



BRYANSTON

FIRST AID POLICY

1 INTRODUCTION

Bryanston School aims to meet and exceed the requirements of The Health and Safety (First-Aid) Regulations 1981. The school also takes account of the ISI guidance on First Aid. Bryanston will provide adequate and appropriate equipment, facilities and first aid at work trained staff (referred to in this document as First Aiders) to meet the reasonable needs of all staff, students, contractors and visitors at the school. Provision is made for the mental health and well-being of students and staff as well as the physical well-being but is outside the scope of this policy. Further information about mental health and well-being support that Bryanston gives to students and staff is available on request.

The First Aid Policy is reviewed annually by the Head of Health & Safety, in consultation with others where needed.

If a student is injured, the Medical Centre and Housemaster/mistress (HSM) will determine if and how to report the injury to a parent or guardian.

2 FIRST AID PROVISION

2.1 Promulgation

Heads of Departments, HSMs and Staff in Charge of Games/Activities are responsible for ensuring that their staff, students, contractors and visitors are aware of the first aid provisions that are in place for them. They are responsible for considering first aid in their risk assessments, and ensuring adequate controls are in place and communicated to all those who may be affected by the activity. This includes the term time and holiday arrangements for first aid, how to contact first aiders, the locations of first aid kits, how to report, use of supplies, and the reporting of accidents, near misses and sporting injuries.

2.2 Provision

First aid is provided by the Medical Centre staff and trained First Aiders during term time. During School holidays first aid is provided by trained First Aiders. During term time the Medical Centre is staffed 24 hours a day, 7 days a week by qualified Registered Nurses who will provide medical assistance for students, staff and visitors. A full register of 'First Aid at Work' trained staff is held and monitored by the Head of H&S. This list is also available in the Gatehouse and the Common Room.



There is a First Aid building (CJ Pavilion) located on the Playing Fields. This can be utilised by qualified staff, when required, for games sessions and School matches. Additional support is provided by paramedics and physiotherapists where a need has been identified.

2.3 Training

Training needs are considered and reviewed at least annually by Health & Safety Sub Committees. The Head of Health & Safety is responsible for the administration of general first aid training. All records of first aid training are kept by Human Resources and entered onto MyBry. Training is updated every 3 years but can be annually in any case.

The Head of H&S / Head of Department arranges the following first aid training:

- First Aid at Work
- Emergency First Aid at Work
- Basic Life Support/AED
- Water based First Aid
- Anaphylaxis, Asthma and Diabetes awareness
- Administration of Medicines

Specific first aid training can be arranged in addition to the above upon request.

The Sports Centre Manager arranges the training of Sports Centre staff, all of whom have ongoing First Aid and Water based training as part of their National Pool Lifeguard Qualification.

The Outdoor Education coordinator arranges for specific training as required for some staff involved in Outdoor Pursuits.

2.4 Contact Information

The Medical Centre can be contacted as follows:

Internal Calls:	Ext 621
External Calls:	01258 484 621
Nurse Duty Mobile:	07843 355 188
Nurse/First Aider Playing Fields:	07843 355 189

First Aiders can be contacted via the Gatehouse or directly. Gatehouse contacted details:

Internal Calls:	Ext. 0
External Calls:	01258 452411
Mobile:	07843 355180



2.5 First Aid Equipment

Equipment and supplies can be obtained from the Medical Centre and the Head of H&S.

2.6 First Aid Kits

Kits are provided to enable first aid to be rendered to anyone who becomes ill or injured at work. They are to be clearly displayed and easily accessible.

There are first aid kits in the following locations:

Every Boarding House	Grounds
School Vehicles	Climbing Tower
Catering	Music School
Housekeeping staff tearoom	Old Vehicle Workshop
Cafe	Admissions
Facilities Management	Common Room
Laundry	Bursary
Recycling Centre	Finance Bursary
School Shop	Stables
Coade Hall	Sports Centre
EEMR	Boat house – rowing and kayaking areas
Modern Languages	Pioneering
Sanger	Gatehouse
DT	Church
Art	A2 Social
Outdoor Ed	Photography Room
Heads Offices	Major Incident Boxes
Top Servery	Medical Centre

The Gatehouse holds a supply of stocked first aid kits that are available for Off Site Visits.

First Aid kits are issued to Heads of Sport upon request.

Each first aid kit is to be checked regularly by the Head of Department in which it is located, or an individual nominated by them, who is required to advise the Medical Centre, or Head of H&S, of any stock requirements. See Appendix C for guidance on kit contents.

First Aiders are responsible for restocking of a first aid kit when used. See Appendix C for guidance on kit contents. This can be used as a checklist.

It is the responsibility of the driver, of Bryanston vehicles, to check the first aid kit is adequately stocked prior to departing on a journey, and to request requisitions via the Gatehouse.

The Head of H&S may audit first aid boxes on a random basis to confirm compliance.



2.7 Defibrillator (AED)

There are 5 AEDs on site. These are located in the Gatehouse; Medical Centre; CJ Medical Pavilion; Boathouse and Sports Centre. Instructions for use are kept with the machine.

Staff working in these areas are trained in the use of AEDs.

The Head of Department in the area in which the AED is located is responsible for arranging weekly checks on the AED. These include checking:

- 1) The “rescue ready” green light is shining
- 2) The battery has at least 2 bars. The battery will need replacing when there are 2 bars; and
- 3) The pads are in date. Pads need to be checked in advance of their expiry date.

These weekly checks are to be recorded.

Faults should be reported to the Head of Health & Safety.

Replacement pads are available from the Health and Safety Office.

The Head of H&S arranges regular audits of the AED’s.

2.8 Adrenaline Auto Injectors (AAI. “EpiPen®”)

There are 8 generic AAI’s on site. These are located in the Gatehouse (X2); Medical Centre (x2); Catering (x2): CJ Medical Pavilion (x1) and Boathouse (x1).

Heads of Department, in these respective areas, are responsible for regularly checking these AAIs.

Instructions for use are kept with the AAI.

The majority of staff working in these areas are trained in the use of these.

The Head of H&S conducts audits of the generic AAI’s.



3 INCIDENT MANAGEMENT - AT POINT OF NEED

Levels of Incident

Level 3 Incident – Life threatening

Call an ambulance immediately.

When an ambulance is called the following procedure must be adhered to:

- 1) Contact the Gatehouse to inform them of emergency call and the incident location
- 2) The Gatehouse will then contact the following:
 - A member of Security, who will escort emergency services to the incident
 - Medical Centre (term time) or a First Aider (holiday time)
 - Second Master
 - Director of Operations
 - COO
 - Head of H&S

Level 2 Incident – Serious but not life threatening

Call an ambulance if necessary (follow procedure for calling an ambulance above).

Contact a first aider (term time and holidays) or a nurse (term time) OR take the injured person to the Medical Centre (term time).

Level 1 Incident – other injuries

Accompany injured person to the Medical Centre (term time) or summons help from a First Aider (term time and holidays).

Staff must always:

- Send students, no matter how slight the injury, to the Medical Centre. Not to their Boarding House.
- Accompany the injured student to the Medical Centre themselves or send them with another student or member of staff. DO NOT send them alone. If possible, call the Medical Centre to advise them to expect the student.
- If a student is Anaphylactic and having a reaction OR is not well enough to walk to the Medical Centre, you MUST phone the Medical Centre and inform the team. The nurses will come to you with the relevant kit.



4 Arrangements for Students with Long Term Medical Conditions

Students who have chronic medical conditions such as asthma, diabetes, dietary allergies/intolerance, and epilepsy have their conditions recorded on Medical iSAMs. The Medical Centre, HSMs and all relevant staff have access to this information and are responsible for disseminating it as required.

All students with medical conditions going on school trips are identified by the trip leader before the trip leaves so that the accompanying staff are aware of both the issue and any possible intervention or action that might be required on their part. Training is available to assist these staff, for example training in anaphylaxis and asthma awareness.

5 Dealing with the spillage of bodily fluids

Staff must ensure that if they have cuts or abrasions these are covered with waterproof or other suitable dressings before administering first aid. Staff should wear disposable gloves and apron, and other appropriate PPE if available, when dealing with bodily fluids.

All spillages must be cleared up as soon as possible. Bodily Fluid Spillage Clean Up Kits are provided in all boarding houses and are available from the Gatehouse and Housekeeping. These must be disposed of as contaminated waste in the specific yellow bin outside the Medical Centre. These kits are replenished by Housekeeping.

Contaminated bedding, clothing, etc. is to be placed in a red bag and sent to the School Laundry.

Housekeeping is to be informed of any spillages of bodily fluids, and the area closed off wherever possible until cleaning, including steam cleaning, has taken place.



6 Accident and Near Miss Reporting

All accidents and near misses must be recorded via the online reporting system.

A 'Near Miss' is an incident in which an injury could have occurred, but in the end did not.

Accident reporting should be made online via the Staff Hub. Accident books are located in the Gatehouse and the Medical Centre, when access to the hub is not available.

Near-miss reporting can be made by email or via the Staff Hub.

Where an incident involves a pupil, it will be the responsibility of the medical centre and/or the HSM to inform parents of the event, where necessary.

All reported accidents and near misses are reviewed. In the event of an accident the those involved may be interviewed, and all reportable accidents are investigated. In considering all reports, patterns are looked for, and improvements are made where identified.

A report is given to relevant H&S Sub-Committees termly.

6.1 RIDDOR

The Head of H&S is responsible for recording and reporting of incidents in accordance with the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013. Appendix B provides a summary of the reporting requirements of RIDDOR.

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Author: Medical Centre Manager/Head of Health & Safety



APPENDIX A

Procedure for the Reporting of Sports Injuries

This procedure is to be followed for injuries that are sustained by Bryanston students when playing sports.

The aim of the above reporting procedures is:

- to ensure that Bryanston investigates and reports incidents as appropriate and in accordance with RIDDOR and general good practice.
- to enable Bryanston to look at any patterns in injuries sustained and consider any controls that may be necessary.

Sports Injuries sustained on site must be reported to the first aider/nurse on duty at the playing fields or to the Medical Centre.

The nurse/first aider on duty at the playing fields will record injuries on the Sporting Injuries Record Sheet.

Injuries reported to the Medical Centre will be recorded in the daybook, and on the student's medical record if a boarder.

Details of sporting injuries will be provided by the Medical Centre to the Director of Sport half termly for consideration.



APPENDIX B

Summary of Reporting & Recording Requirements of RIDDOR 2013

RIDDOR is the Reporting of Injuries, Diseases & Dangerous Occurrences Regulations 2013.

RIDDOR is the law that requires employers, and other people who are in control of work premises, to report and keep records of:

- work-related accidents which cause deaths
- work-related accidents which cause certain serious injuries
- diagnosed cases of certain industrial diseases; and
- certain 'dangerous occurrences' (near miss incidents).

REPORTING REQUIREMENTS

Deaths

A death must be reported if:

- it results from a work accident
- a worker sustains an occupational injury
- it results from an act of physical violence to a worker.

Injuries to people at work

RIDDOR gives two types of injuries that must be reported if the person was at work: 'specified injuries' and 'over- seven-day injuries'.

1) Specified injuries These include:

- a fracture, other than to fingers, thumbs and toes
- amputation of an arm, hand, finger, thumb, leg, foot or toe
- permanent loss of sight or reduction of sight
- crush injuries leading to internal organ damage
- serious burns (covering more than 10% of the body, or damaging the eyes, respiratory system or other vital organs)
- scalping which require hospital treatment
- unconsciousness caused by head injury or asphyxia
- any other injury arising from working in an enclosed space, which leads to hypothermia, heat induced illness or requires resuscitation or admittance to hospital for more than 24 hours.



2) Over-seven-day injuries

This is where an employee is away from work or unable to perform their normal work duties for more than seven consecutive days (not counting the day of the accident).

Injuries to people not at work

Work-related accidents involving members of the public or people who are not at work must be reported if a person is injured and is taken from the scene of the accident to hospital, for treatment to that injury. There is no requirement to establish what hospital treatment is actually provided, and no need to report incidents where people are taken to hospital purely as a precaution when no injury is apparent.

If the injury occurred at a hospital, the report only needs to be made if the injury is a 'specified injury' (see above).

Reportable occupational diseases

Employers and self-employed people must report diagnoses of certain occupational diseases, where these are likely to have been caused by or made worse by work. This must be done when a written diagnosis from a doctor is received. These diseases include carpal tunnel syndrome; severe cramp of the hand or forearm, occupational dermatitis; hand-arm vibration syndrome; occupational asthma; tendonitis or tenosynovitis of the hand or forearm; any occupational cancer; any disease attributed to and occupational exposure to a biological agent.

Reportable dangerous occurrences

Dangerous occurrences are certain, specified near-miss events. Not every near-miss event must be reported. There are 27 categories of dangerous occurrences that are relevant to all workplaces, for example:

- the collapse, overturning or failure of load-bearing parts of lifts and lifting equipment
- plant or equipment coming into contact with overhead power lines
- explosions or fires causing work to be stopped for more than 24 hours.

Recording requirements

Employers are required to keep records of:

- Any accident, occupational disease or dangerous occurrence which required reporting under RIDDOR; and
- Any other occupational accident-causing injuries that result in a worker being away from work or incapacitated for more than seven consecutive days (not counting the day of the accident but including any weekends or other rest days).



APPENDIX C

First Aid Box - Contents List

The following should be used as a guide.

The contents of your first aid kit should be suitable for the risks identified in the area it may be used.

Contents	Kit Size / Type					
	Small 1-24 	Medium 25-100 	Large 100+ 	Sport	Personal issue	Vehicle
Assorted Plasters	40	60	100	40	10	20
Conforming Bandage	1	2	2	2	0	0
Medium dressing	2	4	6	3	1	1
Large dressing	2	3	4	2	0	0
Adherent dressing	4	6	8	4	0	1
Triangular bandage	2	3	4	3	1	1
Eye pad	2	3	4	3	1	0
Cleansing wipes	20	30	40	30	5	10
Tape	1	2	3	1	1	0
Gloves (pairs)	6	9	12	9	3	4
Finger dressing	2	3	4	3	1	0
Resus face shield	1	1	2	1	1	1
Foil blanket	1	2	3	2	1	1
Burn dressing	1	2	2	0	0	2
Shears	1	1	1	1	1	1
Clinical waste bag (yellow)	1	1	2	1	1	1

Based on BS8599-1:2019

The following departments should have 'medium' kits as a minimum:

- Science
- CDT
- Grounds
- Sports Centre
- Equestrian
- Coade Hall
- Boat House

Catering environments should ensure the contents are suitable for these locations.

Such contents should include blue plasters and additional burns treatment where needed.