



First Aid Policy and Procedure

Reviewed 01/09/2025

Next Review: 01/09/2026

Introduction

Running Deer C.I.C. ('The Intervention Service') is committed to providing emergency first aid provision in order to deal with accidents and incidents affecting employees, children, and visitors.

The arrangements within this policy are based on the results of a suitable and sufficient risk assessment carried out by the Intervention Service in regard to all staff, young persons and visitors.

The Intervention Service will take every reasonable precaution to ensure the safety and well-being of all staff and children.

The Intervention Service has various risk assessments and policies that must be read by all staff which detail risks which must be considered for specific activities or for being in a specific location.

The Executive Directors have overall responsibility for ensuring that the Intervention Service has adequate and appropriate first aid equipment, facilities and first aid personnel and for ensuring that the correct first aid procedures are followed.

This policy aims to comply with Part Three of the Education (Independent Intervention Service Standards) (England) Regulations 2014, the Health and Safety at Work etc Act 1974 and subsequent regulations and guidance including the Health and Safety (First Aid) Regulations 1981 (SI 1981/917) and the First aid at work: Health and Safety (First Aid) Regulations 1981, approved code of practice and guidance.

All staff should read and be aware of this Policy, know who to contact in the event of any illness, accident or injury and ensure this Policy is followed in relation to the administration of first aid. All staff will use their best endeavours, at all times, to secure the welfare of the children.

Anyone on the Intervention Service premises is expected to take reasonable care for their own and others' safety.

Aims of this Policy

- To ensure that the Intervention Service has adequate, safe and effective first aid provision in order for every young person, member of staff and visitor to be well looked after in the event of any illness, accident or injury; no matter how major or minor.
- To ensure that all staff and young people are aware of the procedures in the event of any illness, accident or injury.
- To ensure that medicines are only administered at the Intervention Service when express permission has been granted for this.
- To ensure that all medicines are appropriately stored.
- To promote effective infection control.
- Nothing in this policy should affect the ability of any person to contact the emergency services in the event of a medical emergency. For the avoidance of doubt, staff should dial 999 for the emergency services in the event of a medical emergency before implementing the terms of this Policy and make clear arrangements for liaison with ambulance services on the Intervention Service site.

To achieve the Policy Aims, the Intervention Service will:

- Have suitably stocked first aid boxes (responsibility of the Executive Directors).
- Carry out a suitable and sufficient assessment of the risks posed to persons in the event that they suffer an accident, injury or ill health
- Appoint sufficient First Aiders (qualified by training) to take charge of first aid. The certification will be reviewed regularly to ensure that it is current. If possible, all full-time staff will be first aid trained.

The Intervention Service will maintain a record of employees who have undergone first aid training, which can be requested from the Director of Intervention Services.

- Provide information to employees, young people and parents on the arrangements for first aid.
- Have a procedure for managing accidents, including immediate liaison with emergency services, medical staff and parents.
- Ensure that an accident record file is maintained at Waterside, Berry Pomeroy, and every incident that requires first aid is recorded and filed including any treatment given. The forms will be reviewed and analysed for patterns regularly and remedial action put in place.
- Ensure that a holder of a current First Aid certificate accompanies all trips, walks and field trips. A portable first aid kit will be taken on all such trips.
- Ensure that appropriate hygiene is observed at all times and rubber surgical gloves will be provided and used in any instance involving blood.
- Review and monitor arrangements for first aid on as appropriate on a regular basis (and at the very least on an annual basis).

First Aid Boxes and First Aid Travel Kits

The first aid boxes are in the following locations:

- Company vehicles
- Waterside and Waterside annex, Berry Pomeroy, Totnes, TQ9 6LH

First Aiders

The main duties of First Aiders are to give immediate first aid to young people, staff or visitors when needed and to ensure that an ambulance or other professional medical help is called when necessary.

First Aiders are to ensure that their first aid certificates are kept up to date through liaison with the Managing Director.

The Executive Directors have a responsibility to ensure all first aid kits are properly stocked and maintained.

Emergency Procedure in the event of an accident, illness or injury

If an accident, illness or injury occurs, the member of staff in charge will assess the situation and decide on the appropriate next course of action, which may involve calling immediately for an ambulance or calling for a First Aider (all intervention practitioner, Centre Manager and Director of Interventions).

If summoned, a First Aider will assess the situation and take charge of first aid administration. In the event that the First Aider does not consider that he/she can adequately deal with the presenting condition by the administration of first aid, then he/she should arrange for the injured person to access appropriate medical treatment without delay.

Where an initial assessment by the designated First Aider indicates a moderate to serious injury has been sustained then one or more of the following actions will be taken:

1. Risk assessment: check to make sure that the First Aider and the casualty, or anyone else are not in any further danger.
2. Check for response from the casualty (e.g. talking to them, applying pressure to the bridge of the nose)
3. Call for help (999) and anyone nearby.
4. Check for catastrophic bleeding and treat immediately.
5. Check airways and breathing, begin CPR if necessary.
6. Where necessary, staff may accompany or transport the casualty to hospital.
7. See to any children who may have witnessed the accident or its aftermath and who may be worried, or traumatised, in spite of not being directly involved. They will need to be taken away from the accident scene and comforted. Younger or more vulnerable children may need parental support to be summoned immediately.

8. When the above action has been taken, the incident must be reported to:

- a) the Executive Directors
- b) the parents and carers (or other closest relatives) of the victim(s), and
- c) the police, if a criminal offence may have occurred.

9. Allocate staff resources carefully between helping the victim(s) (e.g. by accompanying them to hospital), dealing with the direct aftermath of the accident and looking after young people not affected by the accident. All three activities are important.

10. Require (in so far as it is reasonable to do so) all adult witnesses and older children who are witnesses (including those arriving on the scene after the accident), to write down in their own hand and in their own words exactly what they saw and heard. This first-hand evidence can be invaluable, if litigation follows the accident.

11. Complete a 'Accident/Incident/Illness Report Form' contained within the first aid box in the office at Waterside, Berry Pomeroy.

12. If the accident is serious, report the matter to the Running Deer Board of Directors and Running Deer's insurers. Report it also to the local authority, which may be able to give advice and assistance, especially if there is media interest shown.

13. Without delay, begin to consider ways of preventing such an accident from happening again and implement those preventative measures.

14. If the accident is very serious, or fatal, report the matter to the Health and Safety Executive.

15. Make arrangements for the return to Intervention Service of the accident victim(s) and of those worried or traumatised by the accident.

If the initial assessment indicates that a minor injury has taken place, then one or more of the following actions will be taken:

1. First Aid administered as necessary by designated First Aider.
2. Complete a form in the Accident Book
3. Parents/carers informed (generally at the end of the day).

Ambulances

The designated First Aider is to always call an ambulance on the following occasions:

- In the event of a serious injury.
- In the event of any significant head injury.
- In the event of a period of unconsciousness.
- Whenever there is the possibility of a fracture or where this is suspected.
- Whenever the first aider is unsure of the severity of the injuries.
- Whenever the first aider is unsure of the correct treatment.

If an ambulance is called, then the First Aider in charge should make arrangements for the ambulance to have access to the injured person. Arrangements should be made to ensure

that any young person is accompanied in an ambulance, or followed to hospital, by a member of staff until one of the young person's parents, guardians or their named representative is present. A member of staff will remain with the young person until one of the young person's parents, guardians or a named representative appointed by a parent arrives at the hospital.

Procedure in the event of contact with blood or other bodily fluids

First Aiders should take the following precautions to avoid risk of infection:

- cover any cuts and grazes on their own skin with a waterproof dressing.
- wear suitable disposable gloves when dealing with blood or other bodily fluids.
- use suitable eye protection and a disposable apron, where splashing may occur.
- use devices such as face shields, where appropriate, when giving mouth to mouth resuscitation.
- wash hands after every procedure.

If a First Aider suspects that they or any other person may have been contaminated with blood and/ or other bodily fluids which are not their own, the following actions should be taken without delay:

- wash splashes off skin with soap and running water.
- wash splashes out of eyes with tap water and/or an eye wash bottle.
- wash splashes out of nose or mouth with tap water, taking care not to swallow the water;
- record details of the contamination.
- take medical advice (if appropriate).

Reporting to parents and carers

In the event of accident or injury to a child, at least one of the child's parents/carers must be informed as soon as practicable. Parents must be informed in writing of any injury to the head, minor or major, and be given guidance on action to take if symptoms develop. In the event of serious injury or an incident requiring emergency medical treatment, the Centre Manager or Director will telephone the young person's parents/carers as soon as possible. A list of emergency contact details is kept on site with child files at Waterside, Berry Pomeroy, Totnes.

Visits and events off site

Before undertaking any off-site events, the teacher organising the trip or event will assess level of first aid provision required by undertaking a suitable and sufficient risk assessment of the event and persons involved. This will be reviewed by the Executive Directors before the event is organised. Risk assessments such as Transporting Young People are available to staff.

Storage of medication

Medicines are always securely stored in accordance with individual product instructions, save where individual young people have been given responsibility for keeping such equipment with them. All medicines shall be stored in the original container in which they were dispensed, together with the prescriber's instructions for administration and properly labelled,

showing the name of the patient, the date of prescription and the date of expiry of the medicine. All medicines will be returned to the parent when no longer required to arrange for safe disposal.

An emergency supply of medication should be available for young persons with medical conditions that require regular medication. Parents should advise the Intervention Service when a child has a chronic medical condition so that staff can be trained to deal with any emergency in an appropriate way. Examples of this would be epilepsy and diabetes. A disclaimer will be signed by the parents in this regard.

In general, staff will not administer any form of medication unless there is an emergency and then on the advice of the emergency services/on-call doctor.

Illness

Children will be able to rest whilst awaiting parents or guardians to retrieve them where appropriate. This area has easy access to a toilet and hand washing facilities. Young people will be monitored during this time. When a child becomes ill during the day the parents/guardians will be contacted and asked to pick their child up from Intervention Service if necessary.

Conclusion

Parents and services will be asked to complete and sign a Medical Consent Form when a child is admitted to the Intervention Service, which includes emergency numbers and consent for the administration of emergency first aid. These forms will be updated periodically. Details of allergies and chronic conditions will be included on this form.

Staff do not act in loco parentis as this has no basis in law. Staff always aim to act and respond to accidents and illness based on what is reasonable under the circumstances and will always act in good faith while having the best interests of the child in mind.

Contact Running Deer Intervention Services

Waterside, Berry Pomeroy, Totnes, TQ9 6LH

Email: ifs@runningdeer.org.uk