



AVANTI COURT

PRIMARY SCHOOL

FIRST AID POLICY

<i>Agreed & Ratified: September 2024</i>	<i>Review dates): July 2025</i>
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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 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](#), 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 Incidents must be reported to the Health and Safety Executive (HSE), and set out the timeframe for this and how long records of such Incidents must be kept
- [Social Security \(Claims and Payments\) Regulations 1979](#), which set out rules on the retention of Incident 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

This policy complies with our funding agreement and articles of association.

3. Roles and responsibilities

3.1 Appointed person(s) and first aiders

The school's appointed Welfare Officer 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.
- Sending pupils home to recover, where necessary following from Principal discretion.
- Keeping their contact details up to date
- Maintaining accurate and up to date records of all first aid trained staff certificates and update and re-enrol staff as required to first aid training.
- Keeping The names of our school's first aiders are displayed prominently around the school.

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
- Administering first aid to injured child o, staff, visitor at school and completing the Incident form via Medical Tracker as required on the same day, or as soon as is reasonably practicable, after an incident.
- Ensuring that the primary guardian is notified via of the injury via Medical Tracker notification or via a phone call for any major or significant head injury.

3.2 The Trust

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

3.4 The Principal

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

- Ensuring that an appropriate number of first aiders 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)

3.5 Staff

School staff are responsible for:

- Ensuring they follow first aid procedures
- Ensuring they know who the first aiders in school are
- Informing the Welfare officer or First Aiders of a first aid incident they may occur within their units.
- Informing the welfare officer, Principal or their line manager of any specific health conditions or first aid needs

4. First aid procedures

4.1 In-school procedures

In the event of an Incident 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 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 Welfare Officer/ Admin Team/SLT will contact parents immediately.
- The first aider will complete an incident form on Medical Tracker 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
- Information about the specific medical needs of pupils (copy of their care plan)

- Risk assessments will be completed by the class teacher prior to any educational visit that necessitates taking pupils off school premises.
- Emergency Yellow Card with emergency contact details.
- There will always be at least one first aider with a current paediatric first aid certificate on school trips and visits, as required by the statutory framework for the Early Years Foundation Stage.
- There will always be at least one first aider on school trips and visits for pupils in Year 1-6.

5. First aid equipment

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

- A leaflet with general first aid advice
- Regular and large bandages
- Eye pad bandages
- Triangular bandages
- Adhesive tape
- Safety pins
- Disposable gloves
- Antiseptic wipes
- Plasters of assorted sizes
- Scissors
- Cold compresses
- Burns dressings

No medication is kept in first aid kits.

First aid kits are stored in:

- The medical room
- Reception area
- All classrooms
- The school kitchen
- The Site Keeper's office

6. Record-keeping and reporting

6.1 First aid and Incident recording

- An incident form via Medical Tracker 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 incident, including all of the information included in the incident form.
- Details of the Incident/injury will be recorded via the web-based platform Medical Tracker which is accessible from any device by any first aider.
- Records will be held onto Medical Tracker and retained at trust level for minimum of 3 years, in accordance with regulation 25 of the Social Security (Claims and Payments) Regulations 1979, and then securely backed up or destroyed thereafter.

6.2 Reporting to the HSE

The Principal, Premises Manager, ABSM will keep a record of any Incident which results in a reportable injury, disease, or dangerous occurrence as defined in the RIDDOR 2013 legislation (regulations 4, 5, 6 and 7).

The Principal, Premises Manager, ABSM will report these to the Health and Safety Executive as soon as is reasonably practicable and in any event within 10 days of the incident.

Reportable injuries, diseases or dangerous occurrences 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)
 - 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
- Injuries where an employee is away from work or unable to perform their normal work duties for more than 7 consecutive days (not including the day of the incident)
- Where an Incident leads to someone being taken to hospital
- 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 Incidental release of a biological agent likely to cause severe human illness
 - The Incidental 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

6.3 Notifying parents

The class teacher will inform parents of any incident or injury sustained by a pupil, and any first aid treatment given, on the same day, or as soon as reasonably practical. All pupils who receive an Incident or injury take home a letter for their parent/carer on the day of the injury. Should a child leave the letter detailing the injury at school the class teacher will inform the parent by telephone

6.4 Reporting to Ofsted and child protection agencies

The Principal will notify Ofsted of any serious Incident, 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 DSL/Principal will also notify child protection agencies of any serious Incident or injury to, or the death of, a pupil while in the school's care.

7. Training

- School staff are requested undertake first aid training if required.
- 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. A copy of their certificate is kept on file at school level for their records.

- Staff are encouraged to renew their first aid training when it is no longer valid.
- 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 and is updated at least every 3 years.

8. Children with Medical Needs

- Children with medical needs have the same rights of admission to a school as other children.
- Most children with medical needs can attend school and take part in normal activities, sometimes with support.
- Parents/carers have the prime responsibility for their child's health and should provide school's with information about their child's medical condition.
- An Individual Health Care Plan will be put in place, if required, to help staff identify the necessary safety measures to support children with long term medical needs and ensure that they, and others, are not put at risk. These will be drawn up together with parent and school health nurse.
- All children with significant medical needs will have their photograph and a brief description of their needs displayed in the school staff room and medical room.

9. Administering medicines in school

- There is no legal or contractual duty on staff to administer medicine or supervise a child taking it.
- If a child is taking a prescribed medicine, it is the parent's/carer's responsibility to come to school and inform the Welfare Officer of the dosage and frequency and to fill out the necessary documentation. Only prescribed medicines will be administered by the Welfare Officer, Office team or First Aiders in his/her absence.
- In exceptional circumstances, e.g. if anti-biotic medicine has to be taken four times a day, a first aider will administer prescribed medicine providing that a 'Parental Agreement' form has been completed and signed. The relevant forms are kept in the school office and all staff are informed within their units via email.
- All prescribed medicines that are due to be administered must be kept in the medical room or in the fridge away from pupils.
- It is the child's responsibility to come to the school office for the medicine to be given, the school does not accept responsibility if the child forgets.
- Records will be kept of all prescribed medicines administered up to 3 months after the last dose. Thereafter it will be treated as confidential waste and disposed of/ shredded.
- **Non prescribed medicines are not allowed in school.**

10. Asthma Treatment and Inhalers

- Parents of asthma sufferers are permitted to bring their own treatments (inhalers etc) to school provided a parental agreement for school staff to administer medicine has been signed' form by the parents/carers. Forms are available from the school office. The form includes the prescribed dosage to be completed by parents. This is then later updated onto Medical Tracker.
- A list of asthma sufferers is kept in each of their retrospective classes, the medical room and on Medical Tracker.
- Asthma treatments for pupils (inhalers etc) are kept in classrooms and in the Medical Room and in a box with the child's name and class.
- Asthma treatments are to be administered by the pupil if old enough and competent enough. After a treatment has been administered, the first aider/class teacher if in the classroom- records the date and time.
- Asthma treatments are taken on Educational Visits and 'off site' sporting activities.
- Parents are responsible for checking that the treatments are still within their 'Use by dates' and for replenishing them.

11. Epipens and Anaphylaxis Shock Training

- A list and photograph of anaphylaxis sufferers are displayed in the school staff room and in the medical room

- EpiPens, for anaphylaxis sufferers, are kept out of reach in the individual's classroom and in the medical room
- EpiPens can only be administered by members of staff who have received epiPen training. All teaching and support staff including the office team are all trained annually in the use of EpiPens.
- Each anaphylaxis sufferer has an individual protocol to follow when receiving the treatment. The trained staff are aware of the procedure
- EpiPens and the appropriate trained member of staff are taken on Educational Visits and off site sporting activities
- Parents are responsible for checking that the treatments are still within their 'Use by dates' and for replenishing them and ensuring that the school has 2 epiPens on site

12. Administering First Aid Off Site

- First Aid provision must be available at all times including off site on school visits. The level of first aid provision for an off-site visit or activity will be based on risk assessment
- A trained first aider will accompany all off site visits and activities along with a suitably stocked First Aid box
- The First Aider must be aware of the contents of the First Aid box and its location at all times throughout the visit
- All adults present on the visit should be made aware of the arrangements for First Aid
- If any First Aid treatment is given the Group Leader will advise the school office, by mobile telephone if urgent, or on return so that the pupil's parents can be informed
- If a pupil is taking a prescribed medicine, a 'Parental Agreement' form will have been completed: see Administering Medicines In School section above
- A copy of the Parental Agreement form will be taken along with the relevant medication on the visit. The medication will be kept in the First Aid box, with a cool pack if necessary, and will be administered by the First Aider at the necessary time and recorded

13. Spillages and dealing with bodily fluids

Protective Clothing

Gloves:

- Disposable gloves are **only** required where hands are in contact with body fluids, or for other health and safety reasons. For example when using a caustic cleaning agent.
- Gloves should be single use, well-fitting and made of vinyl (latex and polythene disposable gloves with seams are unsuitable).
- Hands must be washed after removing gloves, as germ counts increase while gloves are worn.

Aprons:

- Disposable plastic aprons should be used for all activities that may result in clothing being soiled with bodily fluids such as excreta.
- The apron should be thrown away and hands washed before dealing with a different child or any other activity.

Visors/goggles

- A full face visor or goggles should be worn if there is a risk that body fluids may come into contact with the first aider's face.

Hands should be washed:

- Before putting on, and after removing, protective clothing.
- Before and after physical contact with individual children.
- After handling contaminated items such as soiled clothing & nappies.
- After using the toilet.
- After blowing your nose or covering a sneeze.

- Whenever hands become visibly soiled.
- Before eating, drinking or handling food.

Spills of Body Fluids:

- Splashes into eyes or mouth should be rinsed freely with clean cold water.
- Body fluid spillages should be cleaned using Hyper Clean Absorbent Powder.
- Disposable gloves and aprons should be worn when cleaning such spills.
- Skin that has been in contact with another person's bodily fluid should be washed with soap as soon as possible.

Spills on Hard Surfaces:

Large spills should be covered with disposable paper towels to soak up excess liquid. The towels should be treated as clinical waste and discarded in yellow bags. The remaining spillage should be treated as follows:

Hyper Clean Absorbent Powder

Spills On Carpets or Upholstery:

- Mop up excess fluid with paper towels. Sponge it with cold water, and then clean with hot water and liquid soap.

Spills On Clothing:

- Sponge off with warm soapy water, change clothes if necessary. Store clothes in a plastic bag until washed.

Reason for Assessment: First Aid Risk Assessment					
Assessment Date: September 2024					
Hazard	Person affected	Likely Consequence	Level of risk	Strategies	Likely / Frequency
Inadequate Emergency Response	Employees, Visitors, Contractors, Pupils	Further injury, death	Med	<ul style="list-style-type: none"> First aiders trained in how to seek help from emergency services Medical room positioned near to main office and the front of the school to ensure response times are good All injuries referred to a first aider On educational trips all members of staff have a phone in order to call emergency services 	Low
Inadequate provision of first aid	Employees, Pupils, Visitors, Contractors	Serious injury	Med	<ul style="list-style-type: none"> Early Years areas have paediatric first aiders Office team and Admin Assistant are first aid always trained and are accessible via two-way radios and phones on site. We have adequate numbers of teaching assistant first aiders across the school. The Area Business Support Manager is on site as a first aider to give first aid outside of the school day 	Low
Inadequate first aid treatment	Employees, Agency Staff Visitors, Contractors, Pupils	Serious injury	High	<ul style="list-style-type: none"> All first aiders included on the list for the school/nursery have successfully completed a qualification course paediatric first aid or Emergency First Aid at Work 1 day if considered sufficient and are certificated by a training provider who operates to the level required by a recognised provider Only first aiders administer first aid within the school site All first aid is logged onto Medical Tracker 	Low
Unaware of how to summon first aid provision or an ambulance	Employees, Agency Staff Visitors, Contractors, public, pupils	Serious injury	Med	<ul style="list-style-type: none"> All new staff are made aware of first aid arrangements through induction Adequate information is also provided to contractors and visitors-see handbook A list of first aiders is prominently displayed throughout the school building All first aiders know through training that: In the event of someone being injured, if it is considered serious and that an ambulance is required, you must ring for an ambulance using the procedure laid out below. Locate the nearest qualified first aider (either from hard copy lists on notice boards or by phoning the school office Give the location and symptoms if known to the first aider Keep the casualty warm, comfortable and above all as still as possible 	Low

				<ul style="list-style-type: none"> • On arrival, the first aider will take control and issue instructions accordingly. • Ambulance Procedure: • Dial 999 ask for ambulance service, give brief details of type of casualty and ask for the ambulance to attend main entrance. • Ensure reception/office staff are aware advising them that an ambulance has been called to an incident in the school. Arrange for someone to meet the ambulance at the main reception and escort the ambulance crew to the location of the incident. • Office team to print of child's details from Medical tracker and hand to paramedics upon arrival. 	
Insufficient first aid supplies	Employees, Agency Staff Visitors, Contractors, pupils, public	Serious injury	Med	<ul style="list-style-type: none"> • The welfare assistant/ office team is responsible for providing first aiders with an appropriately stocked kit to enable them to undertake their roles • First aid kits are provided in all classrooms, the hall, office and in the medical room • If a member of staff notices that a first aid kit is not full/ adequate they must inform the welfare assistant/ office team • First aid kits are to be stocked with the contents of a protection kit as standard e.g. gloves & apron, to reduce the risk of transfer of contaminated bodily fluids 	Low
Trips, falls & Bumps to the head	Employees, Agency Staff Visitors, Contractors, pupils, public	Serious injury	High	<ul style="list-style-type: none"> • All injured children/ staff members of the public to see a First Aider • Children to receive First Aid treatment & Cold Compress as required • ALL children to receive a 'Bump to the Head' notification sent to the primary guardian via medical tracker involving the head & face and a wrist band • ALL children with severe head injury to receive a phone call home and this to be updated and followed by a notification in form of email sent to the primary guardian • Incidents to be recorded onto Medical Tracker by first aider. • Serious Incidents e.g. broken bones, stitches to be recorded onto medical tracker. The ABSM/ Principal or Premises Manager MUST be notified so that they can make an informed decision with the Trust complete the RIDDOR process if required. • If in doubt, check injuries with ABSM/ Principal or Deputy Principal in her absence of the welfare assistant • Parents/Carers to inform school of any medical conditions • Parents/Carers to inform school of up-to-date emergency contact details. • Injured children are not to be left unsupervised 	Low

Assessment completed by Palak Elavia (Area Business Support Manager)

Signature Palak Elavia

Date: September 2024

14. Monitoring arrangements

This policy will be reviewed by the Principal, Health and Safety Lead, ABSM and the Senior Leadership Team every year

At every review, the policy will be approved by the Senior Leadership Team,