

First Aid / Healthcare Policy

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1) Introduction

The safety of participants in NYB activity is paramount. This policy sets out First Aid and medical provision for online, residential and non-residential activity.

2) Aims

- a) to support children with medical needs attending NYB activity
- b) to outline procedures for first aid and / or medical treatment during residential and non-residential activity
- c) to ensure appropriate risk assessment as we understand that prevention is better than cure
- d) to ensure that we align with our value of safe practice

3) Definitions

The term “**National Youth Ballet community**” encompasses all National Youth Ballet participants, company members, staff, parents, volunteers and alumni.

4) Scope

This policy considers residential, non-residential and online activity.

5) Training

For all NYB activity, at least one member of the core NYB team will hold a relevant and up to date certificate in First Aid / Mental Health First Aid. This person (or persons) will be identified at all activity as the **Designated First Aider (DFA) / Designated Mental Health First Aider (DMHFA)**.

For residential activity, the **Support Team Healthcare Worker - onsite medic** - would normally be the DFA and may also hold a relevant and up to date certificate in First Aid / Mental Health First Aid. This person will lead on all onsite medical concerns. In addition, there will also be one member of the core NYB team who holds a relevant and up to date certificate in First Aid / Mental Health First Aid to assist. These people will be identified at the residential as part of the support team.

Where possible, House Parents will preferably also hold a First Aid / Mental Health First Aid certificate, although this is not mandatory.

NYB will provide a mandatory training on how to use an EpiPen in advance of all residential activity.

All staff are required to follow the procedures set out in this policy.

The Support Team Healthcare Worker will lead on administering medication centrally and will hold a relevant and up to date certificate in administering medications.

6) Non-Residential

All non-residential activity will have a DFA onsite who will be responsible for locating the appropriate medical resources at the venue prior to the start of any activity. They will also be responsible for updating the confidential Digital Medical and/or Accident log.

In the event of a participant requiring extra medical (non-emergency) assistance National Youth Ballet will access NHS111 or the Accident and Emergency services at the nearest available hospital.

If a participant becomes unwell e.g. develops a temperature whilst attending an NYB activity, parents / carers will be contacted and asked to collect their child and to advise on administering paracetamol to control the child's temperature until the parent arrives. Prior written consent to administer these medicines is requested when parents / carers complete registration forms.

7) Online

During online activity participants are instructed on how to perform checks to ensure that their space is appropriate to the activity and must seek permission from parents / carers before participating. Warm-ups are included in all online activity to minimise the risk of injury to participants.

8) Residential Activity Support Team

During residential periods, the **NYB Safeguarding and Support Team Manager** leads a support team to ensure that children are well cared for at all times. The support team includes House Parents working with the **Support Team Healthcare Worker**, who carries the NYB medical phone at all times). Both will be onsite and available at all times. In addition, there will be a visiting qualified **Sports Therapist** available daily in a two-hour surgery to assess physical injuries.

If a participant has a long-term medical / health condition we will seek additional advice from the parent/carer on how we can best support the child to attend our setting and any roles that will be required of us. We may seek further advice from an external health care practitioner.

During theatre performances or other events the Safeguarding and Support Team Manager and DFA will be supported by the theatre/other venue that must nominate an individual to take charge should a First Aid emergency occur. On arrival at the theatre/other venue the Safeguarding and Support Team Manager will establish the identity of First Aid support staff on duty, and ensure that all National Youth Ballet staff have this information.

In the event of a participant requiring extra medical (non-emergency) assistance National Youth Ballet will access NHS111 or the local GP walk-in centre. In the event of a participant requiring extra medical (emergency) assistance National Youth Ballet will access the Accident and Emergency services at the nearest available hospital. NYB prepares a list in advance of local A&E services including an emergency dentist.

If a participant needs to be taken to the walk-in GP centre or the local A&E, the participant will be accompanied by the House Parent and another member of the NYB Support Team so that the participant is never left unattended whilst at hospital. The parent / carer will be informed immediately should the child require offsite medical attention.

In the highly exceptional circumstance that there is no Support Team Healthcare Worker and there are no trained First Aid members of staff on-site at the residential setting or within the theatres/other venues, National Youth Ballet staff will always call NHS111 or 999 for emergency medical support.

The Safeguarding and Support Team Manager and DFA will be responsible for regularly checking National Youth Ballet's own First Aid box/es, and the First Aid boxes in situ at all venues, and ensuring that any missing contents are replaced. A suitable room will be designated on site, (reasonably near a WC and comprising a washbasin) for use for medical treatment when required.

9) Residential - Administering Medication to participants

Participants must be well enough to attend NYB activity, including those taking non-prescribed and prescribed medication.

- a) Parents / carers will be asked in advance to complete the Residential Participation Questionnaire which includes questions about additional needs, medical, physical, and emotional health and wellbeing, including injuries or accidents. This information is confidential and stored in a confidential area of the NYB Google Drive. This will be discussed with our Safeguarding and Support Team Manager and our Support Team Healthcare Worker to ensure NYB is prepared in advance to support our participants as best as possible and where necessary a support plan will be put in place. This information will also be updated nearer the time of the residential.
- b) The Residential Participation Questionnaire includes the consent to Administer non-prescribed Medication (paracetamol, ibuprofen, calpol and plasters). Please note NYB cannot administer these non-prescribed medications unless parent / carer consent has been given.
- c) The Residential Participation Questionnaire includes a question about prescribed medication. Please note NYB cannot administer prescribed medications unless a doctor, dentist or nurse has prescribed them. Any medicine containing Aspirin can only be given if a doctor, dentist or nurse, (not an over-the-counter medication) has prescribed it.
- d) If a participant is on a prescribed medicine during an NYB Residential we will only administer medicine whilst the participant is in our care under the following circumstances:
 - parents / carers have completed the Residential Participation Questionnaire informing us if the participant is on any prescribed medications and specifically whether they carry an epipen or allergy medication.
 - parents / carers should provide the name of the child, name/s of parent(s) / carer(s), date the medication starts, the name of the medication and prescribing doctor, the dose and times, or how and when the medication is to be administered.
 - Medicines are in date and clearly labelled with a prescription in the name of the child.
 - If the medication is to be taken for a full course we will follow the advice given initially until the parent/carer informs us of any changes.
 - parents / carers agree to provide prescribed medication stored in their original containers / packaging and are clearly labelled

- e) If the administration of prescribed medication requires medical knowledge, individual training should be provided for the relevant member of staff by a healthcare professional.
 - f) If refrigeration is required this will be provided
 - g) The administration of any medication is always recorded in the confidential Digital Medical and/or Accident log accurately each time it is given and initialised by the staff member completing the form
 - h) Administration of prescribed medication will be undertaken centrally by the Support Team Healthcare Worker following written directions from the parent/carer as outlined in the Residential Participation Questionnaire. Another member of the NYB staff will be present when medicines are given to ensure the correct dosage is administered and recorded in the confidential digital medical log. If medication needs to be administered whilst in a performance setting e.g. theatre, this will be done by the Support Team Healthcare Worker or Safeguarding and Support Team Manager and not by a chaperone or House Parent. House Parents will only be asked to administer medication in exceptional circumstances, and only after discussion with the Support Team Healthcare Worker. This must also be recorded in the confidential Digital Medical and/or Accident log.
- 10) Residential - Participants self-administering medication**
- a) NYB will support participants who self-administer, and will record this in the confidential digital medical log according to the outline below.
 - b) Where a participant self-medicates regularly (e.g. asthma, diabetes), the parent/carer can request a meeting with the Safeguarding and Support Team Manager to agree on the most suitable support plan for the participant. There must always be written agreement between the Parent / Carer and NYB.
 - c) The Residential Participation Questionnaire asks the Parent/Carer to confirm whether the participant can administer their own medication or if the participant requires supervision to administer their own medication e.g. asthma inhalers. If necessary, we will ask the parent/carer to give a demonstration on the use of the inhaler.
 - d) The administration of any medication is always recorded in the confidential Digital Medical and/or Accident log accurately each time it is given and initialised by the staff member completing the form
- 11) Residential and non-residential - Medication for NYB team members**
- a) All team members working for NYB will be asked to complete a Staff Questionnaire which allows NYB to support staff as best as possible. This includes information about any additional needs or requirements which includes medical and healthcare.
 - b) If team members need to bring prescription or non-prescription medication onto site whilst working with NYB, this should be kept safe and secure from participant access at all times. If there is no access to a lockable safe space then please ensure containers are

clearly named with any medication in it and given to the DFA to store safely. It is not necessary for the DFA to be aware of the contents of this container. Where a member of staff needs to carry medication at all times (e.g. an inhaler or epipen) then please also ensure that it is clearly labelled and that this is kept secure on your person at all times.

- c) Where a member of staff has an Access Rider, we will work together to ensure we do our best to support and make reasonable adjustments. We may seek further advice from an expert health care practitioner.

12) Storage of medication

All medication will be stored safely and securely overnight in a locked room out of reach of participants.

13) Procedures for Accidents or if a Team member of Staff / Volunteer or Visitor becomes unwell (Residential and Non-Residential)

- a) All incidents will be handled by the Support Team Healthcare Worker or DFA or by any other designated First Aid team member who is available.
- b) The first person on the scene or a First Aider will make an assessment and dial 999 for an ambulance if the injury or symptoms indicate the need for urgent medical attention.
- c) If less urgent medical attention is required, arrangements will be made to accompany the injured person to the nearest hospital A&E by taxi.
- d) An entry into the Confidential Digital Medical and/or Accident log must be completed as soon as possible after any accident occurs and no later than 24 hours after the incident has occurred.

14) Procedures for accidents or if a participant becomes unwell (Residential and Non-Residential)

- a) If a minor injury or accident has occurred the NYB Safeguarding and Support Team Manager, Support Team Healthcare Worker or DFA should be alerted immediately and decide whether external medical advice is required e.g. NHS 111.
- b) Parent / Carer will be contacted in the event of an accident or incident that requires external medical assistance.
- c) In the case of a participant requiring external medical assistance, two members of the support team will accompany the participant to hospital. The NYB Safeguarding and Support Team Manager or Support Team Healthcare Worker or DFA will record the incident in the confidential Digital Medical and/or Accident log.
- d) **Residential only** - If a participant becomes ill during the night, the House Parent will be the first person to investigate the nature of the illness. If the House Parent has any concerns, the House Parent will inform the NYB Safeguarding and Support Team Manager and contact the Support Team Healthcare Worker to assess. In cases of minor illness where a child is unable to attend rehearsals/classes or a performance the Safeguarding and Support Team Manager will be informed immediately and will inform

the Artistic Director. The participant's parent / carer will be contacted. The House Parent will record all details in the confidential digital Medical and/or Accident Log.

- e) In cases of severe illness or accident, the House Parent will call 999 and request an ambulance and then contact the NYB Safeguarding and Support Team Manager and Support Team Healthcare Worker. Depending on the nature of the illness, in an emergency, the House Parent may also administer emergency First Aid.
- f) NYB will follow the guidelines set out in the Infectious Disease Outbreak Plan for any illness that falls into this category.
- g) An entry into the Confidential Digital Medical and/or Accident log must be completed as soon as possible after any accident occurs and no later than 24 hours after the incident has occurred.

15) Accident Records and Notifications

- a) An entry into the confidential Digital Medical and/or Accident log must be completed as soon as possible after any accident occurs and no later than 24 hours after the incident has occurred.
- b) National Youth Ballet follows the guidance given by the HSE. Under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR), National Youth Ballet must notify the Health & Safety Executive (HSE) as soon as possible of:
 - i) Any accidents to employees/volunteers causing either death or major injury;
 - ii) Certain industry related diseases suffered by employees/volunteers;
 - iii) Dangerous occurrences;
 - iv) Any accidents to members of the public ("the public" includes students), where any is killed or taken from the premises to a hospital for treatment.
- c) To make a report, call the HSE Incident Contact Centre on 0845 300 99 23 (Monday to Friday, 0830 - 1700). An ICC Operator will complete a report form and send a copy.
- d) Accidents to participants, which are attributable in some way to events organised by National Youth Ballet, or the condition of premises, or lack of or defective supervision, where injury is suffered and where the participant is taken to hospital for treatment, must be reported. An investigation should be carried out as soon as possible after any accident occurs, so that problem areas or procedures are identified and remedial action can be taken if necessary. The reportable major injuries, reportable dangerous occurrences and reportable diseases relevant to the employer are as follows:

<p>Reportable Major Injuries</p>	<ul style="list-style-type: none"> ● Fracture other than to fingers, thumbs or toes; ● Amputation ● Dislocation of shoulder, hip, knee or spine ● Loss of sight (temporary or permanent) ● Chemical or hot metal burn to the eye or any penetrating injury to the eye ● Injury resulting from an electric shock or electrical burn leading to unconsciousness or requiring resuscitation or admittance to hospital for more than 24 hours ● Any other injury leading to hypothermia, heat-induced illness or unconsciousness or requiring resuscitation or requiring admittance to hospital for more than 24 hours. ● Unconsciousness caused by asphyxia or exposure to harmful substance or biological agent ● Acute illness requiring medical treatment or loss of consciousness arising from absorption of any substance by inhalation, ingestion or through the skin. ● Acute illness requiring medical treatment where there is reason to believe that this resulted from exposure to a biological agent or its toxins or infected material.
<p>Reportable Dangerous Occurrences</p>	<ul style="list-style-type: none"> ● Collapse, overturning or failure of load-bearing parts of lifts and lifting equipment ● Collapse or bursting of any closed vessel or associated pipe work ● Electrical short circuit or overload causing fire or explosion ● Any unintentional explosion, misfire, failure of demolition to cause the intended collapse, projection of material beyond a site boundary, injury caused by an explosion ● Accidental release of a biological agent likely to cause severe human illness ● Collapse or partial collapse of a scaffold over five metres high, or erected near water where there could be a risk of drowning as a result ● Dangerous occurrence at a well (other than a water well) ● When a dangerous substance being conveyed by road is involved in a fire or released ● Unintended collapse of any building or structure under construction, alteration or demolition where over five tonnes of material falls, including a wall or floor in a place of work, any false work ● Explosion or fire causing suspension of normal work for over 24 hours ● Sudden, uncontrolled release in a building of 100kg or more of flammable liquid, 10kg of flammable liquid above its boiling point, 10kg or more of flammable gas or 500kg of these substances if the release is in the open air ● Accidental release of any substances, which may damage health

Reportable Diseases	<ul style="list-style-type: none"> ● Poisonings ● Skin diseases such as occupational dermatitis, skin cancer, chrome ulcer, oil folliculitis/acne ● Lung diseases including occupational asthma, farmer's lung, asbestosis, mesothelioma ● Infections such as leptospirosis, hepatitis, anthrax, legionellosis and tetanus ● Other conditions such as occupational cancer, certain musculoskeletal disorders, decompression illness and hand-arm vibration syndrome.
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All staff /volunteers must notify the CEO / Safeguarding and Support Team Manager of all reportable incidents i.e. those reportable to HSE under RIDDOR.

The CEO is responsible for reporting to the HSE all notifiable incidents. The CEO and/or a member of the Board of Trustees must investigate all major incidents.

16) Other Resources

This policy should be read in conjunction with NYB's

- Health and Safety Policy
- Safeguarding Policy
- Outbreak Management Plan

NYB Values	
Safe	We champion healthy and sustainable practice.
Nurturing	We contribute to a mutually positive and nurturing experience.
Respectful	We are respectful of each other, and show this in our interactions with everyone; both online and in person.
Inclusive	We value diversity and proactively seek to create an inclusive environment for all stakeholders.
Communal	We are a community and we grow from our shared experience.
Creative	At our core we are creative and collaborate in our creative process.
Challenging	We challenge perceptions about what ballet is and conventions about who ballet is for.
Sustainable	We acknowledge that there is a climate emergency. We are action-oriented and committed to using our influence, resources, and skills to be a positive force for change.
Exceptional	We work hard to create high quality educational and dance experiences.