

### 1. Scope

This guidance is applicable to all those involved in the provision of first aid related to school activities and should be considered in conjunction with the Administration of Medicines Policy and the Recording and Reporting Accidents (including RIDDOR) Policy.

### 2. Objectives

- To ensure that there is an adequate provision of appropriate first aid at all times.
- To ensure that where individuals have been injured there are suitable mechanisms in place to provide remedial treatment.
- To appoint the appropriate number of suitably trained people as Appointed Persons and First Aiders to meet the needs of the school and to maintain a record of that training and review annually.
- To provide relevant training and ensure monitoring of training needs.
- To provide sufficient and appropriate resources and facilities.
- To provide awareness of Health and Safety issues within the school and on school trips, to prevent, where possible, potential dangers or accidents.
- To inform staff and parents of the School's First Aid arrangements.
- To report, record and, where appropriate, investigate all accidents.
- To keep accident records - see Recording and Reporting Accidents (including RIDDOR) Policy.

New staff will be given information on the school's First Aid Policy as part of their induction. This policy should be considered in conjunction with the Administration of Medicines Policy.

### 3. Guidance

- The Bursar will be responsible for the implementation of this policy.
- The Bursar will undertake a risk assessment to determine the first aid needs. This will include consideration of the following:
  - Size of the school and whether it is on split sites / levels
  - Location of the school
  - Specific hazards or risks on the site
  - Staff or pupils with special health needs or disabilities
  - Previous record of accidents / incidents at the school
  - Provision for lunchtimes and breaks
  - Provision for leave / absence of first aiders
  - Off-site activities, including trips
  - Practical departments, such as science, technology, PE
  - Out of hours activities
  - Contractors on-site and agreed arrangements

### 4. Roles and responsibilities

#### All staff

- ensure they have read and understood the School's First Aid Policy.

#### Appointed person (School office)

- complete all necessary training and attend refresher courses as and when required;
- take charge when someone is injured or becomes ill;
- look after the first-aid equipment e.g., restocking the first-aid containers;
- ensure that an ambulance or other professional medical help is called when appropriate.

#### First aiders

- complete all necessary training and attend refresher courses as and when required;
- give immediate help to casualties with common injuries or illness and those arising from specific hazards at school;
- when necessary, ensure that an ambulance or other professional medical help is called.

#### Board of Trustees and SLT or Headteacher (as delegated function)

- ensure the school has a first aid policy and it is enforced;
- ensure that the policy is based on risk assessments of the school;
- regularly review the policy, at least annually and particularly after any operational changes, to ensure the provision is adequate.

### 5. Specific first aid provision

#### First aiders

Sufficient trained first aiders to cover day to day and other school activities will be provided.

- At least one paediatric first aider on site at all times and on educational visits if EYFS children are present.
- At least one member of staff per year group is First Aid trained.
- At least one member of the school office is First Aid trained.
- At least one member of the facilities team is First Aid trained.
- At least one member of our kitchen and PE staff are First Aid trained.
- A trained First Aider attends every school trip.

### 6. First aid training

The Premises Manager has responsibility for day-to-day Health and Safety implementation on site. The Deputy Bursar is responsible for ensuring that there is an adequate number of qualified First Aiders/Appointed Persons (using recognised and competent training providers).

Designated staff undertake first aid training every three years.

All first aiders are trained in the use and administration of Epipens – refer to Administration of Medicines Policy.

Notices giving clear information about the location of first aid facilities, equipment and personnel are displayed in prominent places throughout the school, including the staff room, medical room and school office.

Paediatric First Aid (PFA) training is renewed every three years and relevant for workers caring for young children.

A list of staff who have a current Paediatric First Aid (PFA) certificate is available to parents from the school office.

### **7. First aid boxes**

- First aid boxes will be provided in areas of the school where accidents are considered most likely and staff should make themselves aware of these locations.
- A first aid box will also be taken when pupils leave the school on organised trips or participate in sports events.
- First aid boxes will be replenished every half term or if necessary.
- The contents of a first aid box will be in accordance with the guidance given in HSE document “Basic advice on first aid at work”.

The school office has a designated, adjoining Medical Room for treatment, sickness and the administration of First Aid.

### **8. Medical care**

All parents are asked to complete a medical information form, providing their child’s medical history, when they start at Holy Cross Prep School. Details of any such information held is available to all First Aiders. In addition, the school has arrangements in place for:

- dealing with pupils who have special educational needs or specialist medical needs;
- provision of medical examinations and immunisations;
- holding medical records;
- dealing with medicines and treatments brought to school for pupils.

#### **Allergies**

Any allergies will be verified by the primary first aider who will meet with the parents to discuss any concerns regarding food in cooperation with the Chef. Any meal plans will be agreed at this time. Also refer to the Administration of Medicines Policy and Catering and Food Hygiene Policy

### **9. Emergency medical treatment**

- In accepting a place at the school, parents are required to give their consent for the Headteacher or other nominated representative to provide, on the advice of qualified medical opinion, emergency medical treatment, including general anaesthetic and surgical procedure under the NHS if the school is unable to contact a parent.
- The school has an automated external defibrillator which is located in the school hall entrance hall.
- Please refer to the Administration of Medicines Policy for the protocol for the emergency use of Adrenaline Auto-Injectors (AAIs) and Inhalers.

### **Emergency procedure**

In the event of a medical emergency, contact the appointed First Aiders by the use of walkie-talkies and Code 100 or telephone the School office.

Please refer to Appendix B for the procedure to follow when an ambulance is required.

Where it is appropriate to transport a pupil to hospital without using an ambulance, the school carries insurance for staff transporting pupils on school business. However, you should **NEVER** go to the hospital alone with a pupil in a car.

An Appointed Person should always call an ambulance on the following occasions:

- in the event of a serious injury;
- in the event of any significant head injury;
- in the event of a period of unconsciousness.

All serious accidents should be reported to the Headteacher or the Bursar.

### **In school: Non-emergency procedure**

Any pupil complaining of illness or who has been injured is sent to the school office for the qualified First Aider to inspect and, where appropriate, treat. Supervision will be provided (this designated facility has access to a wash basin and toilet facilities). Where appropriate, parents should be contacted as soon as possible so that the pupil can be collected and taken home.

However, if the illness/injury can be dealt with by a designated First Aider at the location of the incident and follow up supervision is not required, then this process should be followed. For example, a pupil falls over in the playground resulting in a minor graze.

The school recommends that unless it cannot possibly be avoided, no member of staff should administer first aid or intimate care to a pupil without a witness (another member of staff). Refer to Staff Handbook.

No member of staff or volunteer helper should administer first aid unless they have received proper training.

A member of staff, who is injured at work, should not continue to work if there is the possibility that further medical treatment is needed. The member of staff or other supervising adult should seek medical advice without delay.

### **Head injuries**

Accidents involving a head injury can be problematic because the extent of the injury may not be evident (i.e., internal) and the effects only become noticeable after a period of time.

If the head injury is minor, the pupil should be sent to the school office where they should be monitored closely. A sticker is given to the pupil to wear all day for staff to be aware, and the accident note (see Appendix C) should be completed and emailed to parents, class teacher and teaching assistant.

Any serious head injury should always be referred for hospital treatment (please follow the Emergency procedure below).

It is the parents' responsibility to advise the school if their daughter has been diagnosed with concussion outside of school.

### **10. Safeguarding and child protection**

The Safeguarding and Child Protection Policy includes a local authority body map to assist in the identification of injury sites. When administering First Aid, First Aiders should consider this guidance as applicable, in the context of Safeguarding / Child Protection responsibilities.

### **11. Out of hours activities**

School First Aiders must be available for cover until either 6.00pm each day or when the last pupil leaves.

Children in the EYFS do not have after-school activities after 6.00pm. A paediatric first aider will be in attendance when EYFS children are on site and will be present on school trips.

The Bursar is responsible for ensuring that adequate cover is provided for events outside of normal school hours, e.g., Camp Night.

The organiser or teacher in charge of evening events (parents' evenings, concerts, plays) or weekend events must discuss and agree First Aid provision with the Bursar as part of the event planning and risk assessment.

### **12. Incident reporting / informing parents and RIDDOR**

All incidents/injuries/head injuries/ailments and treatments are recorded in the First Aid Book which is kept in the Medical Room adjacent to the school office. Minor cuts and bruises are recorded in a book kept in the playground equipment box.

Any significant injury also needs to be recorded in the Adult Accident Book (held in the Bursar's office) or Pupil Accident Book (held in the Medical Room).

Parents are informed by email of any head injury or other serious injury.

For EYFS children, there is a duty to inform parents of any accident or injury sustained by the pupil on the same day or as soon as reasonably practicable, and of any first aid treatment given. Parents are informed in all instances other than those of the most minor or trivial nature.

The school office staff will contact the parents if there are any concerns about the injury, or there is a need to send a pupil home through illness.

In an emergency, if parents cannot be reached by telephone or other means, the pupil's emergency contact will be contacted.

Accidents resulting in death or specified injury, accidents or illnesses which prevent the injured person from doing their normal work for more than three days are to be reported in accordance with the Reporting of Injuries, Diseases & Dangerous Occurrences Regulations 1995 (RIDDOR): please refer to the Recording and Reporting Accidents (including RIDDOR) Policy.

A summary of accidents is reviewed at the termly School Health and Safety Committee and reported to the Buildings/Health and Safety Committee.

### **13. Sharing of information**

At the start of the academic year, class teachers, PE and other staff as appropriate are provided with a list of pupils who are known to have medical problems. This will be reviewed at each change of circumstances.

### **14. Head lice**

A general letter is sent to the parents of all pupils in a year group if there is a case of head lice in the class. If live lice are noticed in a pupil's hair, the school office will contact parents by phone and ask them to collect their daughter from school.

### **15. Threadworm**

A general letter is sent to the parents of all pupils in a year group if there is a case of threadworm in the class.

### **16. Policy review**

Annually or before where necessary.

This is a public policy which is published on the school website and is reviewed annually by the board of trustees.

Last reviewed October 2024. Next review October 2025.

### **References:**

Commentary on the Regulatory Requirements, Part 3 ([www.isi.net](http://www.isi.net))

Reference Guide to the key standards in each type of social care service inspected by Ofsted ([www.ofsted.gov.uk](http://www.ofsted.gov.uk))

Health and Safety at Work" Section H of the ISBA Model Staff Handbook,

Health and Safety and Welfare at Work" Chapter N of the ISBA Bursar's Guide

"Insurance" Chapter K of the Bursar's Guide by HSBC Insurance Brokers Ltd

Early Years Foundation Stage (EYFS) Checklist and Monitoring Reference for Inspectors ([www.isi.net](http://www.isi.net))

DfE "Guidance on First Aid for Schools" ([www.dfe.gov.uk](http://www.dfe.gov.uk))

HSE home page, First Aid at Work ([www.hse.gov.uk](http://www.hse.gov.uk))

MOSA Guidance: "First Aid Provision and Training in Schools" ([www.mosa.org.uk](http://www.mosa.org.uk))

DfE Automated external defibrillators (AEDs) A guide for schools, June 2017

## Appendix A - Hygiene / Infection control

### 1. Scope

This guidance is applicable to all employees and / or contractors of the school who undertake activities associated with infection control.

### 2. Objectives

To ensure that the school prevents the spread of infection by:

- 2.1 Maintaining a clean environment.
- 2.2 Practicing good standards of personal hygiene.

### 3. Guidance

3.1 The Bursar with the Facilities Team and the PA to the Headteacher with the School office will be responsible for the implementation and review of this guidance.

3.2 Good hygiene practice are followed by all those involved with:

- General cleaning;
- Cleaning of blood and body fluid spillages;
- Clinical waste;
- Laundry;
- Use of personal protective equipment.

3.3 Bites, injuries and sharps:

- Where skin is broken, make the wound bleed and wash thoroughly with soap and water.
- Report to the School office for treatment.

3.4 Animals

- Animals can carry infections, so always wash hands after any contact.
- When visiting farms, check hand washing facilities and ensure that children do not eat or drink whilst touring the farm, or put fingers into mouths etc. Use waterproof plasters to protect any cuts or grazes not covered by clothes.

3.5 Vulnerable children

- Some medical conditions make children vulnerable to infections that would not normally be serious by reducing immunity. These may include cancers and those on steroids. Such individuals are particularly vulnerable to chickenpox and measles. If they are exposed, contact the school office immediately.
- Shingles is caused by the same virus as chickenpox and therefore anyone who has not had chickenpox is potentially vulnerable if they have had contact with a case of shingles.
- If in any doubt seek advice from the school office.

### 3.6 Pregnancy

If a pregnant woman develops a rash or is in direct contact with someone with a potentially infectious rash then the school office should be contacted immediately. Points to consider include:

- German measles (rubella). If a pregnant woman comes into contact with German Measles they should inform their GP and ante-natal carer immediately.
- Slapped cheek disease (Parvovirus B19) can occasionally affect an unborn child. Any potential exposure should be reported to the ante-natal carer.
- Chickenpox can affect the pregnancy if a woman has not already had the infection. Any potential exposure should be reported to the GP and ante-natal carer.

### 3.7 Immunisations

Immunisation status is checked at school entry and at the time of any vaccination.

Hands must be washed before and after giving First Aid.

Single-use disposable gloves should be worn when treatment involves blood or other body fluids.

Any spillage of bodily fluids should be thoroughly cleaned using the appropriate cleaning materials and equipment.

Exposed cuts and abrasions should always be covered.

Hand sanitisers are installed across the school to assist with additional hand hygiene including:

All classrooms  
Medical Room  
Hall  
Staff Room  
ICT Suite

Keyboards are wiped with sanitising wipes frequently and pupils are encouraged to use the anti-bacterial hand sanitiser on entry to the ICT Suite before use of the keyboards etc.



### Appendix B - Procedure to follow when an ambulance is required

1. It is the First Aider's decision in conjunction with the School office to call an ambulance. If in doubt, ask another First Aider for a second opinion.
2. NEVER go to the hospital alone with a pupil in a car.
3. Always inform other staff so they know what is happening.
4. Make sure the patient is comfortable. Do not leave the patient on their own. Follow the instructions given by the emergency services.
5. Inform the Caretaker / Premises Manager that the ambulance is due and ask them to wait at the school gate for it to arrive so it can be directed to the main doors.
6. A staff member must contact the parent(s) and/or the pupil's emergency contact if the parent(s) cannot be reached.
7. If the parent (or other Emergency Contact) cannot get to school, a member of staff (preferably a First Aider) should go with the pupil in the ambulance to hospital:
  - If a parent wishes you to accompany them, inform a member of staff and keep school informed about the pupil, and your expected time of return.
  - Take personal details about the pupil with you to hospital – DOB, known medical conditions, next of kin, home address and telephone number.
8. Inform the School office staff that you are going to the hospital.
9. Take a mobile phone with you to the hospital, either your own or the school phone if it is available.
10. Once the parent arrives at the hospital, ring school office and ask for someone to collect you.



# FIRST AID POLICY including EYFS

## Appendix C - Sample

\* ACCIDENT NOTE \*

Dear Parent,

Your daughter had a slight accident/injury at School today. This did not seem serious enough to call you, but it is School policy to inform you just in case there are any delayed reactions.

PUPIL'S NAME: .....

CLASS: .....

DETAILS: .....  
.....

DATE: .....