home with the child, or telephoning the parents. (see Appendix B)

Child Protection

If any concerns are raised that have Safeguarding implications (unexplained marks or scars), whilst a person is being treated for first aid, the First aider must inform a Designating Safeguarding Person who will take appropriate action.

Physical contact with students during the treatment of minor injuries, illness or medical conditions may be necessary and may involve more than on First aider. Any treatment should:

- Not involve more contact than necessary
- Be carried out, where possible, in the presence of other staff or students
- Be recorded and parents should be informed.

Linked Policies

This first aid policy is linked to the:

- Health and Safety Policy
- Safeguarding and Child Protection Policy
- Behaviour and Exclusion Policy
- Administering Medication Policy

Monitoring and Review

This policy will be reviewed every two years as a minimum.

Agreed on behalf of the Board of Trustees for Hampton Academies Trust.

.....
Signature

.....
Name

.....
Date

Appendix A

Parent agreement for school to administer medicine.

Staff Check List

Appointed Staff

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Parental agreement for School to administer medicine.

Please complete if applicable, giving as much detail as possible:

Name of Child	
Date of Birth	
Form / Class	
Name/type of medicine (As described on container)	
Medication expiry date	
Start Date	
End Date	
Dosage and method	
Timing	
Special precaution	
Are there any side effects?	
Self-administration	
Procedures to take in an emergency	
Contact details	
Name	
Daytime telephone number	
Relationship to child	
Address	

I undertake to ensure that the school has adequate supplies of the medication/equipment.

I undertake to ensure that the medication/equipment supplied by me and prescribed by my child's doctor is correctly labelled, in date, with dosage and storage details attached, and the school will be informed of any changes.

I understand that the school can only administer occasional medication, which has been prescribed by a doctor and that it is my responsibility to ensure that any medication/equipment is brought to school, and collected from school, on a daily basis if necessary.

Signature of Parent/Carer: _____ Date: _____

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Staff Check List

Is the medication labelled with a pharmacy label?	YES / NO
Does the named medication correspond with the parental consent form?	YES / NO
Is the medication in date?	YES / NO
Do the dosage instructions provided by the parent match the pharmacy label?	YES / NO
Are clear storage instructions provided?	YES / NO
Has the parent identified a clear time for the medication to be administered?	YES / NO
Have two members of staff checked all of the above?	YES / NO

Appointed Staff

The following staff are willing to supervise or assist with the administering of medication for the named child and have ensured that the above checklist has been followed prior to medication being administered. The named staff will complete the log (overleaf) when the medication is administered.

Name:	Signed:	Date:
Name:	Signed:	Date:
Name:	Signed:	Date:
Name:	Signed:	Date:

Appendix B

Parent Letter

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Dear Parent/Carer,

Head Bump

<Name of student> had a bump to his/her head today at <time>. Children often bump their heads with no further consequences. The school informs parents when a child bumps their head so parents can keep an eye on their child once they get home from school. This is because it is possible for a more serious internal injury to occur without obvious symptoms for several hours.

The chance of serious injury is highly unlikely from a simple bump to the head. This letter is not intended to alarm or worry you. It is intended to provide information that could prove vital in exceptional circumstances.

For your guidance, symptoms of serious head injury are listed below:

- Child seems disorientated
- Impaired or loss of consciousness
- Intense headache
- Vomiting
- Noisy breathing becoming slow
- Unequal or dilated pupils
- Weakness or paralysis of one side of the body
- High temperature; flushed face
- Drowsiness
- A noticeable change in personality or behaviour, such as irritability
- A soft area or depression of the scalp
- Clear fluid or watery blood leaking from the ear or nose
- Blood in the white of the eye
- Distortion or lack of symmetry of the head or face

If your child displays any of the above symptoms (they may not all be apparent), you may wish to seek immediate advice from your GP or local A&E Department.

Yours sincerely

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Annex Covid-19 Pandemic

From March 2020, the global Covid-19 pandemic has meant that some operational procedures in schools may have changed. This annex outlines the changes to administering First Aid within Hampton Academies Trust during the Covid-19 outbreak.

Practical Guidance for first aiders at Hampton Academies Trust

When conducting first aid, first aiders should;

- assess the situation and evaluate the dangers to themselves and the casualty,
- call for help and if needed, ask somebody to call 999 for an ambulance in an emergency situation,
- wear appropriate PPE if it is available. This should be worn by trained staff members only. PPE could include gloves, a face mask, a visor, eye protection and a disposable apron.
- try to assist at a safe distance from the casualty,
- encourage the casualty to administer first aid on themselves where possible, with verbal advice from the first aider - this could include using an antiseptic wipe to clean a minor wound or apply a dressing for themselves,
- minimise the time there is close contact between the casualty and first aider - try to ensure close contact does not occur for longer than 15 minutes,
- remember the 3P model - preserve life, prevent worsening, promote recovery.

After delivering any first aid, first aiders should;

- if worn, remove PPE in the correct sequence, sanitising hands at the appropriate points,
- ensure they safely discard disposable items in the clinical waste bin,
- clean reusable items thoroughly using soap and water,
- wash their hands thoroughly with soap and water or an alcohol-based hand sanitiser as soon as possible,
- make an appropriate record of the first aid that is administered

Advice on Cardiopulmonary resuscitation (CPR)

The Resuscitation Council UK has issued specific advice to first aiders on giving cardiopulmonary resuscitation (CPR) during the Covid-19 outbreak. The advice states that there is a risk to the first aider of contracting Covid-19 whilst giving rescue breaths, therefore the advice is as follows.

On discovering an unconscious adult casualty,

- Shout for help and ensure an ambulance is called by dialing 999. If Covid-19 is suspected, tell them when you call 999.
- If PPE is available, this should be worn by trained staff members only. PPE could include gloves, a face mask, a visor, eye protection and a disposable apron.
- Do not listen or feel for breathing by placing your ear or cheek close to the patient's mouth. Recognise cardiac arrest by looking for the absence of signs of life and the absence of normal breathing. If you are in any doubt about confirming cardiac arrest, the default position is to start chest compressions until help arrives.

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- If there is a perceived risk of infection, place a cloth or towel over the casualty's mouth and nose and attempt compression only CPR until the ambulance arrives. Put hands together in the middle of the chest and push hard and fast.
- If a defibrillator is available this significantly increased the casualty's chance of survival but does not
- After performing compression only CPR, first aiders should wash their hands thoroughly with soap and water. They should also seek advice from the NHS 111 coronavirus advice service.

Paediatric cardiac arrest is more likely to be caused by a respiratory problem, than a cardiac problem; this makes ventilations crucial to the child's chances of survival. Performing rescue breaths will increase the risk of transmitting the Covid-19 virus, either to the first aider or the child/infant. However, this risk is small compared to the risk of taking no action as this will result in certain cardiac arrest and the death of the child.

Therefore on discovering an unconscious paediatric casualty,

- IMMEDIATELY Shout for help and ensure an ambulance is called by dialing 999. If Covid-19 is suspected, tell them when you call 999.
- If PPE is available, this should be worn by trained staff members only. PPE could include gloves, a face mask, a visor, eye protection and a disposable apron.
- Do not listen or feel for breathing by placing your ear or cheek close to the patient's mouth. Recognise cardiac arrest by looking for the absence of signs of life and the absence of normal breathing. If you are in any doubt about confirming cardiac arrest, the default position is to start chest compressions until help arrives.
- Ventilations can be given, using a CPR face shield. The decision to commence ventilations carries an increased risk of infection and first aiders should only do so in an emergency situation, having evaluated the risks to themselves and the casualty.
- If a defibrillator is available this significantly increased the casualty's chance of survival but does not increase the risk of infection.
- After performing compression only CPR, first aiders should wash their hands thoroughly with soap and water. They should also seek advice from the NHS 111 coronavirus advice service.

First aid kits and first aid resources

At the primary schools, each have provided each year group 'Bubble' with its own first aid kit containing basic first aid equipment and disposable ice packs. This minimises the risk of transmission of Covid-19 through sharing first aid equipment in the First Aid room or communal first aid kits. Disposable ice packs are being used to minimise the risk of transmission of Covid-19 which could be increased using traditional, reusable ice packs with removable, reusable covers.

The primary phase administration team will take responsibility for replenishing first aid kits, at the request of staff members, to again minimise the risk of transmission of Covid-19 by increased use of the First Aid room.

At the secondary schools, all first aiders have been provided with their own basic first aid kit containing basic first aid equipment and disposable ice packs. This reduces the risk of transmission of Covid-19 through sharing equipment in the First Aid room and also reduces the movement of students around school. All staff will be provided with a list of qualified

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first aiders, along with their usual locations. A first aider will be on duty in the Dining Hall / Main Hall area for the duration of lunch time.

First aid cover and qualifications during the outbreak

The Health and Safety Executive (HSE) have confirmed a three-month extension to the validity of the following first aid qualifications during the Covid-19 outbreak;

- First Aid at Work
- Emergency First Aid at Work
- Paediatric First Aid
- Emergency Paediatric First Aid

The first aid training industry in England is confident that enough courses will now be available for all required requalification training to take place. HSE has therefore agreed a final deadline for requalification for these qualifications of 30 September 2020.

A two day refresher course was completed by all staff in need of this training on 14 and 15 July 2020.

Availability of first aiders due to shielding or absent staff

Throughout the Trust there are sufficient first aiders available to work at all schools, including paediatric first aiders. This situation will be constantly reviewed as the schools reopen for all students in September 2020.

Response to a potential infection of Covid-19

The main symptoms of COVID-19 are currently:

- a high temperature - this means feeling hot to the touch on the chest or back (you do not need to measure the temperature with a thermometer).
- a new, continuous cough - this means coughing more than once an hour, or 3 or more coughing episodes in 24 hours (if the person usually has a cough, it may be worse than usual)
- loss or change to the sense of smell (anosmia) - this means having noticed the inability to smell or things smelling differently to normal

If a student or member of staff shows signs of a possible infection, they should be sent home. Whilst waiting for a parent, the student should be escorted, at a distance to the Heads of House office (secondary) and allocated area (primary) and then observed, if possible, through a closed door (or at a distance). The room should be well-ventilated. If the student needs to go to the toilet, they should use a separate bathroom which should be cleaned thoroughly before being used by anyone else. PPE should only be worn if direct care is required and a distance of 2m cannot be maintained.

Hampton Academies Trust: FIRST AID POLICY

Staff and parents need to be ready to engage in the NHS Test and Trace process:

- they should book a test,
- provide details of anyone they have been in close contact with if asked by NHS Test and Trace,
- self-isolate if they have close contact with someone who develops Covid-19
- Inform the school immediately of the results of the test:

If someone tests negative and they feel well, they can stop self-isolating.

If someone tests positive, they should follow the guidance and continue to self-isolate for at least 10 days from the onset of symptoms. Other household members should self-isolate for 14 days.

The school will take swift action when they become aware that someone who has attended school and has tested positive for Covid-19.

The school will contact the local health protection team who will carry out a rapid risk assessment to confirm who has been in close contact with the person during the period they were infectious, and ensure they self-isolate.

Close contact means:

- direct close contacts - face to face contact with an infected individual for any length of time, within 1 metre, including being coughed on, a face to face conversation, or unprotected physical contact (skin-to-skin)
- proximity contacts - extended close contact (within 1 to 2 metres for more than 15 minutes) with an infected individual
- travelling in a small vehicle, like a car, with an infected person

For this reason, we will keep records of timetables and seating plans for all students.

If there is a confirmed case in school, we must notify the Health Protection Team of Public Health England on 0300 303 8537 (option 9) or via eoecrc@phe.gov.uk.

We are likely to be asked for the following information:

- Setting Name and Address
- Primary Contact at the setting
- How many students in total attend the setting
- How many are attending at the time of this discussion
- Number of potentially at risk (total staff and children) e.g. how many within the child's 'bubble'
- Number of possible/suspected cases
- Number of confirmed cases

We are also asked to notify the LA using EmergencySchool.closure@cambridgeshire.gov.uk.