



First aid policy

September 2024

Contents

1. Aims	3
2. Legislation and guidance	3
3. Roles and responsibilities	3
4. First aid procedures	4
5. First aid equipment	6
6. Record-keeping and reporting	6
7. Training	8
8. Monitoring arrangements	9
9. Links with other policies	<u>9</u>
Appendix 1: list of appointed persons for first aid and RIDDOR	10
Appendix 2: accident report form (staff)	11
Appendix 3: Bumped Head Letter	102
Appendix 4: Medical Emergency Report	113
Appendix 5: Paediatric first aid training log	114
Appendix 6: Epilepsy and allergies training log	115

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 school leaders (including the Director (who is also the Proprietor) 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](#), guidance from the Health and Safety Executive (HSE) on [incident reporting 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 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 persons and first aiders

The school's appointed persons are **Katie Lonnborg (Head Teacher) and Jennie Moody (School Secretary)**. They are responsible for:

- Taking charge when someone is injured or becomes ill
- Ensuring there is an adequate supply of medical materials in first aid kits, replenishing the contents of these kits, and ensure there is an adequate supply of PPE such as gloves, aprons and hazardous waste bags
- 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
- Sending pupils home to recover, where necessary
- Filling in an accident report (if appropriate) on the same day as, or as soon as is reasonably practicable after, an incident (see the template in appendix 2)
- Keeping their contact details up to date

Our school's first aiders are listed in appendix 5. Their names will also be displayed prominently around the school site.

3.2 The Director

The Director has ultimate responsibility for health and safety matters in the school, but delegates operational matters and day-to-day tasks to the Head Teacher and staff members.

3.3 The Head Teacher

The Head Teacher is responsible for the implementation of this policy, including:

- Ensuring that an appropriate number of first aid personnel are present in the school at all times
- Ensuring that all Teachers, TSAs and Senior staff are trained in paediatric first aid, in addition to a number of other staff members across the school
- Ensuring that first aiders have an appropriate qualification, keep training up to date and remain competent to perform their role, including specific training on epilepsy. Staff will complete their full re-qualification every 3 years
- Ensuring all staff are aware of first aid procedures
- Ensure that all staff are aware of pupils who have a medical condition such as epilepsy or asthma, or an allergy such as nuts or bee stings. This will be updated and clearly displayed in the staffroom at all times. A Healthcare Plan will be completed for these pupils as set out in the Medicines Policy
- Ensuring appropriate risk assessments are completed and appropriate measures are put in place
- Undertaking, or ensuring that 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 and appointed persons in school are
- Completing accident reports (see appendix 2) for staff accidents, and report via CPOMS for all pupil accidents that they witness and/or for which they are the lead person, ensuring the category 'accident' is selected
- Completing Bumped Head Letters (see appendix 3) and sending home to parents
- Completing Medical Emergency Reports (see appendix 4). These must be signed by any witnesses, the first aider and the Head Teacher before being sent home to the parents and a copy being stored in the pupil's confidential file
- Informing the Head Teacher of any specific health conditions or first aid needs for themselves and/or pupils
- Completing in case of emergency form

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 use the radio system to seek the assistance of a qualified first aider, if appropriate.
- The first aider, if called, will assess the injury and either provide the required first aid treatment or decide if further assistance is needed from a colleague or the emergency services. They will remain on the 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, they will liaise with a senior member of staff who will decide if parents will be contacted and asked to collect their child. Upon their arrival, the appointed person or first aider will recommend next steps to the parents
- If emergency services are called, a senior member of staff or the school secretary will contact parents/next of kin/emergency contact immediately
- If the pupil requires hospital treatment, an appropriate person will be allocated to accompany the pupil (either in the ambulance or following) to hospital and remain with the pupil until a relative can attend
- If a pupil requires transport to hospital other than by ambulance and the parent is not available, two members of staff will transport the pupil by car (in a car where the driver holds business insurance) and remain with the pupil until a relative can attend
- The appointed person or first aider will record the accident, on CPOMS if it is a pupil accident, or complete an accident report form on the same day or as soon as is reasonably practical after an incident resulting in an injury

There will be at least 1 person who has a current paediatric first aid (PFA) certificate on the premises at all times.

4.2 Off-site procedures

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

- Two allocated mobile phones (recorded on the cover of the visit risk assessment and kept in the off-site visit bag)
- Any medications such as inhalers and EpiPens (kept in named medication boxes in the off-site visit bag)
- A portable first aid kit (stored in the off-site visit bag if the trip takes place by car) including, at minimum:
 - A leaflet giving general advice on first aid
 - 6 individually wrapped sterile adhesive dressings
 - 1 large sterile unmedicated dressing
 - 2 triangular bandages – individually wrapped and preferably sterile
 - 2 safety pins
 - Individually wrapped moist cleansing wipes
 - 2 pairs of disposable gloves
 - Ice packs (stored on the minibuses)
- Information about the specific medical needs of pupils (e.g. pupils requiring medication whilst off-site)

When transporting pupils using the school minibus, the Driver will make sure the vehicle is equipped with a clearly marked first aid box containing, at minimum:

- 10 antiseptic wipes, foil packed
- 1 conforming disposable bandage (not less than 7.5cm wide)
- 2 triangular bandages
- 1 packet of 24 assorted adhesive dressings

- 3 large sterile unmedicated ambulance dressings (not less than 15cm × 20 cm)
- 2 sterile eye pads, with attachments
- 12 assorted safety pins
- 1 pair of rustproof blunt-ended scissors
- Instant cold packs (ice packs)

Risk assessments will be completed by the Class Teacher prior to any educational visit that necessitates taking pupils off school premises.

There will always be at least 1 first aider with a current paediatric first aid (PFA) certificate on all school trips and visits where Reception age pupils are in attendance , as required by the statutory framework for the Early Years Foundation Stage.

There will always be at least 1 first aider on all school trips and visits.

5. First aid equipment

A typical first aid kit in our school 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)
- 6 safety pins
- 6 medium-sized individually wrapped sterile unmedicated wound dressings
- 2 large sterile individually wrapped unmedicated wound dressings
- 3 pairs of disposable gloves
- Ice packs (stored in the small freezer in the dining room)

No medication is kept in first aid kits.

First aid kits are stored in:

- The School Office
- The medical room
- The school kitchen
- School minibuses

6. Record-keeping and reporting

6.1 First aid and accident recording

- A record of the accident will be completed by the relevant member of staff 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

- For accidents involving pupils, a report will be completed on CPOMS by the relevant member of staff who will select the category 'accident' and use the alert function on CPOMS to inform the Head Teacher, Head of Therapy and Class Teacher of the accident
- Records held in the accident folder will be retained by the school for a minimum of 6 years, in accordance with regulation 25 of the Social Security (Claims and Payments) Regulations 1979 and the schools insurance, and then securely disposed of.

➤ 6.2 Reporting to the HSE

The Premises Manager 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 Premises Manager will report these to the HSE as soon as is reasonably practicable and in any event within 10 days of the incident – except where indicated below. Fatal and major injuries and dangerous occurrences will be reported without delay (i.e. by telephone) and followed up in writing within

10 days.

School staff: reportable injuries, diseases or dangerous occurrences

These 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) which:
 - Covers more than 10% of the whole body's total surface area; or
 - Causes significant damage to the eyes, respiratory system or other vital organs
 - Any scalding 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
- Work-related injuries that lead to an employee being away from work or unable to perform their normal work duties for more than 7 consecutive days (not including the day of the incident). In this case, the Head Teacher or Premises Manager will report these to the HSE as soon as reasonably practicable and in any event within 15 days of the accident
- Occupational diseases where a doctor has made a written diagnosis that the disease is linked to occupational exposure. These include:
 - Carpal tunnel syndrome
 - Severe cramp of the hand or forearm
 - Occupational dermatitis, e.g. from exposure to strong acids or alkalis, including domestic bleach
 - Hand-arm vibration syndrome
 - Occupational asthma, e.g. from wood dust
 - Tendonitis or tenosynovitis of the hand or forearm
 - Any occupational cancer
 - Any disease attributed to an occupational exposure to a biological agent

➤ 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

Pupils and other people who are not at work (e.g. visitors): reportable injuries, diseases or dangerous occurrences.

These include:

- Death of a person that arose from, or was in connection with, a work activity*
- An injury that arose from, or was in connection with, a work activity* and where the person is taken directly from the scene of the accident to hospital for treatment

*An accident “arises out of” or is “connected with a work activity” if it was caused by:

- A failure in the way a work activity was organised (e.g. inadequate supervision of a field trip)
- The way equipment or substances were used (e.g. lifts, machinery, experiments etc); and/or
- The condition of the premises (e.g. poorly maintained or slippery floors)

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>

6.3 Notifying parents

The Class Teacher, School Secretary or Headteacher 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 will also be informed if emergency services are called.

6.4 Reporting to Ofsted and child protection agencies (early years only)

The Head Teacher will notify Ofsted of any serious accident, illness or injury to, or death of, a child 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 Head Teacher/DSL, or a DDSL in the absence of the Head Teacher, will also notify the relevant borough's local child protection agency (Surrey, Croydon, Sutton or West Sussex) of any serious accident or injury to, or the death of, a pupil while in the school's care.

7. Training

All school staff are able to undertake first aid training if they would like to. All first aiders have an appropriate qualification, keep training up to date and remain competent to perform their role, including specific training on epilepsy. Staff will complete their full re-qualification every 3 years.

All Teachers, TSAs and Senior staff are trained in paediatric first aid, in addition to a number of other staff members across the school.

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 5 for current first aid trained staff and appendix 6 for current epilepsy and allergy trained staff).

The school will arrange for first aiders to retrain before their first aid certificates expire. In cases where a certificate expires, the school will arrange for staff to retake the full first aid course before being reinstated as a first aider.

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. The PFA certificate will be renewed every 3 years.

8. Monitoring arrangements

This policy will be reviewed by the Head Teacher annually.

At every review, the policy will be approved by the Management Team.

9. Links with other policies

This first aid policy is linked to the:

- Health and safety policy
- Risk assessment policy
- Policy on supporting pupils with medical conditions
- Medicines Policy
- Mobile phone and smartwatch policy
- Visits policy

The Management Team evaluates and approves this policy at each review, ensuring it complies with the law and holds the Head Teacher accountable for its implementation.

This policy was re-written and agreed by the Management Team - September 2024

Written	Gillian Hutton	Head Teacher	September 2007
Reviewed	Alicia Rickman	Senior Teacher	September 2009
Reviewed & amended	Alicia Rickman	Deputy Head Teacher	September 2011
Reviewed	Alicia Rickman	Deputy Head Teacher	October 2013
Reviewed & amended	Alicia Rickman	Acting Head Teacher	July 2014
Reviewed	Alicia Rickman	Head Teacher	September 2016
Reviewed & amended	Alicia Rickman	Head Teacher	September 2017
Reviewed & amended	Alicia Rickman	Head Teacher	September 2020
Reviewed & amended	Gillian Hutton	Director	May 2021
Re-written	Katie Lonnborg	Head Teacher	September 2024

Appendix 1: list of appointed persons for first aid and RIDDOR

STAFF MEMBER'S NAME	ROLE	RESPONSIBLE FOR	CONTACT DETAILS
Katie Lonnborg	Head Teacher	First Aid Appointed Person	head@papillonhouseschool.co.uk 01372363663
Jennie Moody	School Secretary	First Aid Appointed Person	admin@papillonhouseschool.co.uk 01372363663
Martin Kay	Premises Manager	RIDDOR	martin.kay@papillonhouseschool.co.uk 01372363663

Appendix 2: accident report form

Name of injured person		Role/class	
Date and time of accident		Location of accident	
Has this incident been logged on CPOMS?	Yes / No <i>(Please circle)</i>	Is it logged as accident or incident?	
Accident/injury details <i>(Describe in detail what the INJURY is. If the incident is NOT recorded on CPOMS, describe in detail what happened and how it happened)</i>			
Action taken <i>(Describe the steps taken in response to the accident, including any first aid treatment, and what happened to the injured person immediately afterwards)</i>			
Is this a reportable injury as defined in RIDDOR?		Yes / No	
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 accident happening again)</i>			
Signature of injured person		Date	
Name of person attending the accident			
Signature		Date	

Appendix 3: Bumped Head Letter

Notification of bumped head

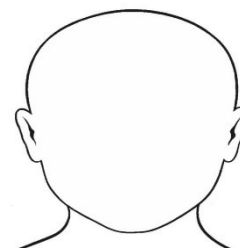


Dear Parent/Guardian

Name

Your child has sustained a head injury at school today at approximatelyam/pm and has been monitored since the accident and we have not identified anything that caused concern up to the time of them going home.

Details



.....
.....
.....
If any of these symptoms are present, particularly loss of consciousness (even for a short period of time), you should call an emergency ambulance (999/112) or NHS direct on 111/0845 4647

- Lasting headache that gets worse or is still present over six hours after the injury;
- Extreme difficulty in staying awake, or still being sleepy several hours after the injury. It is fine to let children go to sleep after a slight bump to the head, but you should check on them regularly and make sure you are able to wake them.
- Nausea and vomiting several hours after the injury;
- Unconsciousness or coma;
- Unequal pupil size;
- Confusion, feeling lost or dizzy, or difficulty making sense when talking;
- Pale yellow fluid or watery blood, coming from ears or nose (this suggests a skull fracture);
- Bleeding from the scalp that cannot be quickly stopped;
- Not being able to use part of the body, such as weakness in an arm or leg;
- Difficulty seeing or double vision;
- Slurred speech; and
- Having a seizure or fit.

Yours Sincerely

Katie Lonnborg

Head Teacher

.....

Notification of Bumped Head Letter

Please send this back to school to certify that a telephone call was made and a 'Bump to Head' sent home to the parent/guardian of:

Pupil's Name Class

Parent/Guardian Name Date.....

Appendix 4: Medical Emergency Report

MEDICAL EMERGENCY REPORT

Pupil's name..... Date of birth.....

DETAILS OF INCIDENT

Date..... Time..... Location.....

What happened e.g. allergic reaction minor or severe; seizure, anaphylactic reaction, asthma attack, hyperglycaemic/hypoglycaemic shock (high/low blood glucose level), faint or collapse?

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

Details of treatment given.....
.....
.....

Additional information and comments.....
.....
.....

Ambulance sent for: YES/NO

Parent/carer informed YES/NO

Name of First Aider

Signature

Name of Witness.....

Signature

Name of Witness.....

Signature

Head Teacher.....

Signature

Date.....

Appendix 5: Paediatric first aid training log

NAME/TYPE OF TRAINING	STAFF WHO ATTENDED (INDIVIDUAL STAFF MEMBERS OR GROUPS)	DATE ATTENDED	DATE FOR TRAINING TO BE RENEWED (WHERE APPLICABLE)
Paediatric first aid	Alex Merrett	June 2023	June 2026
	Anne Mackey		
	Chris Utting		
	Cristina Leiva Cabello		
	Gavin Meeke		
	Heather Dilks-Hopper		
	Henry Symonds		
	Izzy Lamb		
	Jennie Moody		
	Katie Lonborg		
	Lillian Prince		
	Naomi Hills		
	Nicola Meeke		
	Sarah Evans		
	Sara Sharpe		
	Natasha Holman		
	Teresa Seager		

Appendix 6: Epilepsy and allergies training log

NAME/TYPE OF TRAINING	STAFF WHO ATTENDED (INDIVIDUAL STAFF MEMBERS OR GROUPS)	DATE ATTENDED	DATE FOR TRAINING TO BE RENEWED (WHERE APPLICABLE)
Epilepsy and allergies	Alex Merrett	September 2021	
	Andrew Geldart		
	Cristina Leiva Cabello		
	Heather Dilks-Hopper		
	Katie Lonnborg		
	Lauren Denton		
	Nicola Meeke		
	Sarah Evans		