First Aid Policy

Updated by	Lauren Porter
Updated when	February 2024
Ratified by	Richard Daniels
Next Review Date	February 2025
Statutory Policy	Yes
On school website	Yes

Contents

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, 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 School Premises (England) Regulations 2012, 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's appointed persons are Miss Lauren Porter and Ms Angela Ashton.

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, 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
- 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 (see the template in appendix 3) followed up with an email notification or phone call to parents
- Keeping their contact details up to date

Our school's appointed persons and first aiders are listed in appendix 1. Their names will also be displayed prominently in the medical room and the staff board by the main entrance.

3.2 The local authority and governing board

The Royal Borough of Windsor and Maidenhead 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.

3.3 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)

3.4 Staff

School staff are responsible for:

- Ensuring they follow first aid procedures
- Ensuring they know who the first aiders in school are
- Completing incident logs on Medical Tracker (see appendix 3) for all incidents they attend to where a first aider 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

It is every supervising adult's responsibility to provide first aid in case of a minor accident. Should an adult not have first aid training, they then can request help/ second opinion from a qualified First Aider.

In case of a major accident or a head injury a qualified First Aider should be asked to assist in giving First Aid.

Cuts

The nearest adult deals with small cuts. All open cuts should be covered after they have been treated with a cleansing wipe. Any adult can treat more severe cuts, but a fully trained first aider must attend the patient to give advice.

Parents and Guardians should be informed by logging the incident on Medical Tracker.

ANYONE TREATING AN OPEN CUT SHOULD USE RUBBER GLOVES.

All blood waste (heavy bleeding) should be placed in a yellow hazardous waste bag (stored under the desk in the first aid room) and disposed of in the hazardous waste bin in the Nursery.

Head injuries

Any bump to the head, no matter how minor, is treated as serious. All bumped heads should be treated with an ice pack. Parents and guardians must be informed by telephone and a summary of the conversation should be recorded on Medical Tracker. The adults in the child's classroom should be informed and keep a close eye on the child. All bumped head accidents should be recorded on Medical Tracker.
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. 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 schools appointed person Miss Lauren Porter will contact parents immediately
- The first aider will complete an incident log on Medical Tracker on the same day after an incident resulting in an injury. Parents/carers will receive an email notification informing them of the incident (appendix 3)

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

Calling the emergency services

In the case of a major accident, it is the decision of the fully trained first aider if the emergency services are to be called. Staff are expected to support and assist the trained first aider in their decision.

The Headteacher or Deputy Headteacher should be informed if such a decision has been made even if the accident happened on a school trip or on a school journey.

If the casualty is a child, their parents/ guardians should be contacted immediately and given all the information required.

If the casualty is an adult, their next of kin should be called immediately. All contact numbers for children and staff are available from the school office.

Dial 999, ask for ambulance and be ready with the following information:

1. Your telephone number: 01628 621741

2. Give your location as follows: Riverside Primary School and Nursery, Donnington Gardens, Cookham Road, Maidenhead

3. State that the postcode is: **SL6 7JA**

4. Give exact location in the setting: **Riverside Primary School and Nursery is off the roundabout on Cookham Road into Donnington Gardens**

5. Give your name:

6. Give name of child/adult and a brief description of child's/adult's symptoms:

7. Inform Ambulance Control of the best entrance and state that the crew will be met and taken to the injured party.

It is important to:

Speak clearly and slowly and be ready to repeat information if asked and be prepared to answer if the patient is breathing prior to giving any other details

4.2 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 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
- Information about the specific medical needs of pupils and any medication for the children
- 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 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 15 cm × 20 cm)
- 2 sterile eye pads, with attachments
- 12 assorted safety pins
- 1 pair of rustproof blunt-ended scissors

Risk assessments will be completed by the group leader/class teacher and checked by the EVC prior to any educational visit that necessitates taking pupils off school premises.

There will always be at least 1 first aider with a current first aid (FA) or paediatric first aid (PFA) 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 the following:

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

- 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

No medication is kept in first aid kits.

First aid kits are stored in:

- The medical room
- Class First Aid Grab Bags
- The school kitchen

Defibrillator

We have a defibrillator located in the first aid room. This can be used by anyone including the general public. When opening the defibrillator clear instructions are given to follow and any equipment needed e.g. scissors/gloves are provided in the attached bag.

6. Administering medicine in school

At the beginning of each academic year, any medical conditions are shared with staff and a list of these children and their conditions is available on Medical Tracker and a copy of their care plan is filed in the first aid room.

Children with medical conditions must have a care plan and these are completed with the parent/guardian. These need to be checked and reviewed regularly. Medications kept in the school for children with medical needs are stored in the first aid room. Each child's medication is clearly labelled with their name.

All medicines in school are administered following the agreement of a care plan.

Asthma

Children with Asthma do not require a care plan. In order for children's Asthma pumps to be kept in school an 'Asthma Action Plan' form must be filled out. The 'Asthma Action Plan' is obtainable from the office. Parents need to be directed to the office to fill out the card. The office then will pass the Asthma Action Plan on to the person responsible for Medicine at school, currently Miss Porter, who will update Medical Tracker and will inform classroom staff about the child's needs regarding the inhaler and its usage.

It is the parents/carers responsibility to provide the school with up-to-date inhalers for their children. Adults in the classroom are to check the expiry date on the pumps regularly and inform parents, should the inhaler expire or run out.

Inhalers should be clearly labelled with the child's name. Asthma sufferers should not share inhalers.

Generic emergency salbutamol asthma inhalers: In accordance with Human Medicines Regulations, amendment No2, 2014, the school is in possession of 'generic asthma inhalers', to use in an emergency.

These inhalers can be used for pupils who are on the school's Asthma register. The inhalers can be used if pupils' prescribed inhaler is not available (for example, if it is broken or empty). The emergency inhalers are stored in the First Aid cabinet in the first aid room. The inhalers are clearly labelled.

In the case of an emergency, an adult needs to be sent to get the inhaler while a First Aider remains with the child. Once the pump has been administered, (older children can administer it for themselves under supervision) the First Aider needs to record the time and dose of salbutamol (how many puffs have been administered). This needs to be recorded on Medical Tracker.

For further information on administering medicine see next section, also see Pupils with Medical Conditions in School Policy and the schools Asthma Policy.

Adults may also use the inhalers in an emergency and should follow the above instructions on recording the use of the inhalers.

When the emergency inhalers have been used, please notify the persons responsible for First Aid and Medicine, currently Miss Porter.

Other Medicines

Short term prescriptions; Medications such as the short term use of antibiotics or painkillers can be administered only if the parent /guardian fill out the 'Administering medication' form. Parents can obtain the form from the office on the first day of requesting the medicine to be administered at school.

The office is to pass the forms and medication to the person responsible for Medicine at school, currently Miss Porter, who will inform adults in the named child's class room regarding the administration of the medicine in question. The copy of the 'Administering Medication' must be kept in the Medical File and a copy needs to be kept with the medication. Medication may be administered in school if it is required to be taken four (4) times a day.

Office staff should encourage parents to administer all other medicine at home. All medication administered at school must be prescription medicine, prescribed by a doctor and obtained from the pharmacy, clearly labelled with the child's name and address. All medication should always be handled by adults. The transfer of medication from school to home, or after school club, and vice versa should be between adults and it should never be put in a child's book bag. Medications that need to be kept in the fridge can be stored in the first aid room.

Headlice

Staff do not touch children and examine them for headlice. If we suspect a child or children have headlice we will have to inform parents/carers. A standard letter should be sent home with all the children in that class where the suspected headlice incidence is. If we have concerns over headlice the school nurse can be called in, who is able to examine children and also give advice and guidance to parents/carers on how best to treat headlice.

Chicken pox and other diseases, rashes

If a child is suspected of having chicken pox etc, we will look at the child's arms or legs. Chest and back will only be looked at if we are further concerned. We should call a First Aider and two adults should be present. The child should always be asked if it was ok to look.

7. Record-keeping and reporting

7.1 First aid and accident record book

- An incident log will be completed on Medical Tracker by the first aider/ relevant member of staff on the same day
- 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
- Details of the accident report form logged will also be added to the pupil's record on Medical Tracker and parent's will be notified either via email or phone call (depending on the injury) about the incident logged
- Records held in the 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.

7.2 Reporting to the HSE

The site controller 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

7.3 Notifying parents

Any member of staff who logs a first aid incident on Medical Tracker will ensure that an email notification has been sent home to inform parents of any accident or injury sustained by a pupil, and any first aid treatment given, on the same day. In some cases, a phone call home will be made. Parents will also be informed if emergency services are called.

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

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 the local authority 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 2).

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.

9. Monitoring arrangements

This policy will be reviewed by the Deputy Headteacher, Lauren Porter annually.

At every review, the policy will be approved by the Headteacher.

10. 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

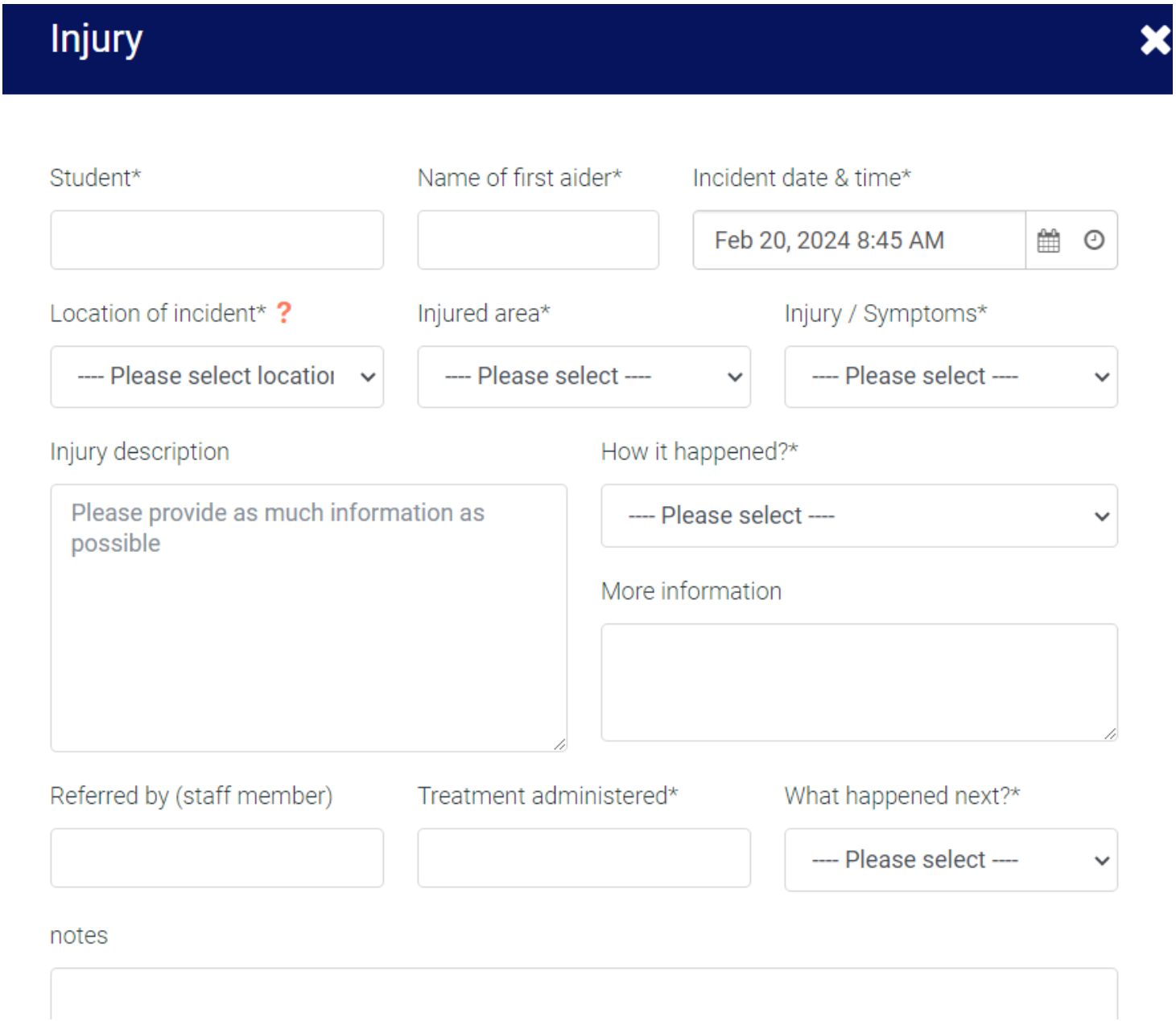
Appendix 1: list of appointed persons for first aid and trained first aiders

STAFF MEMBER'S NAME	ROLE	CONTACT DETAILS
Lauren Porter	Deputy Headteacher	office@riversideprimaryschool.org.uk
Angela Ashton	KS2 Support Staff	
Alice Coulthard	EYFS support staff	
Nafeesa Iqbal	EYFS support staff	
Mehreen Saddique	EYFS Support Staff	
Katie Duckworth	KS2 Support Staff	
Rosana Dirkin	Learning Mentor	
Ghazala Hussain	Learning Mentor	
Sarah Atkins	KS1 Support Staff	
Amalia Giannakaki	KS2 Support Staff	
Shelley Collins	Learning Mentor	
Asia Iqbal	KS2 Support Staff	

Appendix 2: 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	Mehreen Saddique Rosana Dirkin Nafeesa Iqbal Alice Coulthard	25/4/2022 13/5/2022	25/4/2025 12/5/2025
Schools First Aid (including epipen administration)	Angela Ashton Sarah Atkins Ghazala Hussain Katie Duckworth Amalia Giannakaki Shelley Collins Asia Iqbal	21/11/2023 19/10/2021 19/10/2021 3/11/2023 19/1/2023 3/11/2023 15/5/2023	20/11/2026 18/10/2024 18/10/2024 2/11/2026 18/1/2026 2/11/2023 14/5/2026
Epilepsy basic awareness and administration of Buccolam	Mehreen Saddique Angela Ashton Lauren Porter Rosana Dirkin Maria Martin Sarah Atkins Vicky Peat Ian Tillyer	28/2/2023 28/2/2023 28/2/2023 28/2/2023 28/2/2023 28/2/2023 28/2/2023 28/2/2023	28/2/2024 28/2/2024 28/2/2024 28/2/2024 28/2/2024 28/2/2024 28/2/2024 28/2/2024
Emergency First Aid at Work	Lauren Porter	17/5/2022	16/5/2025
Diabetes training	Amelia Walker Rosana Dirkin Angela Ashton	11/9/2022	

Appendix 3: accident report form



Riverside Primary School & Nursery
Cookham Road, Maidenhead, SL6 7JA

Tel: 01628 621741
office@riversideprimaryschool.org.uk
www.riversideprimaryschool.org.uk

20/02/2024

Dear Parent/ Carer of ,

We wanted to let you know that has had an accident in school today which has resulted in a minor injury.

Please find details of the injury below:

Injured area: Arm/arms

Injury type: Cut/Graze

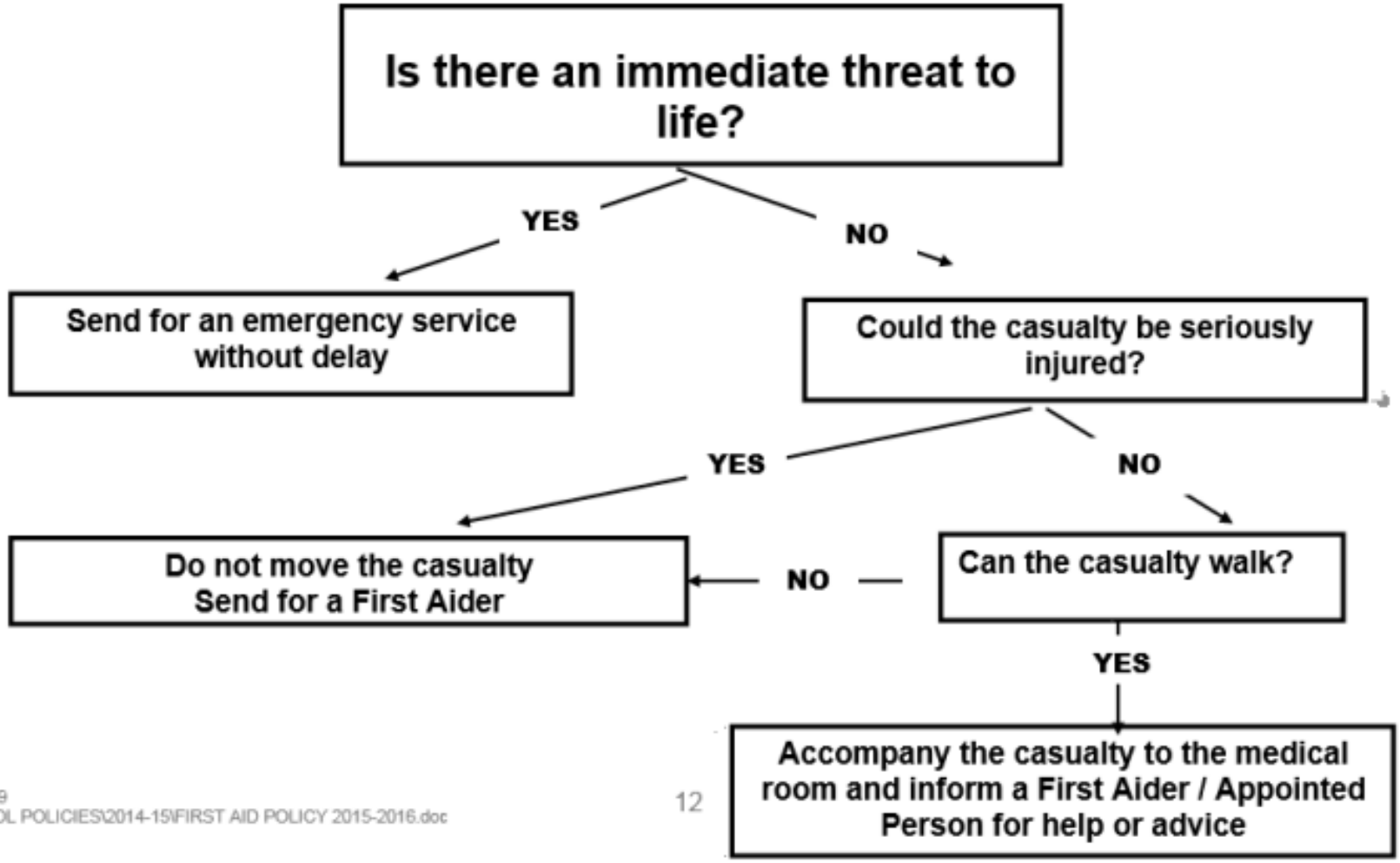
Treatment administered: Cleaned and plaster applied

Yours sincerely,

Shelley Collins

Appendix 4

ACCIDENT PROCEDURE PLAN



Appendix 5

ANAPHYLAXIS (ALLERGIC REACTION)

SIGNS AND SYMPTOMS	ACTION TO TAKE
• **Difficulty with breathing - indicating swelling of the vocal cords, leading to obstruction of the airways** • **Swelling around the lips and/or eyes** • **Feeling faint or dizzy** • **The sensation of a lump in the throat** • **Rash or production of hives** • **Sweating** • **Hoarseness** • **Headache** • **Diarrhoea and/or vomiting** • **In severe cases a child can collapse**	• SEND SOMEONE TO GET ADRENALINE • TELEPHONE FOR AN AMBULANCE (STATE "ANAPHYLACTIC SHOCK") • GIVE ADRENALINE AND NOTE THE TIME • LAY THE AFFECTED PERSON DOWN AND PUT IN RECOVERY POSITION. • STAY WITH HIM OR HER

NOT ALL SYMPTOMS NEED TO BE PRESENT AT THE SAME TIME

The child may have any or all of the above symptoms. Where signs and symptoms are delayed in a child with a known allergy, they should always be treated. If a child has suffered a previous reaction they almost certainly will recognise the significance of their symptoms, and this recognition should be respected.

Appendix 6

EMERGENCY ACTION PLAN FOR SWIMMING

	ACTION TO BE TAKEN AND BY WHOM
Who is in charge immediately an accident occurs	Teacher on Duty
Who is responsible for summoning the Emergency Services?	Teacher on Duty or Support Assistant
Who is in charge after further assistance has been sought?	Headteacher / Leadership Team or Teacher on duty
Details of the system of communication during an incident	● Mobile telephone ● Whistle to signal children to stop
The type and location of emergency equipment	Covered box clearly labelled for **swimming** containing: ● Spare First Aid kit. ● First Aid book. ● Mobile telephone ● Pool keys Box to be placed in an easy accessible and visible place
The key tasks and steps in dealing with an emergency	● One adult deals with child/children in difficulty ● One adult dials 999 and phones the school for extra support
The extent of First Aid provision	● First Aid Kit ● Rescue Aides: Poles, rope, buoyancy aides
The procedures for handling casualties and their aftercare	Follow school's First Aid Procedures
Who gives information to the police, families and other legitimate enquiries and how to give this information	Teacher, Leadership Team and HT
The procedures for compiling reports of incidents	● Incident recorded in First Aid Book ● Complete LEA report
The procedures for replenishing used supplies or equipment	● First Aider to check supplies weekly ● Teachers to report supplies used to First Aider
Where should counselling be sought if needed for those involved in any incident	Relevant Agencies contacted in consultation with parents and Headteacher

Appendix 7

ADMINISTERING MEDICATION

Name of child: .....

Class: Saplings / Maple / Mulberry / Chestnut / Cherry/ Beech / Birch / Olive / Oak / Pear/ Poplar / Willow / Holly / Hawthorn

I request that the First Aider or Appointed Person administer medication to my child.

The **prescribed medicine** is clearly labelled with the name of the child and the dosage instructions.

I have given the medication to the First Aider for safe-keeping.

Signed: .....

Relationship to child: .....

Date: .....

****

Agreed by the school

Signature: .....