


LITTLE HEATON CE PRIMARY SCHOOL



HEALTH & SAFETY POLICY (incorporating First Aid Policy and Administering Medicines)

Mark 9.23 - *All things are possible for those who believe.*

Date of Issue: November 2022 Updated March 2023	Date of Last Review: March 2022
To be Reviewed: March 2024	
Headteacher Signature: 	



Contents

Contents.....	2
Statement of Intent and General Policy; Legislation and Guidance.....	3
Introduction	4
Aims.....	4
Responsibilities	4
First Aid Provision	5
Calling the Emergency Services	8
Inhalers.....	8
Special Medical Conditions	8
Accidents.....	8
Fire Precautions	9
Control of Substances Hazardous to Health (COSHH)	9
Electrical Safety.....	9
School Visits	9
Playground Safety	10
Risk Assessments	10
Contractors on Site	11
Pregnant Employees	11
Monitoring	11

Statement of Intent and General Policy

The Governing Body recognise their responsibilities under the Health and Safety at Work etc. Act 1974 and will take all reasonably practicable steps to provide safe and healthy working conditions, equipment and systems of work for all employees, pupils and others affected by their activities, actions or omissions.

The Governors are committed to providing and maintaining a working and learning environment that is safe and without risk and this is established by the allocation of duties and arrangements detailed in parts 2 and 3 of this policy.

All those involved in providing and maintaining a safe and healthy working environment will be responsible for assisting in achieving the aims and objectives identified and will play a positive role in promoting a healthy and safe working environment.

In relation to health, safety and welfare, the Governors will act within the framework of action advised by Rochdale Local Authority.

The Health and Safety Policy of the Council will be observed and acknowledged.

This policy and its procedures are subject to the Equality Act 2010, which recognises the following categories of individuals as protected: characteristics, age, gender, reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief (sex) gender, sexual orientation and disability.

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](#), guidance from the Health and Safety Executive (HSE) on [incident reporting 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 School Premises \(England\) Regulations 2012](#), which require that suitable space is provided to cater for the medical and therapy needs of pupils

Introduction

This document is a statement of the aims, principles and strategies for ensuring Health and safety at Little Heaton CE Primary School.

Aims

To promote a safe and healthy environment for children, teaching and non-teaching staff and all other people who come onto the school premises.

Responsibilities

All members of the school community (teaching, non-teaching, staff, parents, pupils and governors) work towards these aims by:

- Being fully aware of their own responsibilities for a safe and healthy environment
- Being familiar with all instructions and guidance in the school
- Using common sense always to take care and responsibility for themselves and others
- Reporting any unidentified hazards to the Headteacher, Deputy Headteacher or Caretaker without delay

The governors, Senior Leadership team and Bursar work towards these aims by:

- Ensuring safe working practices and procedures are applied at school
- Make termly inspections to ensure that a safe and healthy environment is maintained
- Ensure the systems for reporting, recording and investigating accidents is rigorously applied
- Ensure all staff members are aware of all policies and procedures
- Take active steps to ensure that all equipment, buildings and grounds are safe, secure and well maintained and that any damage is quickly rectified.
- Ensuring that there are arrangements for the speedy evacuation of the buildings in case of fire or other emergency situations and that firefighting equipment (i.e. fire extinguishers) are readily available.

The Headteacher works towards these aims by:

- Taking day-to-day responsibility for Health and safety in school.

Teaching and non-teaching staff work towards the school aims by:

- Taking responsibility for the safety of pupils in their classroom.
- Exercising effective supervision of the pupils and to know the emergency procedures in respect of fire, bomb scare, first aid and to carry them out as required.
- Promoting a culture of safety consciousness amongst the children of their responsibilities in taking responsible care for themselves and others.

- Being good role models – vigilant and careful.
- Taking firm action to ensure children's safety and the safety of others.
- Providing opportunities for children to discuss health and safety issues.
- Ensure risk assessments are carried out before any offsite visits.

Pupils work towards the school's aims by:

- Developing a growing understanding of health and safety issues.
- Conducting themselves around school in a sensible and orderly manner.
- Taking increasing responsibility for maintaining a safe and healthy environment.

Parents will support the school's aims by:

- Ensuring the children attend in good health.
- Providing prompt letters and phone calls to explain all absences.
- Ensuring early contact with school to discuss matters concerning the health and safety of their children or of others.
- Allowing children to take increasing personal and social responsibility as they progress throughout the school.
- Ensuring the school has up-to-date contact addresses and telephone numbers, so that parents can be contacted quickly in an emergency.

The Caretaker will support the school aims by:

- Ensuring all cleaning materials and equipment able to be a danger to pupils and staff are correctly stored when not in use.
- Maintain a clean and clear boiler area.
- Maintain a high standard of housekeeping.
- Ensure all waste materials from the school are disposed of correctly.
- Ensuring the pedestrian gates are opened in time for the start and end of the school day; at all other times they must be locked.

First Aid Provision

There are three recognised First Aiders in school and all staff have completed a one-day First Aid course. Our Lead First Aider is Angela McQuaid; and Tracey Laycock and Dawn Lynch are the other named First Aiders. Laura Webster is trained for outdoor First Aid for forest school. Paediatric First Aiders include Tracey Laycock and Angela McQuaid. The Headteacher, on behalf of the Governing Body, will assess and arrange for sufficient numbers of staff to be trained first aiders when there is a change of staffing.

Consultation from the designated member of First-Aid staff **NEED NOT BE SOUGHT** in the event of **minor incidents** which may be treated with **PASTORAL CARE**. Examples of these are:

- Minor cuts or grazes
- Pupils who feel - or who are actually – sick
- Minor bumps to the head – i.e. pupils colliding in the playground.
- Minor marks to the body (bruises), skipping rope burns etc.
- Dog-dirt on shoes/soiled clothing/mud on clothes etc.

Each class has their own First Aid box and these are replenished regularly by the lead first aider Mrs McQuaid.

All children who are unable to be treated with **PASTORAL CARE** should be referred to a qualified first aider. Where it is not possible to move the child the school mobile should be used to contact the office or another sensible child should be sent to the office for help. Staff that are qualified in First Aid should initially assess the child's needs and apply basic first aid. If appropriate a second opinion should be sought from another qualified first aider.

The defibrillator is kept in the main school office. The office staff regularly check that the battery is charged and that the pads are in date. Training is given as part of first aid training and first aid refresher training for the recognised first aiders. Some recognised first aiders have attended dedicated defibrillator training, and the need for further training will be monitored by the Headteacher.

First Aiders are responsible for:

- Assessing the extent of the injury or condition and giving appropriate treatment.
- Advising parents / carers on what action should be taken (if required), in their opinion.
- Treatment for minor injuries / cuts.
- In the case of a serious injury, First Aid is provided to stabilise a casualty until they can be taken to hospital or put in charge of competent medical care.
- Notifies parents of a head injury on appropriate forms.
- Inform parents of any genital injury and ask them to attend school to check the injury immediately. If the parent cannot attend school then they can send another family member (such as Grandparent) alternatively they should speak to the child on the telephone if possible. On occasion where the parents/ other family members cannot be contacted, medical advice is sought from NHS Direct (101) and transport to Accident and Emergency if appropriate.

Kitchen staff have their own dedicated first aid kit which includes a burns kit.

Treatment of Minor Incidents

ASSESS, TREAT AND RECORD:

Assess

Does the incident require treatment? For example, an open wound, head injury or swelling.

Or

Will a little TLC be sufficient?

Treat

Cuts and grazes; if bleeding the injury will require cleaning. Always use gauze to clean an open wound. Always wear protective gloves.

Then apply a dry sterile dressing if necessary.

Record

All incidents requiring First Aid treatment must be recorded

NB: If in doubt about any type of injury please contact Designated/Paediatric First Aider.

The Use of First Aid Supplies

- Supplies of first aid equipment are stored in a locked and fully equipped first aid cupboard in the main office.
- The monitoring of the first aid boxes and stock will occur every half term by the designated First Aider.
- When treating open wounds, supplies from the first aid boxes must be used.
- With regard to minor bumps and scratches a paper towel or cotton wool can be used as a cold compress if required as long as the bump or scratch does not have an open wound.

The Safe Treatment of Children

- Children should be removed from the source of the incident. Any equipment involved should also be removed.
- Due to known and unknown allergies, creams and lotions should not be used.
- **ALL** head injuries should be reported to the designated First Aider and the appropriate class teacher, as symptoms can occur over a period of time following a head injury e.g. nausea, vomiting, drowsiness and blurred vision.

Disposal of waste

- Yellow waste disposal bags are to be provided at each First Aid Box allocation point.
- All used first aid supplies are to be put in these and secured firmly before disposal, **immediately**, in one of the grey sanitary units.
- These are located in the staff toilets. **Waste bags should not be left lying around.**

Recording of incidents

- All incidents requiring basic first aid treatment must be recorded in the accident books.
- The top copy of the log must be sent home with the child to inform the parent/guardian of the accident.

Reporting of incidents

- More serious injuries must be recorded using the Local Authority reporting system.
- Some of these incidents may be investigated by the schools H&S Consultant.

Informing staff

- Class teachers must be informed of any incident once the treatment has taken place and the Accident Book completed. The Headteacher/ Deputy must be informed of any serious incidents immediately.

Hygiene

- Correct hygiene is important, not only to the injured party, but also to the person administering the first aid.
- First aid should be given in as clean and safe environment as possible.
- Hands should be washed before and after giving first aid to lower the risk of any cross infection.
- Alcohol hand rub (if required) is kept in the school office
- Always wear the gloves provided to treat any incident involving bleeding (to avoid cross infection). Ask the injured party to cover the injury with clean gauze whilst you put on your gloves.
- Dispose of waste in the yellow bags as described earlier.

Head Injuries

Initial treatment:

- Dry dressing (gauze) to open wounds
- Cold compress (cotton wool and water) applied to any injury not bleeding
- Telephone contact should be made with all parents when a head injury occurs.
- NHS Head Injury Guidance should be given to parents on collection of their child (see end of document)

In the event of a major accident, staff will follow the Local Authority accident recording and reporting guidelines.

Calling the Emergency Services

In the case of a major accident / incident the emergency services are to be called. Ideally the call should be made from the school office where the child's record is held. First Aider needs to make contact with the office (via school mobile or sending another member of staff or child with information). If the casualty is a child their parents should be contacted immediately after the emergency services.

Inhalers

Asthma inhalers should be kept in classrooms and regularly checked for the date. An audit should be carried out regularly to ensure that the children have inhalers in school who need one.

Special Medical Conditions

If necessary, medicine which has been prescribed by a doctor can be administered in school, providing it is prescribed no less than 4 times a day. Medicines will be stored in the fridge in the office; asthma inhalers are kept in the classroom.

Information must be shared with all teaching/non-teaching/supply staff about special medical conditions of children and about what response may be required in an emergency. These children are clearly identified in the staffroom. There is a requirement that all medicine brought to school must be clearly labelled with the child's name/appropriate dosage/frequency and delivered, by parents, to the school office.

All dietary problems are clearly displayed in the serving area of the kitchen.

Accidents

All serious accidents will be recorded in the school accident book. Accidents to staff must be recorded in the school accident book.

Incidents / Accidents become RIDDOR reportable when:

- Over 7 day incapacity - injury that results in the pupil / employee being absent, or unable to carry out their full range of normal duties for more than seven days.
- Major injury - e.g. fracture, serious burn, unconsciousness.

- Pupil or member of public taken to hospital.
- Occupational disease - as diagnosed by a doctor.
- Dangerous occurrence - e.g. collapse of load bearing equipment or scaffold.
- Gas incident - leak, fire or explosion.

Advice should be sought from Rochdale Council's Safety Team on 01706 92 5087/5082 if you are unsure whether an incident is reportable.

Fire Precautions

- Fire drills will be held at least once a term.
- Fire evacuation procedures are posted throughout school and in the classrooms.
- Teaching staff are responsible for the safe supervision of the children during an evacuation (Lunchtime Organisers and Teaching Assistants at lunchtime).
- All staff have a shared responsibility to ensure escape routes inside and outside the building are clear.
- Any issues during fire drills should be reported to the Headteacher.
- All fire exits are clearly signed.
- All firefighting equipment is checked on an annual basis.

Control of Substances Hazardous to Health (COSHH)

The school will follow COSHH guidance and will ensure that all guidance issued by DfEs, HSE and CLEAPSS is followed. Medicines are to be kept in the medicine fridge in the Bursar's office or locked cabinet in the medical room. Storage of substances to be kept in a locked cupboard which is not accessible to children.

Facilities Management provide COSHH training for caretaking, cleaning and catering staff and also provide all the necessary documents.

Electrical Safety

- All staff must take due care in the use of electrical equipment
- Staff should report to the Headteacher / Bursar of any defective equipment
- There should be no tampering with defective equipment
- Annual PAT testing is undertaken on all portable electrical equipment

School Visits

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

- A school mobile phone
- A portable first aid kit including, at minimum:
 - A leaflet giving general advice on first aid
 - 6 individually wrapped sterile adhesive dressings
 - 1 large sterile unmedicated dressing
 - 2 triangular bandages – individually wrapped and preferably sterile
 - 2 safety pins
 - Individually wrapped moist cleansing wipes
 - 2 pairs of disposable gloves
- Information about the specific medical needs of pupils
- Parents' contact details

When transporting pupils using a minibus or other large vehicle, the school will make sure the vehicle is equipped with a clearly marked first aid box containing, at minimum:

- 10 antiseptic wipes, foil packed
- 1 conforming disposable bandage (not less than 7.5cm wide)
- 2 triangular bandages
- 1 packet of 24 assorted adhesive dressings
- 3 large sterile unmedicated ambulance dressings (not less than 15cm x 20 cm)
- 2 sterile eye pads, with attachments
- 12 assorted safety pins
- 1 pair of rustproof blunt-ended scissors

Risk assessments will be completed by the member of staff organising the visit prior to any educational visit that necessitates taking pupils off school premises. This should be done on the 'Evolve' website, well in advance of the trip and within 7 days of first booking the visit. A First Aider should accompany the visit and take a medical kit. For EYFS trips a paediatric first aider must accompany the trip.

Playground Safety

- Daily perimeter checks are carried out by the caretaker, this includes: -
 - Playground surfaces
 - Gates
 - Paths
- Childscape commissioned to perform termly inspections and repairs and provide written reports and photos.
- If staff become aware of any defect of the playground equipment they must report this to the Headteacher or Bursar who will determine the area out of bounds using hazard tape and reporting the defect to Childscape.

Risk Assessments

- All staff carry out risk assessments for the areas in which they work.
- Identified hazards will be brought to the attention of the employees concerned.
- There will be occasions when external advice is needed.
- Risk assessments will be filed in the Health and Safety folder.

Contractors on Site

Contractors engaged by the school will be required to make prior arrangements with the Headteacher/Bursar/Caretaker, who will advise them regarding access and timing.

Contractors must be made aware of the asbestos report and sign to say that they have read and are

aware of any asbestos. Currently the report confirms that there is no asbestos in the areas that have been inspected. Some areas were not accessible so these areas *may* contain asbestos.

Pregnant Employees

Any pregnant employee will require a specific risk assessment to be completed and then duties may need to be modified to take account of their changing capabilities.

Monitoring

On a regular basis we will monitor:

- | | |
|--|--|
| ❖ General site | ❖ Effectiveness of pupil supervision systems |
| ❖ Pathways | ❖ Fire precautions |
| ❖ Car park | ❖ Evacuation procedures |
| ❖ Boundary fencing | ❖ Signs |
| ❖ Playground | ❖ Fire drill systems |
| ❖ Classrooms | ❖ Lockdown procedures |
| ❖ Hall | ❖ Safety systems |
| ❖ Litter | ❖ First Aid procedures |
| ❖ General lighting and ventilation | ❖ Medicines / pupil illness procedures |
| ❖ Floor, furniture, door systems | ❖ Remedial action to deal with problems |
| ❖ First Aid supplies and defibrillator | ❖ Visual inspection of electrical appliances |

Rochdale Borough Council
SCHOOL SAFETY PROCEDURES

This form is a supplement to the Council's Corporate Safety Policy giving details of the people responsible for implementing the safety procedures within the school.

Area of responsibility		Responsible person
The person responsible for implementing Rochdale Council's Safety Policy here is		Governing Body
The person delegated as the health and safety lead / co-ordinator within this School is		Kate Edwards
Accidents & emergencies		
Implementing the emergency plan		Headteacher
Implementing emergency evacuation procedures:		Headteacher / Bursar
Report accidents and incidents to:		Headteacher / Bursar
Accidents and incidents will be investigated by:		Headteacher / Bursar
Completion of on-line incident forms		Bursar
Reporting RIDDOR incidents to the Safety Team		Bursar
Monitoring accidents and incidents		Headteacher
Responsible for preparing Personal Emergency Evacuation Plans (PEEPs)		Headteacher and Bursar
First aiders are:	Angela McQuaid Tracey Laycock Dawn Kenyon	
Health & safety training and information		
First day induction – safety familiarisation		Headteacher
Employee safety training needs & retention of training records		Bursar
Informing visitors of safety procedures and "school rules"		Administrator / Bursar
Informing contractors of known hazards which may exist e.g. asbestos		Administrator / Bursar
Consultation		
Raise health & safety issues with		Bursar
Meetings where health & safety issues should be raised including those for consultation with unions		Team Meeting

Union Safety Representative	Shirley Bannan
-----------------------------	----------------

Buildings & equipment management	
Checking health and safety standards prior to purchase of plant, equipment or services	Bursar
Arranging inspection and maintenance of equipment and plant:	Bursar
Keeping inventories and records of equipment and plant inspections:	Bursar
Carrying out routine safety inspections or checks:	Bursar / Caretaker
Fire Risk Assessment:	Bursar
Organising fire drills and keeping fire log-book:	Bursar / Headteacher
Fire Wardens are:	Siân Hamer Claire Crawford Kate Edwards Rayna Niazi Shirley Bannan Andrea Shires
Issue and inspection of personal protective equipment (PPE):	Caretaker
Risk assessment responsibilities	
Teachers & teaching staff	Headteacher
Caretaker & cleaning staff	Facilities Management
Kitchen staff	Facilities Management
Office & admin staff	Bursar
Lunchtime supervisors	Bursar
Communal areas	Bursar
Minibus	N/A
Art	Art Subject Leader
Design & technology – Food technology	DT Subject Leader
Design & technology – Resistant materials	DT Subject Leader
Science	Science Subject Leader
Physical education	PE Subject Leader
Co-ordinating risk assessments:	Bursar
Co-ordinating COSHH risk assessments:	Facilities Management
Arranging health surveillance (where applicable):	Bursar

Review date:	In line with Health and Safety Policy
--------------	---------------------------------------

When completed, make these arrangements known to all staff and display prominently in the staff room.

Head Injury and Concussion

Most head injuries are not serious. You do not usually need to go to hospital and should make a full recovery within 2 weeks.

<https://www.nhs.uk/conditions/minor-head-injury/>

Go to A&E after a head injury if you or your child have:

- been knocked out but have now woken up
- been vomiting since the injury
- a headache that does not go away with painkillers
- a change in behaviour, like being more irritable
- problems with memory
- been drinking alcohol or taking drugs just before the injury
- a blood clotting disorder (like haemophilia) or take blood-thinners (like warfarin)
- had brain surgery in the past

You or your child could have [concussion](#).

Symptoms usually start within 24 hours, but sometimes may not appear for up to 3 weeks.

[Find your nearest A&E](#)

Call 999 if someone has hit their head and has:

- been knocked out and has not woken up
- difficulty staying awake or keeping their eyes open
- a fit (seizure)
- problems with their vision
- clear fluid coming from their ears or nose
- bleeding from their ears or bruising behind their ears
- numbness or weakness in part of their body
- problems with walking, balance, understanding, speaking or writing
- hit their head in a serious accident, such as a car crash

Also call 999 if you cannot get someone to A&E safely.

How to Treat a Minor Head Injury

If you do not need to go to hospital, you can usually look after yourself or your child at home. It's normal to have such symptoms such as a slight headache or feeling sick or dazed for up to 2 weeks.

Do

- ✓ hold an ice pack (or a bag of frozen peas in a tea towel) to the injury regularly for short periods in the first few days to bring down any swelling
- ✓ rest and avoid stress – you or your child do not need to stay awake if you're tired
- ✓ take [paracetamol](#) or [ibuprofen](#) to relieve pain or a headache – **do not use aspirin** as it could cause the injury to bleed
- ✓ make sure an adult stays with you or your child for at least the first 24 hours – call 111 for advice if there's nobody who can stay with you

Don't

- ✗ do not go back to work or school until you're feeling better
- ✗ do not drive until you feel you have fully recovered
- ✗ do not play contact sports for at least 3 weeks – children should avoid rough play for a few days
- ✗ do not take drugs or drink alcohol until you're feeling better
- ✗ do not take sleeping pills while you're recovering unless a doctor advises you to

See a GP if:

- your or your child's symptoms last more than 2 weeks
- you're not sure if it's safe for you to drive or return to work, school or sports