

SCHOOLS ACHIEVING MORE TOGETHER Advantage rimarv



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1. Revisions

Date	Summary of changes	
11.11.24	6.1 Record keeping. We are now using Medical tracker to record and share all incidents with parents. Included this information.	
11.11.24	6.1 Changed wording from accident book to Medical tracker when referring to how records are kept.	
11.11.14	Appendix 1 - Updated list of staff who are first aid trained	
11.11.24	Appendix 3 - Updated First Aid training log	



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 <u>Statutory Framework for the Early Years Foundation Stage</u>, advice from the Department for Education on <u>first aid in schools</u> and <u>health and safety in schools</u>, , guidance from the Health and Safety Executive (HSE) on <u>incident reporting in schools</u>, and the following legislation:

- <u>The Health and Safety (First-Aid) Regulations 1981</u>, 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
- <u>The Management of Health and Safety at Work Regulations 1992</u>, which require employers to make an assessment of the risks to the health and safety of their employees
- <u>The Management of Health and Safety at Work Regulations 1999</u>, which require employers to carry out risk assessments, make arrangements to implement necessary measures, and arrange for appropriate information and training
- <u>The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013</u>, 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
- <u>Social Security (Claims and Payments) Regulations 1979</u>, which set out rules on the retention of accident records
- <u>The School Premises (England) Regulations 2012</u>, which require that suitable space is provided to cater for the medical and therapy needs of pupils

3. Roles and responsibilities

In schools with Early Years Foundation Stage provision, at least 1 person who has a current paediatric first aid (PFA) certificate must be on the premises at all times.

Beyond this, in all settings – and dependent upon an assessment of first aid needs – employers must usually have a sufficient number of suitably trained first aiders to care for employees in case they are injured at work. However, the minimum legal requirement is to have an 'appointed person' to take charge of first aid arrangements, provided your assessment of need has taken into account the nature of employees' work, the number of staff, and the layout and location of the school. The appointed person does not need to be a trained first aider.

Section 3.1 below sets out the expectations of appointed persons and first aiders as set out in the 1981 first aid regulations and the DfE guidance listed in section 2.

All schools should adapt this section to reflect their circumstances, in line with their assessment of first aid needs.

3.1 Appointed person(s) and first aiders

The school's appointed first aiders 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 2)
- Keeping their contact details up to date

Our school's first aiders are listed in appendix 1. Their names will also be displayed prominently around the school.

3.2 The local authority and governing board

Hackney Education has ultimate responsibility for health and safety matters in the school, but delegates responsibility for the strategic management of such matters to the federation's governing board. The governing board delegates approval of this policy to the local advisory board (LAB) and operational matters and day-to-day tasks to the headteacher and staff members.

3.2 The governing board

The federation's governing board has ultimate responsibility for health and safety matters in the school, but delegates approval of this policy to the local advisory board (LAB) and 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 accident reports (see appendix 2) 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

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 person on duty will contact parents immediately
- The first aider will 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 one 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:

- A mobile phone
- A portable first aid kit including, at minimum:
 - o 6 individually wrapped sterile adhesive dressings
 - o 1 large sterile unmedicated dressing
 - o 2 triangular bandages individually wrapped and preferably sterile
 - o 2 safety pins
 - o Individually wrapped moist cleansing wipes
 - o 2 pairs of disposable gloves
- 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 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

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

There will always be at least one first aider with a current 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:

- 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
- All classrooms
- The school kitchen

6. Record-keeping and reporting

6.1 First aid and accident record book

- An accident form will be completed by the first aider 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
- A copy of the accident report form will emailed to the parents using Medical tracker
- Records held by the school on my concern 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 admin team 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 admin team 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:
 - o Fractures, other than to fingers, thumbs and toes
 - o Amputations
 - o Any injury likely to lead to permanent loss of sight or reduction in sight
 - o Any crush injury to the head or torso causing damage to the brain or internal organs
 - o Serious burns (including scalding) which:
 - \circ 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
 - o Any scalping requiring hospital treatment
 - o 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 headteacher 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:
 - o Carpal tunnel syndrome
 - o 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:
 - o The collapse or failure of load-bearing parts of lifts and lifting equipment
 - o The accidental release of a biological agent likely to cause severe human illness
 - o The accidental release or escape of any substance that may cause a serious injury or damage to health
 - o 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

6.3 Notifying parents (early years only)

The EYFS staff 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 (early years only)

The EYFS Leader 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 Hackney Social Care 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 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).

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 three years.

8. Monitoring arrangements

This policy will be reviewed by the Inclusion Leader every year. At every review, the policy will be approved by the Local Advisory Board.

9. Links with other policies

This first aid policy is linked to the:

- Health and safety policy
- Medical needs policy

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2. Appendix 1: list of trained first aiders

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Martin MaudsleyFull Paediatric First Aid – Aid TrainingNatalie SawyerFull Paediatric First Aid – Aid TrainingNuriye CinarFull Paediatric First Aid – Aid TrainingPia RussellFull Paediatric First Aid – Aid TrainingRushna BegumFull Paediatric First Aid – Aid TrainingSarah CampbellFull Paediatric First Aid – Aid TrainingSimran KuarFull Paediatric First Aid – Aid TrainingSting MayembaFull Paediatric First Aid – Aid TrainingTaylor BowdenFull Paediatric First Aid – Aid TrainingTaylor DrewFull Paediatric First Aid – Aid TrainingVeronica ScottFull Paediatric First Aid – Aid TrainingWendy MautadinFull Paediatric First Aid – Aid TrainingYvonne CoyFull Paediatric First Aid – Aid Training	Lyn Stone	Full Paediatric First Aid – Aid Training
Natalie SawyerFull Paediatric First Aid – Aid TrainingNuriye CinarFull Paediatric First Aid – Aid TrainingPia RussellFull Paediatric First Aid – Aid TrainingRushna BegumFull Paediatric First Aid – Aid TrainingSarah CampbellFull Paediatric First Aid – Aid TrainingSimran KuarFull Paediatric First Aid – Aid TrainingSting MayembaFull Paediatric First Aid – Aid TrainingTaylor BowdenFull Paediatric First Aid – Aid TrainingTaylor DrewFull Paediatric First Aid – Aid TrainingVeronica ScottFull Paediatric First Aid – Aid TrainingWendy MautadinFull Paediatric First Aid – Aid TrainingYvonne CoyFull Paediatric First Aid – Aid Training	Margaret O'Connor	Full Paediatric First Aid – Aid Training
Nuriye CinarFull Paediatric First Aid – Aid TrainingPia RussellFull Paediatric First Aid – Aid TrainingRushna BegumFull Paediatric First Aid – Aid TrainingSarah CampbellFull Paediatric First Aid – Aid TrainingSimran KuarFull Paediatric First Aid – Aid TrainingSting MayembaFull Paediatric First Aid – Aid TrainingTaylor BowdenFull Paediatric First Aid – Aid TrainingTaylor DrewFull Paediatric First Aid – Aid TrainingVeronica ScottFull Paediatric First Aid – Aid TrainingWendy MautadinFull Paediatric First Aid – Aid TrainingYvonne CoyFull Paediatric First Aid – Aid Training	Martin Maudsley	Full Paediatric First Aid – Aid Training
Pia RussellFull Paediatric First Aid – Aid TrainingRushna BegumFull Paediatric First Aid – Aid TrainingSarah CampbellFull Paediatric First Aid – Aid TrainingSimran KuarFull Paediatric First Aid – Aid TrainingSting MayembaFull Paediatric First Aid – Aid TrainingTaylor BowdenFull Paediatric First Aid – Aid TrainingTaylor DrewFull Paediatric First Aid – Aid TrainingVeronica ScottFull Paediatric First Aid – Aid TrainingWendy MautadinFull Paediatric First Aid – Aid TrainingYvonne CoyFull Paediatric First Aid – Aid Training	Natalie Sawyer	Full Paediatric First Aid – Aid Training
Rushna BegumFull Paediatric First Aid – Aid TrainingSarah CampbellFull Paediatric First Aid – Aid TrainingSimran KuarFull Paediatric First Aid – Aid TrainingSting MayembaFull Paediatric First Aid – Aid TrainingTaylor BowdenFull Paediatric First Aid – Aid TrainingTaylor DrewFull Paediatric First Aid – Aid TrainingVeronica ScottFull Paediatric First Aid – Aid TrainingWendy MautadinFull Paediatric First Aid – Aid TrainingYvonne CoyFull Paediatric First Aid – Aid Training	Nuriye Cinar	Full Paediatric First Aid – Aid Training
Sarah CampbellFull Paediatric First Aid – Aid TrainingSimran KuarFull Paediatric First Aid – Aid TrainingSting MayembaFull Paediatric First Aid – Aid TrainingTaylor BowdenFull Paediatric First Aid – Aid TrainingTaylor DrewFull Paediatric First Aid – Aid TrainingVeronica ScottFull Paediatric First Aid – Aid TrainingWendy MautadinFull Paediatric First Aid – Aid TrainingYvonne CoyFull Paediatric First Aid – Aid Training	Pia Russell	Full Paediatric First Aid – Aid Training
Simran KuarFull Paediatric First Aid – Aid TrainingSting MayembaFull Paediatric First Aid – Aid TrainingTaylor BowdenFull Paediatric First Aid – Aid TrainingTaylor DrewFull Paediatric First Aid – Aid TrainingVeronica ScottFull Paediatric First Aid – Aid TrainingWendy MautadinFull Paediatric First Aid – Aid TrainingYvonne CoyFull Paediatric First Aid – Aid Training	Rushna Begum	Full Paediatric First Aid – Aid Training
Sting MayembaFull Paediatric First Aid – Aid TrainingTaylor BowdenFull Paediatric First Aid – Aid TrainingTaylor DrewFull Paediatric First Aid – Aid TrainingVeronica ScottFull Paediatric First Aid – Aid TrainingWendy MautadinFull Paediatric First Aid – Aid TrainingYvonne CoyFull Paediatric First Aid – Aid Training	Sarah Campbell	Full Paediatric First Aid – Aid Training
Taylor BowdenFull Paediatric First Aid – Aid TrainingTaylor DrewFull Paediatric First Aid – Aid TrainingVeronica ScottFull Paediatric First Aid – Aid TrainingWendy MautadinFull Paediatric First Aid – Aid TrainingYvonne CoyFull Paediatric First Aid – Aid Training	Simran Kuar	Full Paediatric First Aid – Aid Training
Taylor DrewFull Paediatric First Aid – Aid TrainingVeronica ScottFull Paediatric First Aid – Aid TrainingWendy MautadinFull Paediatric First Aid – Aid TrainingYvonne CoyFull Paediatric First Aid – Aid Training	Sting Mayemba	Full Paediatric First Aid – Aid Training
Veronica ScottFull Paediatric First Aid – Aid TrainingWendy MautadinFull Paediatric First Aid – Aid TrainingYvonne CoyFull Paediatric First Aid – Aid Training	Taylor Bowden	Full Paediatric First Aid – Aid Training
Wendy MautadinFull Paediatric First Aid – Aid TrainingYvonne CoyFull Paediatric First Aid – Aid Training	Taylor Drew	Full Paediatric First Aid – Aid Training
Yvonne Coy Full Paediatric First Aid – Aid Training	Veronica Scott	Full Paediatric First Aid – Aid Training
	Wendy Mautadin	Full Paediatric First Aid – Aid Training
Zeynep Suer Full Paediatric First Aid – Aid Training	Yvonne Coy	Full Paediatric First Aid – Aid Training
	Zeynep Suer	Full Paediatric First Aid – Aid Training

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6. Appendix 2: accident report form



Medical Tracker Logging Form

Name of pupil and Class	
First aider name	
Date and time	
Location	
Injured area	
How it happened	
Injury description	
Treatment administered	

Name of pupil and Class	
First aider name	
Date and time	
Location	
Injured area	
How it happened	
Injury description	
Treatment administered	



7. Appendix 3: first aid training log

PA

Name	Level	Date Awarded	Expiry Date
Amy Olaedochi	Full Paediatric First Aid – Aid Training	16/06/2023	15/06/2026
Aysa Begum	Full Paediatric First Aid – Aid Training	04/01/2022	04/01/2025
Catherine Tracy	Full Paediatric First Aid – Aid Training	16/06/2023	15/06/2026
Clemencia Pontes	Full Paediatric First Aid – Aid Training	16/06/2023	15/06/2026
Dilek Cinar	Full Paediatric First Aid – Aid Training	16/06/2023	15/06/2026
Dounia Davy	Full Paediatric First Aid – Aid Training	21/10/2022	21/10/2025
Elizabeth Anteh	Full Paediatric First Aid – Aid Training	21/10/2022	21/10/2025
Ellen Cook	Full Paediatric First Aid – Aid Training	16/06/2023	15/06/2026
Estela Gonzalez Sanchez	Full Paediatric First Aid – Aid Training	04/01/2022	04/01/2025
Eva Dankwah	Full Paediatric First Aid – Aid Training	16/06/2023	15/06/2026
Fataha Khan	Full Paediatric First Aid – Aid Training	21/10/2022	21/10/2025
Keely Weatherstone	Full Paediatric First Aid – Aid Training	04/01/2022	04/01/2025
Kerry Hart	Full Paediatric First Aid – Aid Training	16/06/2023	15/06/2026
Ketty Sassicanta	Full Paediatric First Aid – Aid Training	04/01/2022	04/01/2025
Korinna Roeding	Full Paediatric First Aid – Aid Training	04/01/2022	04/01/2025
Lyn Stone	Full Paediatric First Aid – Aid Training	16/06/2023	15/06/2026
Margaret O'Connor	Full Paediatric First Aid – Aid Training	04/01/2022	04/01/2025
Martin Maudsley	Full Paediatric First Aid – Aid Training	04/01/2022	04/01/2025
Natalie Sawyer	Full Paediatric First Aid – Aid Training	16/06/2023	15/06/2026
Nuriye Cinar	Full Paediatric First Aid – Aid Training	21/10/2022	21/10/2025
Pia Russell	Full Paediatric First Aid – Aid Training	16/06/2023	15/06/2026
Rushna Begum	Full Paediatric First Aid – Aid Training	21/10/2022	21/10/2025
Sarah Campbell	Full Paediatric First Aid – Aid Training	21/10/2022	21/10/2025
Simran Kuar	Full Paediatric First Aid – Aid Training	16/06/2023	15/06/2026
Sting Mayemba	Full Paediatric First Aid – Aid Training	16/06/2023	15/06/2026
Taylor Bowden	Full Paediatric First Aid – Aid Training	16/06/2023	15/06/2026
Taylor Drew	Full Paediatric First Aid – Aid Training	16/06/2023	15/06/2026
Veronica Scott	Full Paediatric First Aid – Aid Training	04/01/2022	04/01/2025
Wendy Mautadin	Full Paediatric First Aid – Aid Training	21/10/2022	21/10/2025
Yvonne Coy	Full Paediatric First Aid – Aid Training	16/06/2023	15/06/2026
Zeynep Suer	Full Paediatric First Aid – Aid Training	21/10/2022	21/10/2025

Policy written:	November 2022
Amended/Updated:	November 2022
Adopted by the Local Advisory Board:	November 2022
Review date:	November 2023

The XXX have reviewed this policy with careful consideration of our approach to equalities as outlined in the Equalities Policy, January 2020.

We would like to acknowledge the work of other colleagues in drafting this policy. We have drawn on a range of sources including policies from other schools, good practice guides, published schemes and LA and Statutory guidelines where appropriate.

