



First Aid Policy

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1. Aims

The aims of our first aid policy are to:

- Ensure the health and safety of all staff, pupils and visitors
- Provide pre-accident intervention to minimize any potential risks
- Ensure that staff and Proprietorial Board are aware of their responsibilities with regards to health and safety and consistently apply the principles of RTI to ensure risk is reduced
- Provide a framework for responding to an incident and recording and reporting the outcomes

2. Legislation and guidance

This policy is based on advice from the Department for Education on first aid in schools and health and safety advice for 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
- The Education (Independent School Standards) Regulations 2014, which require that suitable space is provided to cater for the medical and therapy needs of pupils

3. Roles and responsibilities

3.1 Appointed person(s) and first aiders

The school has an appointed person who is responsible for:

- Taking charge when someone is injured or becomes ill
- Ensuring there is an adequate supply of medical materials in first aid kits, and replenishing the contents of these kits
- Ensuring that an ambulance or other professional medical help is summoned when appropriate

First aiders are trained and qualified to carry out the role (see section 7) and are responsible for:

- Acting as first responders to any incidents; they will assess the situation where there is an injured or ill person, and provide immediate and appropriate treatment
- Filling in an accident report on the same day, or as soon as is reasonably practicable, after an incident (see the template in Appendix 1)

Where a pupil is unwell, a first aider may recommend that the pupil be collected by their parent, carer or responsible adult. First aid staff do not diagnose medical conditions but will make decisions based on observed symptoms and welfare needs.

Our school's appointed person is Mrs Brown. All school staff are trained in Emergency First Aid and as such can administer first aid for all pupils as and when required. Mrs Brown and Mrs Perry are the school's nominated and

suitably trained First Aiders at Work. First aider information is displayed prominently around the school which includes a photo and name of the first aiders and location of first aid kits.

3.2 The Proprietal Board

The Proprietal Board has ultimate responsibility for health and safety matters in the school, but delegates responsibility for the strategic management of such matters to the head teacher.

:

3.3 The head teacher

The head teacher is responsible for the implementation of this policy, including:

- Ensuring that an appropriate number of appointed persons and/or trained first aid personnel are present in the school at all times
- Ensuring that first aiders have an appropriate qualification, keep training up to date and remain competent to perform their role
- Ensuring all staff are aware of first aid procedures
- Ensuring appropriate first aid needs assessments and risk assessments are completed and appropriate measures are put in place
- ~~Undertaking, or ensuring that school staff undertake, risk assessments, as appropriate, and that appropriate measures are put in place~~
- Ensuring that adequate space is available for catering to the medical needs of pupils
- Reporting specified incidents to the HSE when necessary (see section 6)

3.4 Staff

School staff are responsible for:

- Ensuring they follow first aid procedures
- Ensuring they know who the first aiders in school are
- Completing or assisting with the completion of accident reports (see Appendix 1) for all incidents they witness and/or attend to.
- Informing the head teacher (who will confidentially inform the relevant first aider/s) of any personal specific health conditions (e.g. asthma, diabetes, haemophilia, epilepsy, severe allergic reactions etc) or first aid needs they may have, which impact at work.

4. First Aid Needs Assessment

The school will undertake a regular first aid needs assessment to determine:

- The number of qualified first aiders required
- The location of first aid equipment
- Additional needs arising from the school's premises
- Pupil medical needs
- Educational visits
- Practical subjects and higher-risk activities

The assessment will be reviewed annually or following any significant change.

Individual healthcare plans, Education Health and Care Plans, Positive Behaviour Support Plans and medical risk assessments will be considered when determining first aid arrangements and emergency responses for individual pupils.

5. First aid procedures

5.1 In-school procedures

The school maintains a designated Medical Room which:

- is available when required
- contains a wash basin with hot and cold running water, a shower and toilet
- Is near to a toilet facility
- Provides suitable privacy and supervision
- Is used for pupils who are ill, injured or require medical assessment

On-going medical issues of students and staff will be recorded on the school's information management system. and any member of staff taking students off site, will check the up to date information and must include this in their risk assessment.

In the event of an accident resulting in injury:

- The closest member of staff present will assess the seriousness of the injury and call for the emergency services if deemed appropriate, before seeking the assistance of a qualified first aider, if appropriate, who will provide the required first aid treatment
- The first aider, if called, will assess the injury and decide if further assistance is needed from a colleague or the emergency services. A first aider will remain on scene until help arrives
- If the first aider judges that a student is too unwell to remain in school, arrangements will be made to return the student home. The first aider will pass on any relevant information to ensure continuity of care.
- If emergency services are called, the head teacher, or other designated member of staff, will contact the most appropriate person with parental responsibility at the earliest opportunity
- The first aider/relevant member of staff will complete an accident report form on the same day or as soon as is reasonably practical after an incident resulting in an injury, circulating it as required.
- Where first aid treatment requires intimate care, staff will follow the school's Intimate Care Policy and ensure dignity, privacy and safeguarding principles are maintained at all times.

Any injury, illness or pattern of injuries that gives rise to safeguarding concerns will be reported immediately to the Designated Safeguarding Lead and managed in accordance with the Child Protection and Safeguarding Policy.

5.2 Off-site procedures

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

- A mobile phone
- A portable first aid kit containing the following, based on our first aid needs assessment;
 - 20 individually wrapped sterile adhesive dressings (assorted sizes)
 - 2 sterile eye pads
 - 2 individually wrapped triangular bandages (preferably sterile)
 - adhesive tape
 - 6 medium sized individually wrapped sterile unmedicated wound dressings
 - 2 large sterile individually wrapped unmedicated wound dressings

- 3 pairs of disposable gloves
 - 6 cleansing wipes,
 - foil blanket
 - scissors
- Information about the specific medical needs of pupils and have any necessary medication with them e.g. asthma inhaler
 - Emergency contact details

When transporting pupils on off-site activities including larger numbers of pupils for example for a whole school trip staff will make sure that each vehicle is equipped with a clearly marked first aid box.

Risk assessments will be completed by the member of school staff organising the visit and approved by the head teacher.

The level of first aid provision on educational visits will be determined through the visit risk assessment and pupil medical needs. A suitably trained first aider will accompany visits where risk assessment identifies this as necessary.

6. First aid equipment

A typical first aid kit in our school, based on our first aid needs assessment, will include the following:

- A leaflet giving general advice on first aid
- 20 individually wrapped sterile adhesive dressings (assorted sizes)
- 2 sterile eye pads
- 2 individually wrapped triangular bandages (preferably sterile)
- Adhesive tape
- medium-sized individually wrapped sterile non-medicated wound dressings
- 2 large sterile individually wrapped non-medicated wound dressings
- 3 pairs of disposable gloves

In addition the school has Burns kits in our amend for own school Food technology room and the School's Main Kitchen

No medication is kept in first aid kits.

First aid kits are stored in:

- The staff room
- Reception (at the desk)
- Food Technology Room
- The School Kitchen
- The Medical Room
- The 1st floor staff bathroom

7. Record-keeping and reporting

7.1 First aid and accident record book

- An accident form (see appendix 1) will be completed by the first aider/relevant member of staff on the same day or as soon as possible after an incident resulting in an injury

- Any head injuries will be reported to the appropriate member of care staff or carer/parent on the day, together with advice on how to monitor the student over the next 24 hours, which they will sign for on the accident report. See Appendix 2.
- As much detail as possible should be supplied when reporting an accident, including all of the information required by the Pupil Accident Book
- A copy of the accident report form for New Reflexions students will be sent to head office for processing. For all students, accident report forms will be saved in their folder by the administration staff and can be shared with carers/parents if appropriate.
- School staff will ensure that the relevant people have been informed and the Accident Book will be annotated accordingly.
- Records held in the first aid and accident book will be retained by the school for a minimum of 3 years, in accordance with regulation 25 of the Social Security (Claims and Payments) Regulations 1979, pupil accident records will normally be retained until the pupil reaches age 25, in line with the school's retention schedule and Staff accident records will be retained in accordance with health and safety and employment requirements.
- Near misses will be recorded and reviewed to identify trends and preventative actions, even where no injury occurred.

7.2 Reporting to the HSE

The head teacher will keep a record of any accident which results in a reportable injury, disease, or dangerous occurrence as defined in the RIDDOR 2013 legislation (regulations 4, 5, 6 and 7).

The head teacher will report these to the Director for Health and Safety who will then inform the Health and Safety Executive as soon as is reasonably practicable and in any event within 10 days of the incident.

Reportable injuries, diseases or dangerous occurrences include:

- Death
- Specified injuries, which are:
 - Fractures, other than to fingers, thumbs and toes
 - Amputations
 - Any injury likely to lead to permanent loss of sight or reduction in sight
 - Any crush injury to the head or torso causing damage to the brain or internal organs
 - Serious burns (including scalding)
 - Any scalping requiring hospital treatment
 - Any loss of consciousness caused by head injury or asphyxia
 - Any other injury arising from working in an enclosed space which leads to hypothermia or heat-induced illness, or requires resuscitation or admittance to hospital for more than 24 hours
- Injuries where an employee is away from work or unable to perform their normal work duties for more than 7 consecutive days (not including the day of the incident)
- Where an accident leads to someone being taken to hospital
- Near-miss events that do not result in an injury, but could have done. Examples of near-miss events relevant to schools include, but are not limited to:
 - The collapse or failure of load-bearing parts of lifts and lifting equipment
 - The accidental release of a biological agent likely to cause severe human illness
 - The accidental release or escape of any substance that may cause a serious injury or damage to health
 - An electrical short circuit or overload causing a fire or explosion

Information on how to make a RIDDOR report is available here (although this will be completed by the Director for Health and Safety):

8. Training

All first aiders must have completed a training course, and must hold a valid certificate of competence to show this. The school will keep a register of all trained first aiders, what training they have received and when this is valid until.

First aiders must arrange to retrain **before** their first aid certificate expires. If their certificate has already expired, they need to retake the full first aid course.

Relevant staff will receive training in the administration of emergency medication including adrenaline auto-injectors, emergency asthma medication and seizure management where required.

9. Monitoring arrangements

This policy will be reviewed by the head teacher annually.

At every review, the policy will be approved by the director with responsibility for Health and Safety.

10. Links with other policies

This first aid policy is linked to the

- Health and Safety policy
- Risk Assessment policy
- Medication Policy
- Interpersonal and Intimate Care Policy

Last reviewed	August 2026
Next review	August 2027
Reviewed by	Head Teacher and Director for H&S

Appendix 1

Accident Report Form (or use accident log book) Ref: LRS/initials/DD/MM/YYYY

Name of injured person		Role/class	
Date and time of incident		Location of incident	
Incident details			
<i>Describe in detail what happened, how it happened and what injuries the person incurred</i>			
Action taken			
<i>Describe the steps taken in response to the incident, including any first aid treatment, and what happened to the injured person immediately afterwards.</i>			
Follow-up action required			
<i>Outline what steps the school will take to check on the injured person, and what it will do to reduce the risk of the incident happening again</i>			
Name of person attending the incident			
Signature		Date	

Appendix 2

Head Injury Form

(Name)..... has bumped their head.

Date.....

(Brief Description of what happened)

.....
.....
.....

Signed.....

The symptoms of a minor head injury are usually mild and short-lived. They may include:

- a mild headache
- nausea (feeling sick)
- mild dizziness
- mild blurred vision

If your child's symptoms get significantly worse, take them straight to the accident and emergency (A&E) department of your nearest hospital or call 999 for an ambulance.

What to look out for

Signs of concussion or a brain injury after a head injury include:

- unconsciousness – either brief (concussion) or for a longer period of time
- fits or seizures
- problems with the senses – such as hearing loss or double vision
- repeated vomiting
- blood or clear fluid coming from the ears or nose
- memory loss (amnesia)

If any of these symptoms occur after a head injury, immediately go to your nearest A&E department or call 999 and ask for an ambulance.

