

Outdoor Learning Centre

First Aid & Medication Policy

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1. Aims

The aims of our first aid policy are to:

- Ensure the health and safety of all staff, students and visitors
- Ensure that staff and directors are aware of their responsibilities with regards to health and safety
- Provide a framework for responding to an incident and recording and reporting the outcomes

2. Legislation and Statutory Guidance

This policy is based on advice from the Department for Education on [first aid in Centres](#) and [health and safety in Centres](#), 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 \(Independent Centre Standards\) Regulations 2014](#), which require that suitable space is provided to cater for the medical and therapy needs of students

3. Roles and Responsibilities

3.1 Appointed person(s) and first aiders

The Centre's appointed person is:

Jane White

All staff are First Aid trained and selected staff are trained to administer medication in the event of an absence by the appointed person.

They are responsible for:

- Taking charge when someone is injured or becomes ill

- Ensuring there is an adequate supply of medical materials in first aid kits, and replenishing the contents of these kits
- Ensuring that an ambulance or other professional medical help is summoned when appropriate

In addition, all education staff are trained to 1 Day EFA level. First aiders are trained and qualified to carry out the role (see section 7) and are responsible for:

- Acting as first responders to any incidents; they will assess the situation where there is an injured or ill person, and provide immediate and appropriate treatment
- Sending students home to recover, where necessary
- Filling in an accident report on the same day, or as soon as is reasonably practicable, after an incident.
- Keeping their contact details up to date

3.2 Directors

The directors of New Forest Care have ultimate responsibility for health and safety matters in the Centre, but delegates operational matters and day-to-day tasks to the Head of Centre and staff members.

3.3 The Head of Centre

The Head of Centre is responsible for the implementation of this policy, including:

- Ensuring that an appropriate number of staff are present in the Centre at all times
- Ensuring that first aiders 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
- Undertaking, or ensuring that managers undertake, risk assessments, as appropriate, and that appropriate measures are put in place
- Ensuring that adequate space is available for catering to the medical needs of students
- Reporting specified incidents to the HSE when necessary (see section 6)

3.4 The Centre Staff

Centre staff are responsible for:

- Ensuring they follow first aid procedures
- Ensuring they know who the first aiders in Centre are

- Completing accident reports (see appendix 2) for all incidents they attend to where one of the nominated Centre first aiders is not called
- Informing the Head of Centre or their manager of any specific health conditions or first aid needs

4. First Aid Procedures

4.1 In-Centre Procedures

In the event of an accident resulting in injury:

- The closest member of staff present will assess the seriousness of the injury and seek the assistance of a qualified first aider, if appropriate, who will provide the required first aid treatment
- The first aider, if called, will assess the injury and decide if further assistance is needed from a colleague or the emergency services. They will remain on scene until help arrives
- The first aider will also decide whether the injured person should be moved or placed in a recovery position
- If the first aider judges that a student is too unwell to remain in Centre, parents will be contacted and asked to collect their child. Upon their arrival, the first aider will recommend next steps to the parents
- If emergency services are called, the Centre matron will contact parents immediately
- The first aider/staff member will complete an accident report form on the same day or as soon as is reasonably practical after an incident resulting in an injury

4.2 In-Centre Procedures

When taking students off the Centre premises, staff will ensure they always have the following:

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

Risk assessments will be completed by the staff member leading the trip and checked/signed off by a member of the Senior Centre Staff prior to any educational visit that necessitates taking students off Centre premises.

There will always be at least one first aider on Centre trips and visits and in normal circumstances most, if not all staff supporting the trip will be trained.

5. First Aid Equipment

A typical first aid kit in our Centre will include the following:

- A leaflet with general first aid advice
- Regular and large bandages
- Eye pad bandages
- Triangular bandages
- Adhesive tape
- Safety pins
- Disposable gloves
- Antiseptic wipes
- Plasters of assorted sizes
- Scissors
- Cold compresses
- Burns dressings

No medication is kept in first aid kits.

First aid kits are stored in: The medical room/office on each Centre site

- All science labs
- All design and technology classrooms
- All food technology rooms
- All Centre vehicles

6. Recording & Reporting

6.1 First Aid and Accident Forms

- A Level 5 accident form will be completed by the first aider/member of staff on the same day or as soon as possible after an incident resulting in an injury
- As much detail as possible should be supplied when reporting an accident.
- Records held on NFC tracker will be retained by the Centre for a minimum of 3 years, in accordance with regulation 25 of the Social Security (Claims and Payments) Regulations 1979, and then securely disposed of.

6.1 Reporting to the HSE

The Director with responsibility for HSE will keep a record of any accident which results in a reportable injury, disease, or dangerous occurrence as defined in the RIDDOR 2013 legislation (regulations 4, 5, 6 and 7).

The Director with responsibility for HSE will report these to the Health and Safety Executive as soon as is reasonably practicable and in any event within 10 days of the incident.

Reportable injuries, diseases or dangerous occurrences include:

- Death
- Specified injuries, which are:
 - 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)
 - 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, or requires resuscitation or admittance to hospital for more than 24 hours
- Injuries where an employee is away from work or unable to perform their normal work duties for more than 7 consecutive days (not including the day of the incident)
- Where an accident leads to someone being taken to hospital
- Near-miss events that do not result in an injury, but could have done. Examples of near-miss events relevant to Centres include, but are not limited to:
 - 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

Information on how to make a RIDDOR report is available here:

[How to make a RIDDOR report, HSE](http://www.hse.gov.uk/riddor/report.htm)

<http://www.hse.gov.uk/riddor/report.htm>

7. Training

All Centre staff undertake first aid training to 1 day Emergency First Aid at Work level.

Appointed persons undertake first aid training to 3 Day First Aid at Work level.

All first aiders must have completed a training course, and must hold a valid certificate of competence to show this. The Centre will keep a register of all trained first aiders, what training they have received and when this is valid until via Bamboo HR.

Staff are required to renew their first aid training when it is no longer valid.

8. Administration of Medication

8.1 Prescribed Medication

The administration of prescribed medication to a student will be by the Centre Matron.

The exception to this will be students who self-medicates (This will be risk assessed as to ensure safe storage of this medication), or students / staff requiring epi pens and/or Ventolin.

It is now acceptable for the Centre to keep Ventolin inhalers in case of emergency.

Staff/ Parents/Carers must bring medication in an envelope containing the original packaging, clearly marked with the child's name, any specific storage instructions and administration guidelines.

A photocopy of this information will be held in the medication file.

8.2 Non-Prescribed Medication

The Centre matron will take responsibility for the administering of non-prescribed medication (i.e. Paracetamol).

Stock of Paracetamol and Piriton ONLY will be kept in the locked first aid cabinet, within the staff office.

Any administering of non-prescribed medication will be recorded in the Centre log.

The Centre matron will be responsible for handover to parents/carers.

The Centre matron will contact the parents/carers prior to administering non-prescribed medication to ascertain previous medication use.

- Written consent from the parent/guardian must have been received in advance and administration is in accordance with guidance provided in the *Health Guidance for Centres* document and young person's risk assessment.
- Children under 16 years old are **never** to be administered aspirin or medicines containing Ibuprofen unless prescribed by a doctor.
- Responsibility for decision-making about the administration of all non-prescribed medicines will always be at the discretion of the Centre Matron or Head Teacher who may decide to administer in exceptional circumstances.

8.3 Maintenance Drugs

It is our policy to manage the administration of maintenance drugs (e.g. Insulin) as directed following consultation and agreement with, and written consent from the parents.

On such occasions, a Health Care Plan will be written for the child concerned and administered by either the Company Nurse, parent or carer.

8.4 Non-Routine Administration

Emergency Medicine

- It is our policy to manage the administration of emergency medicines such as:
 - Ventolin inhalers
 - Injections of adrenaline for acute allergic reactions.
 - Rectal diazepam for major fits.
 - Injections of Glucagon for diabetic hypoglycaemia.

In such cases, permissions and procedures will be detailed in a student's Health Care Plan.

- In all cases, professional training and guidance from a competent source will be received before commitment to such administration is accepted.

9. Infection Control

9.1 Aim

To make staff aware of the immediate first aid action to be taken following any incident; which involves contamination with blood or body fluids.

To ensure a Risk Assessment is undertaken for each incident and appropriate action taken to protect the staff from infection with blood borne virus(es).

Outdoor Learning Centre will ensure:

- All staff employed by Outdoor Learning Centre will undergo basic staff training on the risks associated with infection within the Centre.
- A supply of protective gloves and other PPE will be kept at the Centre for the use of both students and staff. Any additional equipment required such as bio hazard bags or sharps bin will be assessed and put into place on an individual basis.

9.2 Introduction to Infection

Infection may be transmitted from infected patients to staff members through inoculation (e.g. needle stick or bites) or by contamination of open skin lesions, conjunctivae or mucous membranes by patient's blood or body fluids. Therefore:

- All blood and body fluids and tissues should be regarded as potentially infectious.
- It is therefore important that staff adopt Standard Precautions when in contact with blood/body fluids.
- Sharps must be safely disposed of in a suitable container.
- Needles must not be re-sheathed prior to disposal. The following action must be taken to try to prevent contamination, and to assess risk so that appropriate treatment can be given.

The guidance is divided into two sections, the first being incidents where the patient or source is known to be HIV Positive or highly suspected to be HIV Positive and in the second part, all other incidents where the risk may be of Hepatitis B or Hepatitis C, or other blood borne virus(es). Most occupational incidents will relate to the second part of the guidance.

9.3 Legal Requirements

Employers are required by law to carry out adequate risk assessments of workplace activities and to provide suitable and sufficient training to ensure the safety of their staff while on the employers business.

The Control Substances Hazardous to Health Regulations (2002) further require that adequate Risk Assessments of any practices which involve the use of, or exposure to hazardous substances, including micro-organisms are carried out and that significant findings are recorded.

Risk Assessments should be extended to cover dangers to others on the employer's premises, including patients, visitors and contractors.

Legislation also requires that employees have a duty to cooperate with the employer on all matters associated with health and safety and to abide by local safe systems of work.

9.4 Exposure to Infection

Definitions of Incidents

Incidents can happen occupationally in one of three ways:

Percutaneous exposure

- From sharps; needles, sharp edged instruments, broken glass contaminated with blood/body fluids. Sharp spicules of bone or teeth.
- Blood borne virus(es) are potentially transmittable by human bite, if the bite breaks the skin of the person bitten. The risk of Hepatitis B contamination is high in this instance but minimal for HIV.
- Deep scratches where the skin has been broken have the potential to be infected from other's nails, especially when contaminated by blood/body fluids.

Cutaneous exposure –

- From spraying of blood/body fluids onto broken skin (abrasions, cuts, eczema etc) although the risk of HIV contamination in this instance is low.
- There is no evidence that blood borne virus(es) can be transmitted by contaminated blood on to intact skin'.

Mucous membrane Exposure

- From blood/body fluids into eyes, up the nose or into the mouth.

Staff's main protection is education in Standard Precautions and appropriate protective clothing. Abrasions and cuts must be protected by waterproof dressings.

10. Monitoring Arrangements

This policy will be reviewed by the Head of Centre, Registered Mental Health Nurse and Director of Education every 2 years.

At every review, the policy will be approved by the Directors of New Forest Care.

11. Linked Policies

This first aid policy is linked to the following policies:

- Health and safety policy
- Risk assessment policy
- Policy on supporting students with medical conditions
- Physical Intervention Policy