



St Louise's

Comprehensive College, Belfast

A Specialist College

First Aid Policy



Mission Statement

"In partnership with parents, guardians, staff, governors and students St Louise's promotes excellence in teaching and learning within a Catholic, Vincentian, Comprehensive ethos"

INTRODUCTION

First Aid is the initial assistance or treatment given to someone who is injured or suddenly taken ill (The Joint First Aid Manual 8th Edition). Staff administering First Aid should seek to assess the situation, protect themselves and the casualty from further danger, deal with any life threatening condition and where necessary obtain medical assistance or refer the casualty to hospital as quickly as possible.

The three main aims of First Aid are to:

- ✓ Preserve life
- ✓ Prevent further injury
- ✓ Promote recovery

First Aid Provision

SECTION 1: ROLES AND RESPONSIBILITIES

1. Role of the Principal and Board of Governors

The Principal and the BOG will ensure that the First Aid Policy is implemented and regularly reviewed. The Principal will be supported by the SENCO in the updating of policy and practice.

2. Role of the SENCO

The SENCO in partnership with the Pastoral Vice Principal will:

- ✓ provide equipment and materials to provide First Aid treatment supported by the Home Economics Technician and the Office manager;
- ✓ make arrangements with relevant agencies to provide First Aid training to employees, maintain records of training and review annually;
- ✓ establish a procedure for managing accidents in school which require First Aid treatment;

- ✓ provide information to employees on the arrangements for First Aid;
- ✓ undertake a risk assessment of the First Aid requirements of the School and review on a regular basis;
- ✓ use the information from the risk assessment of First Aid to determine the number and level of trained staff and also any additional requirements (eg specialised training for children with particular medical needs); and
- ✓ liaise with the school nurse to draw up Medical Care Plans

3. Role of First Aiders

First Aiders will:

- ✓ Notify parents/guardians that first aid treatment was given to their child;
- ✓ Notify the principal/senior member of staff if an ambulance has to be called and ensure that it is logged (Appendix 1- Ambulance Log);
- ✓ Report and record all accidents using the relevant staff and student forms from BELB;

- ✓ **Record details of all incidents they are called to attend as First Aiders on a form contained within a First Aid Record Book**

(Appendix 2 - Individual Record Sheets – First Aid Record Book)

They will pass on a duplicate of the form to the Pastoral Support Team (Mrs J Austin and Mrs C Carson – SENCO) All forms will be retained in the First Aid File .

A copy of the form will be sent to the parents of the student treated

All forms will be reviewed by the SENCO on a weekly basis

An overview of First Aid cases will be presented to the Safeguarding Team and BOG on an annual basis

4. Role of Member of Staff in charge of Educational Visits

The Senior Member of Staff in charge of trips will:

- ✓ Ensure that all information regarding the care of students is recorded and that all relevant risk assessments are carried out.
- ✓ Members of Staff taking students on Educational Visits: a First Aid Box if required can be collected from the Office Manager for any educational outings.

5. Role of Staff

All Staff will:

- ✓ Ensure that individuals are not placed at risk;
- ✓ **Ensure that First Aiders are called at all times when there are concerns about a student or member of staff's health**
Staff not trained in First Aid should not provide treatment; and
- ✓ **Record accidents using relevant BELB forms and pass on completed forms to the Building Supervisor**

<p style="text-align: center;">The First Aid Policy is supported by the School's Medical Care Policy</p>

Other Policies

- ✓ Medical Care Policy
- ✓ Medical Care Plans

SECTION 2: ARRANGEMENTS FOR FIRST AID

The School will provide materials and equipment and facilities to provide First Aid. All members of staff trained in First Aid will have a First Aid Kit.

The contents of the Kits will be checked on a regular basis by First Aiders and any materials/equipment required will be provided by the Home Economics Technician.

A standard First Aid Kit will contain the following items:

- Leaflet giving general advice on First Aid
- 20 individually wrapped sterile adhesive dressings assorted sizes
- 4 triangular bandages
- 2 sterile eye pads
- 6 safety pins
- 6 medium wound dressings
- 2 large wound dressings
- 3 extra large wound dressings
- 1 pair of disposable gloves

First Aid Kits will be retained at:

- ✓ Reception
- ✓ Vice Principal's Office – Senior School
- ✓ Vice Principal's Office – Junior School
- ✓ Main Office
- ✓ Pastoral Support Centre
- ✓ Sixth Form Centre

The School First Aider(s) are:

<u>Name</u>	<u>Designation</u>	<u>Extension</u>
*Mrs I Kearney	Receptionist	0
*Mrs M Keenan	Head of Year	3076
Mrs S Lagan	Drama	2066
*Mrs G Mahon	Head of Year	2178
*Mrs J Mateer	Head of Year	2080
*Mrs R Mervyn	Head of Year	2013
*Mrs T Moore	Technician (HE)	2047/2049
Mrs C Carson	SENCO	2014
*Ms D O'Connor	Science	2180
*Mrs C O'Neill	Head of Year	2154
*Ms J Smith	Head of Year	2176

**Defibrillator Training*

Information on First Aid Arrangements

The **SENCO** will inform all employees at the school of the following:

- ✓ The arrangements for recording and reporting of accidents;
- ✓ The arrangements for First Aid;
- ✓ Those employees who are qualified First Aiders;
- ✓ The location of the First Aid Kits.

In addition, the **SENCO** will ensure that signs are displayed throughout the School providing the following information:

- ✓ The names of employees with First Aid qualifications;
- ✓ Their room number or extension number; and
- ✓ Location of the First Aid Box.

All members of staff will be made aware of the School's First Aid Policy.

No member of staff should attempt to give First Aid unless they have been trained in First Aid.

SECTION 3: FIRST AID OFF SITE AND TRIPS

Before undertaking any off-site activities the level of first aid provision will be assessed by the Senior Member of Staff in charge of trips and at least one First Aid Kit will be taken along.

SECTION 4: ACCIDENTS INVOLVING BUMPS TO A PUPIL'S HEAD INCLUDING CONCUSSION AND SECOND IMPACT SYNDROME

All school staff or staff from external agencies who are brought in to school to deliver sporting activities are aware of the dangers of head injuries and of the symptoms and risks associated with Concussion and Second Impact Syndrome. The Pocket Concussion Recognition Tool - Appendix 3 is displayed and used in school to identify the signs of concussion and what symptoms are "red flags" and require immediate medical attention. All concussions will be dealt with as serious injuries. When a young person has signs or symptoms of suspected concussion they will not be allowed to return to play or other strenuous or sport related activity on the day of the injury.

The parent of any child who is involved in an accident where there is a bump or blow to the student's head will be contacted by a senior member of staff since the consequence of such an injury is not always evident immediately and the effects may only become noticeable after a period of time.

SECTION 5: TRANSPORT TO HOSPITAL OR HOME

The Head of Year/Senior Member of Staff in partnership with the First Aider involved will determine the appropriate action to be taken in each case. Where the injury requires urgent medical attention an ambulance will be called and the student's parent or guardian will be notified. If hospital treatment is required, the student's parent/guardian/carer will be called so that they can take over responsibility for their child's care. If no contact can be made with the parent/guardian/carer or other designated emergency contacts then the Head of Year and First Aider may decide to transport the student to the hospital themselves. If the student has a Medical Care Plan, it will be brought to the hospital or given to the ambulance crew.

Where the Head of Year makes arrangements for transporting a child then the following points will be adhered to:-

- ✓ The parent/guardian/carer will be contacted;
- ✓ Only staff cars insured to cover such transportation will be used;
- ✓ No individual member of staff will be alone with the pupil in a vehicle;
- ✓ A second member of staff will be present to provide supervision of the injured pupil.

SECTION 6: CALLING AN AMBULANCE

Follow emergency call advice - Appendix 4

AMBULANCE LOG

Name of School: St Louise's Comprehensive College

Name of Pupil	Date of Birth	Date called	Time	Concern	Signed

THIS AMBULANCE LOG MUST BE RETAINED AT RECEPTION – EACH TIME AN AMBULANCE IS CALLED IT MUST BE REPORTED TO RECEPTION AND LOGGED BY MRS ISABEL KEARNEY OR PERSONNEL ON RECEPTION AT THAT TIME

Appendix 2 First Aid Record

Organisation:	Site/place:
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Name of person treated:	Date:	Time:
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Description of incident (injury/illness):

Tick all that apply:

<input type="checkbox"/> Allergy/anaphylaxis	<input type="checkbox"/> Choking incident	<input type="checkbox"/> Rash	<input type="checkbox"/> Swelling
<input type="checkbox"/> Abrasion	<input type="checkbox"/> Diabetic episode/emergency	<input type="checkbox"/> Seizure	<input type="checkbox"/> Toothache/loose or missing tooth
<input type="checkbox"/> Asthma/airway sensitivity	<input type="checkbox"/> Dizziness/light headedness	<input type="checkbox"/> Splinter	<input type="checkbox"/> Vomiting/diarrhoea
<input type="checkbox"/> Bleeding	<input type="checkbox"/> Fainting	<input type="checkbox"/> Sprain/strain/suspected fracture	<input type="checkbox"/> Wet/soiled underwear/clothing
<input type="checkbox"/> Bump/bruise	<input type="checkbox"/> Headache	<input type="checkbox"/> Stomach pain/upset	<input type="checkbox"/> Other (please state):
<input type="checkbox"/> Burn/scald	<input type="checkbox"/> Poisoning/bite/sting	<input type="checkbox"/> Suspected condition (e.g. chicken pox, meningitis)	

Treatment details:

Medical/emergency services contacted?	YES / NO	Details:	Further advice/treatment recommended?	YES / NO	Details:
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What happened afterwards? e.g. parent/carer called, resumed normal activities:	First aider's name:	First aider's signature:
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Pocket Recognition Tool

Pocket CONCUSSION RECOGNITION TOOL™

To help identify concussion in children, youth and adults



RECOGNISE & REMOVE

Concussion should be suspected **if one or more** of the following visible clues, signs, symptoms or errors in memory questions are present.

1. Visible clues of suspected concussion

Any one or more of the following visual clues can indicate a possible concussion:

- Loss of consciousness or responsiveness
- Lying motionless on ground/Slow to get up
- Unsteady on feet / Balance problems or falling over/Incoordination
- Grabbing/Clutching of head
- Dazed, blank or vacant look
- Confused/Not aware of plays or events

2. Signs and symptoms of suspected concussion

Presence of any one or more of the following signs & symptoms may suggest a concussion:

- | | |
|--------------------------|----------------------------|
| - Loss of consciousness | - Headache |
| - Seizure or convulsion | - Dizziness |
| - Balance problems | - Confusion |
| - Nausea or vomiting | - Feeling slowed down |
| - Drowsiness | - "Pressure in head" |
| - More emotional | - Blurred vision |
| - Irritability | - Sensitivity to light |
| - Sadness | - Amnesia |
| - Fatigue or low energy | - Feeling like "in a fog" |
| - Nervous or anxious | - Neck pain |
| - "Don't feel right" | - Sensitivity to noise |
| - Difficulty remembering | - Difficulty concentrating |

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3. Memory function

Failure to answer any of these questions correctly may suggest a concussion.

- "What venue are we at today?"
- "Which half is it now?"
- "Who scored last in this game?"
- "What team did you play last week/game?"
- "Did your team win the last game?"

Any athlete with a suspected concussion should be IMMEDIATELY REMOVED FROM PLAY, and should not be returned to activity until they are assessed medically. Athletes with a suspected concussion should not be left alone and should not drive a motor vehicle.

It is recommended that, in all cases of suspected concussion, the player is referred to a medical professional for diagnosis and guidance as well as return to play decisions, even if the symptoms resolve.

RED FLAGS

If ANY of the following are reported then the player should be safely and immediately removed from the field. If no qualified medical professional is available, consider transporting by ambulance for urgent medical assessment:

- | | |
|--|---------------------------------|
| - Athlete complains of neck pain | - Deteriorating conscious state |
| - Increasing confusion or irritability | - Severe or increasing headache |
| - Repeated vomiting | - Unusual behaviour change |
| - Seizure or convulsion | - Double vision |
| - Weakness or tingling/burning in arms or legs | |

Remember:

- In all cases, the basic principles of first aid (danger, response, airway, breathing, circulation) should be followed.
- Do not attempt to move the player (other than required for airway support) unless trained to do so.
- Do not remove helmet (if present) unless trained to do so.

From McCrory et al., Consensus Statement on Concussion in Sport. Br J Sports Med 47 (5), 2013

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Name of School: St Louise's Comprehensive College

**EMERGENCY CALL FORM
(TO BE DISPLAYED BY THE OFFICE TELEPHONE)**

REQUEST FOR AN AMBULANCE

To: St Louise's Comprehensive College

Dial 999, ask for ambulance and be ready with the following information.

1. Your telephone number (028 90325631).
2. Give your location as follows: (468 Falls Road, Belfast, BT12 6EN).
3. Give exact location within the school (e.g. main reception at the front of the school).
4. Give your name.
5. Give brief description of student's symptoms.
6. Inform ambulance control of the best entrance (generally the main entrance to the school) and state that the crew will be met and taken to the student.

SPEAK CLEARLY AND SLOWLY!

Automated External Defibrillators

St Louise's currently have three Automated External Defibrillators (AED's) on site. They were acquired by the school on Monday 24th November 2014.

The defibrillators are situated in

- ✓ Reception (Senior School)
- ✓ Reception (Junior School)
- ✓ HOD's Office - Science Department

What are AED's?

Automated External Defibrillators (AED's) are portable devices used to induce electrical stimulation to the heart muscle in the event of a cardiac arrest. Early access defibrillation is recognised as a significant factor in a person's survival following sudden cardiac arrest.

AED's are a portable device designed to be used by members of the public, and are very effective at guiding the operator through the process of administering a shock if required. They have become widely available, are safe and easy to use and will not allow a shock to be given to a victim who does not require one.

There are a number of different providers and shapes and sizes of AED but essentially they all do the same thing:

- ✓ Analyse the victim's heart rhythm
- ✓ Determine if a shock is required
- ✓ Provide voice and/or visual prompts to assist the rescuer

Staff Training

10 members of our First Aid Team completed a CPR and AED course on Monday 24th November 2014. The BELB approved training course was provided by Global Horizon Skills Ltd.

(Appendix 6 is being used to maintain a record of staff training in this area)

Storage and Accessibility

The AED is situated centrally where it can be easily accessed. The AED is publicly located in an open display rack and is accessible at all times. The AED is stored in a carry case which carries the AED and the additional equipment. The additional equipment includes the following; disposable face shield, Tuff Cut scissors, disposable razor, disposable latex-free gloves and disposable towel/absorbent cloth. Appropriate signage is displayed throughout the school site indicating the AED location/s.

Management of the AEDs

Within our First Aid Team we have an AED Co-Ordinator and an Assistant.

The AED Co-Ordinator is Ms D O'Connor

The assistant is Mrs C O'Neill

The role of the AED Co-Ordinator includes

- ✓ Daily visual AED system check
- ✓ Weekly recorded check of the AED unit

Daily Visual AED System Check

- ✓ Ensure that the AED system status indicator is operational

Recorded Weekly Checks

On a weekly basis the following should be checked:

- ✓ The AED – that it is in its correct location and has not been tampered with
- ✓ Battery status indicator - to ensure the battery is working correctly
- ✓ Pads are unopened
- ✓ Additional items are present and correct - disposable face mask/shield, tuff cut scissors, disposable razor, disposable latex free gloves and disposable towel/absorbent cloth.

(Appendix 5 – Checklist for weekly checks)

Checks following incident and use of AED

After an incident and usage_the following should be checked:

- ✓ Check battery-seek advice from supplier
- ✓ Replace Pads used during incident
- ✓ Replace used items from additional equipment - disposable face mask/shield, tuff cut scissors, disposable razor, disposable latex free gloves and disposable towel/absorbent cloth
- ✓ Returning the AED to service

Six Monthly Checks

Every six months the following should be checked:

- ✓ Battery expiry date
- ✓ Pad expiry Date
- ✓ Order new battery or defibrillator pads at least one month before expiry date
- ✓ Review of training records

(Appendix 7 – Checklist for 6 monthly checks)

Post Incident Procedure and Event Review

Procedures must be established outlining the actions to take after the use of an AED. Use of the AED must be reported to the board's Health & Safety Manager/Officer and a comprehensive review actioned to include:

- ✓ Downloading and transferring data from the AED - If requested by ambulance service.
- ✓ Recording details of the incident on the employing authorities Accident Report Form
- ✓ ELB or employing authority
- ✓ School governors
- ✓ SLT if applicable
- ✓ Staff, students and members of the public who witnessed the incident.

WEEKLY AND POST-USE AED CHECK

School Name											
AED location											
Device serial number											
Date	AED intact	Battery status OK	Pads intact	1 face mask	2 pair latex free gloves	1 pair TUFF CUT scissors	1 prep razor	Absorbent cloth	Name and Signature		
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<i>Authorised Person</i>		

In the event of a fault please refer to device manual.

AED SIX MONTHLY CHECK

Date	Battery expiry date	Pads expiry date	Training records up to date <input checked="" type="checkbox"/>	Name and Signature