

## First Aid Policy

<b>Date Reviewed:</b>	September 2025
<b>Next Review:</b>	September 2026
<b>Review Cycle:</b>	Annual
<b>Reviewing committee:</b>	FGB
<b>Lead Governor Responsible:</b>	Jo Carne
<b>Reviewers:</b>	Jo Carne (SENDCo) and Gemma Lewis (Medical Officer)
<b>Linked Policies:</b>	Health and safety policy Risk assessment policy Child Protection Policy Policy on supporting pupils with medical conditions
<b>Policy is based upon:</b>	Department for Education advice on first aid in schools HCC guidance on First Aid Guidance from Health and Safety Executive
<b>Ratification Date:</b>	September 2025
<b>Signed by Headteacher:</b>	
<b>Signed by Chair of Governors:</b>	

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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 advice from the Department for Education on first aid in schools and health and safety in schools, and 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

### **3. Roles and responsibilities**

The minimal legal requirement is to have an appointed person to take charge of first aid arrangements. The appointed person does not need to be a trained first aider. Section 3.1 sets out the expectation of appointed persons and first aiders as set out in the 1981 first aid regulations and the DFE guidance listed in section 2.

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

The school's appointed member of SLT with the responsibility to oversee medical arrangements is Jo Carne. Gemma Lewis is the medical and welfare officer 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

The majority of school staff are trained and qualified to carry out a first aid role (see section 7) and are responsible, when needed:

- 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 on the same day, or as soon as is reasonably practicable, after an incident
- Keeping their contact details up to date

A record of staff trained in first aid is kept by the office.

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

Hampshire County Council 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.

#### **3.3 The headteacher**

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

- Ensuring that an appropriate number of appointed persons and 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)

### **3.4 Staff**

School staff are responsible for:

- Ensuring they follow first aid procedures
- Ensuring they know who the appointed persons in school are
- Completing accident reports for all incidents they attend to where an appointed person is not called
- Informing the headteacher or their manager of any specific health conditions or first aid needs

## **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, if appropriate, will provide the required first aid treatment.
- If the injury is assessed as more serious, another first aider will be called to assist.
- At lunchtime, the medical and welfare officer is given the responsibility for first aid and if able to, children are sent to them for treatment. During lesson time, if a minor injury is sustained e.g., small cut that requires a wipe and plaster, the child will be treated in the classroom by the teacher or support staff. If the injury / illness requires more attention, then the child is sent for medical and welfare officer in the office.
- A first aider, if called, will assess the injury and 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, 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 Admin Staff will contact parents immediately
- The person dealing with the injury, will complete an accident report form 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, staff will ensure they always have the following:

- A school mobile phone
- A portable first aid kit including, at minimum:
  - individually wrapped sterile adhesive dressings
  - a leaflet giving general advice on first aid
  - large sterile unmedicated dressing
  - triangular bandages – individually wrapped and preferably sterile
  - safety pins
  - individually wrapped moist cleansing wipes
  - pairs of disposable gloves

*The following is based on the HSE's recommendation for a minimum travelling first aid kit*

- Information about the specific medical needs of pupils
- Parents' contact details

When transporting pupils using a minibus or other large vehicle, the school will make sure the vehicle is equipped with a clearly marked and fully stocked first aid box. Staff will also take a first aid kit from school.

Risk assessments will be completed by the Trip Leader or Educational Visit Co-ordinator prior to any educational visit that necessitates taking pupils off school premises.

#### **5. First aid equipment**

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

- individually wrapped sterile adhesive dressings (assorted sizes)
- sterile eye pads
- individually wrapped triangular bandages (preferably sterile)
- safety pins

- medium-sized individually wrapped sterile unmedicated wound dressings
- large sterile individually wrapped unmedicated wound dressings
- pairs of disposable gloves

No medication is kept in first aid kits.

First aid kits are stored in the first aid bay in the office and outside the staffroom in the main school.

An Automated External Defibrillator (AED) is kept in a clearly marked holder outside the staffroom. All staff are made aware of its location and trained in its use as part of regular first aid training.

## **6. Record-keeping and reporting**

### **6.1 First aid and accident record book**

- An accident form 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.
- 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, and then securely disposed of.

### **6.2 Reporting to the HSE**

The School Business 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 School Business 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 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
- 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 School Business 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 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>

## 7. Training

All school staff undertake first aid training every three years.

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.

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.

## 8. Monitoring arrangements

This policy will be reviewed by the member of SLT responsible for medical every year. At every review, the policy will be approved by the governing body.

<b>Date Reviewed:</b>	
<b>Signed:</b>	
<b>Position</b>	