



# FIRST AID POLICY

Name	First Aid Policy		
Agreed by	Full Governing Body		
Date agreed	19/03/26	Review date	Spring 28
Signed & dated			

## Contents

1. Aims 2  
2. Legislation and guidance 2  
3. Roles and responsibilities 3  
4. First aid procedures 5  
5. First aid equipment 5  
6. Record-keeping and reporting 8  
7. Training 9  
8. Monitoring arrangements 9  
9. Links with other policies 9  
Appendix 1: Medical Procedures 10

## 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
- [The School Premises \(England\) Regulations 2012](#), which require that suitable space is provided to cater for the medical and therapy needs of pupils

2

### 3. Roles and responsibilities

There are over 20 qualified first aiders across the school, all of which have full first aid and paediatric training. Members of the Early Years Foundation Stage provision have the qualification and are on site at all times. All members of the office staff hold the same qualification.

Any Qualified First Aider may be asked at any time during the school day to administer first aid to a pupil, regardless of their year group. This includes administering first aid whilst they are on their break or lunch, if no other Qualified First Aider is available. All support staff have a duty of care to administer basic first aid if necessary. Staff follow Medical Procedures outlined in Appendix 2.

#### 3.1 Appointed person(s) and first aiders

The school's appointed Medical Lead, Ruth Allen is responsible for:

- Liaising with the Assistant Head for Inclusion to ensure that all First Aid and Medical procedures are efficient and robustly implemented.
- Taking charge when someone is seriously injured or ill
- Ensuring that an ambulance or other professional medical help is summoned when appropriate
- Making the decision whether a child needs to be sent home on medical grounds • Inform the class teacher and call the parent of any child that has had a serious accident or a head injury.
- Work with parents to obtain copies of any My Asthma plans, Allergy Action plans as appropriate. Liaise with the school nurse to ensure that care plans and any other medical concerns are dealt with effectively.
- Complete a school care plan with parents for reintegration to school life of pupils after hospitalisation, long illness, fractures or any other medical procedures.
- Ensuring there is an adequate supply of up to date medical materials in first aid kits, and replenishing the contents of these kits.
- Oversee the medical lists across the school and ensure that contact information and medical information is accurate and up to date.
- Updating class medical lists to be displayed in the first aid cabinet in class. • Ensuring that any pupil medications are stored safely in the first aid cabinets in classrooms or class first aid bags (as appropriate) and are within date.
- Ensure school-parent medical consent letters are completed for the administering of any non-long term medication, for example eye drops, antihistamine, antibiotics, paracetamol. • Sharing a child's medical details with a photo in the staffroom, Dining Halls and First Aid room to make staff aware of any particular children with serious/life threatening medical conditions.
- Ensure that all relevant staff are aware of allergies in school or on school visits. Create allergy badges to reflect their needs and liaise with the school cook.

- Monitor that staff have been appropriately recording any accidents and injuries on Google Forms.
- Work alongside the Play Leader to ensure first aid is being administered and recorded by playground staff during break and lunchtime.
- Communicate with relevant staff and organise any medicines and first aid kits for school visits
- Perform regular audits of the school emergency Epi-pens and Salbutamol inhalers. Re-stock any that are out of date.
- Liaise with the office to re-stock the first aid room, class first aid boxes and playground first aid boxes.
- Notify SLT when additional training is required and any relevant training expires.

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.
  - If the medical issues are related to a health and safety breach e.g. faulty equipment or wet floor record in an Accident Report Book, inform the site supervisor, and put on CPOMS.

3

- Liaising with SLT to send pupils home to recover, where necessary.
- Filling in the Google Form on the same day, or as soon as is reasonably practicable, after an incident.
- Any medical issues or accidents that could involve possible repercussions eg bruising, large wounds, intimate areas etc to be recorded on CPOMS.
- Decide whether a head injury is deemed a head bump or a minor/ major head injury. Follow procedures accordingly. Complete Google Form and give child a Head Bump sticker.
- Liaise with other first aiders or Medical Lead to ratify decisions if necessary. • Administering medicines in line with medical care plans.
- First Aiders to re-stock the first aid kits in the class first aid boxes and First Aid bags. Inform Medical Lead if any new equipment needs to be ordered.

Our school's Qualified First Aiders' names will also be displayed prominently around the school.

### **3.2 The local authority and governing board**

Tower Hamlets has ultimate responsibility for health and safety matters in the school, but delegates responsibility for the strategic management of such matters to the school's governing board. The governing board delegates operational matters and day-to-day tasks to the headteacher and staff members.

### **3.2 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.

### **3.4 The headteacher**

The headteacher is responsible for the implementation of this policy, including: • Ensuring that an appropriate number of 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
- Undertaking, or ensuring that managers 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).

### 3.5 Staff

School staff are responsible for:

- Ensuring they follow first aid procedures.
- Ensuring they know who the first aiders in school are.
- Completing Google Forms First Aid for all incidents they attend to where a qualified first aider is not called.
- Informing Medical Lead of any specific health conditions or first aid needs.

**It is unacceptable practice to administer any medication without being clear about the care/medical plan. This includes but is not limited to frequency and dosage of medication.**

4

## 4. First aid procedures

### 4.1 In-school procedures

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 Medical Lead/SLT. They will remain on scene until help arrives.
- The decision to call an ambulance wherever possible should involve the collaboration of Medical Lead and SLT.
- Wherever possible the non-qualified colleague assisting a qualified first aider, should be replaced by a qualified first aider.
- All other staff should leave Medical Lead/Qualified First Aider to deal with the medical issue and offer assistance only when requested by the first aiders.
- If staff are relatives of an injured pupil, only parents are permitted to be with the child. Any other members of staff must continue with their duties as normal.
- 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 to collect their child. Upon their arrival, the first aider will recommend next steps to the parents.
- If emergency services are called, the Medical Lead/SLT will contact parents immediately. • The Qualified First Aider will complete a Google Forms First Aid on the same day or as soon as is reasonably practical after an incident resulting in an injury.

### 4.2 Off-site procedures

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

- A mobile phone
- A portable first aid kit
- Information about the specific medical needs of pupils
- Children's medication

Risk assessments will be completed by the class teacher or person leading the school visit prior to

any educational visit that necessitates taking pupils off school premises. A qualified first aider will attend trips.

## 5. First aid equipment

A full first aid kit in our school will include the following:

- Disposable gloves
  - Vomit bags
  - Face shield
  - Scissors
  - Gauze swabs
  - Wound dressings
  - Low adherent dressings
- 
- Hypoallergenic plasters and dressing strip
  - Hypoallergenic adhesive tape
  - Foil blanket
  - Eye wash
  - Triangular bandage
  - Conforming bandage
  - Saline wipes
  - Water spray bottle
  - Instant ice pack

5

First aid bags are taken on school visits, containing small first aid kits and medication for pupils.

Additional equipment might include:

- Tissues
- Emergency salbutamol inhaler
- Emergency Epi-Pen

First aid kits are stored in:

- First Aid Room
- Class Medical Bag
- Classroom

Playground first aid kits are stored in:

- Main playground quiet area
- EYFS playground under the shelter

Malmesbury has an Automated External Defibrillator (AED) on site. It is located in the white cupboard in the first aid room on the ground floor.

These are devices that are placed externally on the body to deliver an electric shock to restart the heart in the event of cardiac arrest.

A cardiac arrest is a life-threatening emergency where a person's heart has suddenly stopped pumping blood around the body. The person will be unconscious, unresponsive and will not be breathing normally or not breathing at all. **It is essential to call 999 immediately for an ambulance.** While waiting for the ambulance, anyone can help to save the person's life by delivering CPR and using a defibrillator. CPR can help to circulate oxygen to the body's vital organs, which will help prevent further deterioration so that defibrillation can be administered.

Defibrillators are designed to be used by anyone with no prior training. Most defibrillators talk to the user and guide them through the steps they need to take once the defibrillator has been opened. Most defibrillators also have pictures on the front of the device and on the pads to help you.

6

## 6. Guidance on when to call for an Emergency Ambulance

5.1 An emergency 999 ambulance should be called when the Medical Lead/SLT has assessed a casualty and deemed it necessary to do so based upon the knowledge acquired through their training. Usually this will be for casualties with the following problems:

- any instance in which it would be dangerous to approach and treat a casualty
- unconscious
- not breathing
- not breathing normally and this is not relieved by the casualty's own medication
- severe bleeding
- neck or spinal injury
- injury sustained after a fall from a height (higher than 2 metres)
- injury sustained from a sudden impact delivered with force (e.g. car knocking a person over)
- suspected fracture to a limb
- anaphylaxis (*make sure to use this word when requesting an ambulance in this case*)
- seizure activity that is not normal for the casualty, especially after emergency medication has been administered
- symptoms of a heart attack or stroke
- rapid deterioration in condition despite the casualty not initially being assessed as requiring an ambulance

### **IF IN DOUBT, IT IS BETTER TO CALL FOR AN EMERGENCY AMBULANCE THAN NOT.**

5.2 If, for whatever reason, a Qualified First Aider is not available, the above guidelines should be used to determine whether to call for an emergency ambulance.

### 5.3 How to call for an emergency ambulance

Should the need arise for an emergency ambulance to be summoned, the Qualified First Aider should:

- remain calm
- ask a bystander\* to call 999 or 112 and, when prompted for which service is required, ■ ask for an ambulance

\*Should a bystander not be available it may be necessary for First Aiders to leave the casualty and

make the call themselves, relaying this information to the operator

The caller should:

- be ready to provide details of their name, telephone number, address and exact location within the school
- relay the condition of the casualty, as assessed by the Qualified First Aider, and how the casualty came to be in this condition
- provide details of the number of casualties along with names, age and gender if these details are known
- ask that ambulances come to **'the front of Malmesbury Primary school on Coborn Street'**; if possible, it should be arranged for a member of staff or bystander who knows the location of the casualty to meet the ambulance on arrival
- communicate any dangers or hazards into which the ambulance may be arriving
- stay on the line with the emergency operator until they have cleared the line
- return to the casualty immediately after the call to inform the Qualified First Aider that an ambulance is on the way and to bring a First Aid kit, blanket and AED if necessary

7

## 7. Record-keeping and reporting

### 6.1 Serious Injury

- An accident that requires first aid treatment is logged on a first aid Google form by the Qualified First Aider/relevant member of staff on the same day or as soon as possible after an incident. This is shared with parents via email.
- For a serious incident the Medical Lead should report the incident to London Borough of Tower Hamlets using the online Accident and Incident report form.
- A copy of the accident report form will also be added to the pupil's educational record by the Medical Lead.
  - Records held on google drive 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, and then deleted. Any serious or potential claims should be stored for longer.

### 6.2 Reporting to the HSE

The Site Supervisor/Health and Safety Office 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 Site Supervisor/Health and Safety Office will liaise with all parties involved with the incident and report these to the Health and Safety Executive as soon as is reasonably practicable and in any event within 10 days of the incident. The Health and Safety Executive will then complete a thorough investigation to support the school with any corrective action required.

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>

8

### **6.3 Notifying parents**

The Medical Lead/SLT/first aider 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.

### **6.4 Reporting to Ofsted and child protection agencies**

The Head Teacher 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 Designated Safeguarding Lead or Deputy Safeguarding Leads (DSL or DDSLs) will also notify Early Help Hub or Social Care of any serious accident or injury to, or the death of, a pupil while in the school's care.

## **8. Training**

All school staff are able to undertake first aid training if they would like to.

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 (see Appendix 3).

Staff are encouraged to renew their first aid training when it is no longer valid.

At all times, at least 1 staff member will have a current paediatric first aid (PFA) certificate which meets the requirements set out in the Early Years Foundation Stage statutory framework and is updated at least every 3 years.

## **9. Monitoring arrangements**

This policy will be reviewed by the Inclusion Lead/Medical Lead every year. At every review, the policy will be approved by the headteacher and full governing board.

## **10. Links with other policies**

This first aid policy is linked to:

- Health and safety policy
- Risk assessment policy
- Policy on supporting pupils with medical conditions

## Appendix 1: Medical Procedures

