



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.
- Ensure that staff and governors are aware of their responsibilities with regards to health and safety.
- Provide a framework for responding to an incident and recording and reporting the outcomes.

2. 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](#), 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

3. Roles and responsibilities

We have trained first aiders on the school staff. We follow the GCC First Aider guidance which is taken from the Health and Safety Executive (HSE) advice.

First Aiders are responsible for:

- Taking charge when someone is injured or becomes seriously ill.
- Ensuring that an ambulance or other professional medical help is summoned when appropriate.

First aiders are trained and qualified to carry out the role 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.
- Sending pupils home to recover, where necessary.
- Filling in an accident report or CPOMS on the same day, *or as soon as is*

reasonably practicable, after an incident (see the template in appendix 2).

The Governing Board

The Governing Board has ultimate responsibility for health and safety matters in the school, but delegates operational matters and day-to-day tasks to the Headteacher and staff members.

The Headteacher

The Headteacher 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 risk assessments are completed and 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).

Staff

School staff are responsible for:

- Ensuring they follow first aid procedures.
- Ensuring they know the first aiders in school.
- Informing the Headteacher or their manager of any specific health conditions or first aid needs.

4. First Aid Procedures in School

In the event of an accident resulting in injury:

- The closest member of staff present will assess the seriousness of the injury and seek 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. In a serious event Senior Leadership must be called to the scene. They will remain on scene until help arrives.
- The first aider will also decide whether the injured person should be moved or placed in a recovery position.
- If the first aider judges that a pupil is too unwell to remain in school, parents will be contacted and asked to collect their child. Upon their arrival, the first aider will recommend next steps to the parents.
- If emergency services are called, the first aider will contact parents or ask a member of staff to alert the office to do this, immediately.

- The first aider will complete an accident report form on the same day or as soon as is reasonably practical after an incident resulting in an injury.
- For their own protection and the protection of the patient, staff who administer first aid should wear disposable gloves.
- No-one must treat a pupil who is bleeding without protective gloves.
- There is PPE stored in the office: aprons, gloves and face masks. Staff are responsible for maintaining their own first aid bags and replenishing as needed.
- Every classroom and school area is provided with a first aid bag.
- Staff must report to the office if they need any first aid supplies.
- There are mouth shields provided to use in the event of resuscitation.
- All body fluid spillages (vomit, diarrhoea and blood) must be cleaned immediately. This is vital to reduce the spread of infection. Gloves MUST be worn. Spillage debris must then be placed in a sealed plastic bag and put in the hygiene bins for disposal.

Administration of medicines

**for school purposes, our definition is both over the counter and prescribed medicines*

We do not normally administer medication as we are informed by the health authorities that, in the vast majority of cases, medicine can be prescribed for out of school hours. For example, 'three times a day' could be administered: before and after school, then in the evening.

However, if it is deemed essential, we invite a parent to come in at the appropriate time to give the medication. It may be possible for school staff to support the child in administering medication, in EXCEPTIONAL circumstances but only if:

- This is agreed with the SLT or a member of the office staff.
- A parent/carer must complete and sign the 'administering medicine consent form'. This must include the name of the medicine, dosage and time to be administered.
- The medicine must be delivered personally to the office by the parent/carer.
- Two members of staff must be present when the medicine is administered and this must be recorded on the 'record of medicine administered'.
- We have a locked medicine cupboard and fridge in the office to store any necessary medicines.

Off-site procedures

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

- A school or personal mobile phone which can be used to contact the school for parents' contact details in the case of any emergency.
- A portable first aid kit.

Information about the specific medical needs of pupils. This includes checking:

- Which children need an inhaler for asthma.
- Allergies and epi-pen requirements.
- Parents' contact details (residential trips only).

Risk assessments will be completed by the trip leader prior to any educational visit that necessitates taking pupils off school premises. Particular attention needs to be paid to:

- Outdoor adventurous visits – GCC check to be completed through SHE departments.
- Hazardous activities – GCC check to be completed through SHE departments.
- Whole class outings.
- Swimming pool lessons.

All staff, who work with the children have been trained in first aid. There will always be at least one first aider with a current paediatric first aid certificate on school trips and visits, as required by the statutory framework for the Early Years Foundation Stage.

5. First aid equipment

A typical first aid kit in our school will include resources from guidance in <https://www.gov.uk/government/publications/first-aid-in-schools/first-aid-in-schools-early-years-and-further-education>:

- A leaflet with general advice
- Regular and large bandages (sterile and individually wrapped).
- 2 Eye pad bandages (sterile and individually wrapped).
- 2 Triangular bandages (sterile and individually wrapped).
- Adhesive tape.
- 6 Safety pins.
- Disposable gloves.
- Antiseptic wipes (Only to be used where no access to running water)
- Plasters of assorted sizes.
- Scissors.
- Cold compresses or ice packs.

No medication is kept in first aid kits, unless supervised by an adult on an educational visit e.g. inhaler.

6. Record-keeping and reporting First aid and accident record book

- An accident form or CPOMS will be completed by the member of staff involved with the incident and first aider on the same day or as soon as possible after an incident resulting in an injury.

- As much detail as possible should be supplied when reporting an accident, including all of the information included in the accident form at appendix 2.
- The member of staff must report to the Head Teacher or Senior Leader in charge, when a person has sought medical treatment, in order to report to other agencies.
- Records held in the first aid and accident book will be retained by the school for a minimum of 3 years.

Reporting to the HSE

The Headteacher 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 Headteacher will report these to 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:

[How to make a RIDDOR report, HSE](http://www.hse.gov.uk/riddor/report.htm) <http://www.hse.gov.uk/riddor/report.htm>

Notifying parents

The class teacher or first aider (where the information has been passed on) will inform parents of any accident or injury sustained by a pupil, and any first aid treatment given, on the same day, or as soon as reasonably practicable.

Parents are alerted to a bumped head by way of a sticker on the child's top and a letter is given to the child to take home with specific information about head injuries (appendix 4).

Reporting to Ofsted and child protection agencies

The headteacher will notify Ofsted of any serious accident, illness or injury to, or death of, a pupil while in the school's care. This will happen as soon as is reasonably practicable, and no later than 14 days after the incident.

The headteacher will also notify relevant, local child protection agencies of any serious accident or injury to, or the death of, a pupil while in the school's care.

7. Training

All school staff complete the Emergency First Aid training and this is valid for 3 years. Staff attend, the Gloucestershire County Council School Nurse Training for: epilepsy, asthma and anaphylaxis. As a school, we have at least Two First Aid at Work and a Paediatric first aider, as per the ratio guidance. All staff have regular 'First Aid' training which includes all basics and emergency situations.

Monitoring arrangements

This policy will be reviewed by the Headteacher every 2 years. At every review, the policy will be approved by the Health and Safety Governor and noted approval at the Full Governing Board.

Links with other policies

This first aid policy is linked to the

- Health and safety policy.
- Educational Visits policy.
- Policies on supporting pupils with medical conditions.

Appendix 1: Accident Report Form to be used when CPOMs in accessible. CPOMs first aid incident reports should include the information below.

| | | | |
|--|--|----------------------|--|
| 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 that it will do to reduce the risk of the incident happening again</i> | | | |
| Name of person attending the incident | | | |
| Signature | | Date | |

Appendix 2: Administering medicines in school

The information below is based on the Department for Education’s statutory guidance on supporting pupils at school with medical conditions.

We do not normally administer medication as we are informed by the health authorities that, in the vast majority of cases, medicine can be prescribed for out of school hours. However, if it is deemed essential, we invite a parent to come in at the appropriate time to give the medication. It may be possible for school staff to help with this in EXCEPTIONAL circumstances.

At Hester’s Way Primary School we do and do not:

| DO <input type="checkbox"/> | DO NOT <input type="checkbox"/> |
|--|--|
| Remember that any member of school staff may be asked to provide support to pupils with medical conditions, but they are not obliged to do so | Give prescription medicines or undertake healthcare procedures without appropriate training |
| Check the maximum dosage and when the previous dosage was taken before administering medicine | Accept medicines unless they are in-date, labelled, in the original container and accompanied by instructions |
| Keep a record of all medicines administered. The record should state the type of medicine, the dosage, how and when it was administered, and the member of staff who administered it | Give prescription or non-prescription medicine to a child under 16 without written parental consent, unless in exceptional circumstances |
| Inform parents if their child has received medicine or been unwell at school | Give medicine containing aspirin to a child under 16 unless it has been prescribed by a doctor |
| Store medicine safely | Lock away emergency medicine or devices such as adrenaline pens or asthma inhalers |
| Ensure that the child knows where his or her medicine is kept, and can access it immediately | Force a child to take their medicine. If the child refuses to take it, follow the procedure in the individual healthcare plan and inform their parents |

Appendix 3: Administering Medicine Consent

ADMINISTERING MEDICINE CONSENT

The school will not give your child medicine unless you complete and sign this form. Medicines must be in the original container as dispensed by the pharmacy

PUPIL

| | |
|------------------------------|--|
| Name of child | |
| Date of birth | |
| Class | |
| Medical condition or illness | |

MEDICINE

| | |
|---|--|
| Name/type of medicine <i>(as described on the container)</i> | |
| Expiry date | |
| Dosage and method | |
| Timing | |
| Special precautions/other instructions | |
| Are there any side effects that the school/setting needs to know about? | |
| Self-administration? YES / NO | |
| Procedures to take in an emergency | |

PARENT DETAILS

| | |
|-----------------------|--|
| Name | |
| Daytime telephone no. | |
| Relationship to child | |

I understand that I must deliver the medicine personally to the office
The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school staff administering medicine in accordance with the school policy. I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.
Signature(s) Date

Appendix 4: I've Bumped My Head Today



Bumped Head

Your child received a bump to the head today date: _____ time: _____.

| | |
|---|--|
| A cold compress has been applied | |
| They have been monitored since the incident | |

If they have any further problems and start to suffer from any of the following symptoms then you should seek further medical advice:

- Unconsciousness or lack of full consciousness (for example, problems keeping eyes open).
- Any confusion (not knowing where they are or getting things muddled up).
- Any drowsiness (sleepy) that goes on for longer than 1 hour when they would normally be awake.
- Difficulty waking them up.
- Any problems understanding or speaking.
- Any loss of balance or problems walking.
- Any weakness in one or both arms or legs.
- Any problems with their eyesight.
- Any painful headache.
- Any repeated vomiting.
- Any fits (collapsing or passing out suddenly).
- Bleeding or clear fluid coming from one or both ears).
- New deafness in one or both ears.

This is not an exhaustive list, there may be other symptoms.

You should be aware of these possible symptoms for at least 48 hours following the bump to the head and seek medical advice if you are not sure.

Your child should continue to be monitored, including through the night.

Please contact you doctor, 111 (call and/or online) or 999 (call).

Policy Reviewed: February 2024
Due to be reviewed: February 2025
Ratified by Governors: 4th March 2024
Signed by Chair of Governors: _____