



To inspire, enrich and nurture so each individual reaches their full potential

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Policy and Guidelines for Administering First Aid in School

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Next Review: June 2027

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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 trustees 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 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

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 and available at all times when children are present and must accompany children on outings.

3.1 Appointed person(s) and first aiders

The school's trained first aiders are Lorraine Hake and Victoria Hobson. They are responsible for:

- Taking charge when someone is injured or becomes ill;
- 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 trained first aid personnel are listed in appendix one. Their names will also be displayed prominently around the school.

3.2 The Trust Board

The Trust Board 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.

3.3 The Principal

The Principal 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 qualified 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 Principal or their line manager of any specific health conditions or first aid needs;
- Ensuring there is an adequate supply of medical materials in first aid kits, and replenishing the contents of these kits.

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 Principal or Office Manager, or a member of the SLT if one of the above unavailable will contact parents immediately;
- The relevant member of staff 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 school mobile phone;
- A portable first aid kit including, at minimum:
 - A leaflet giving general advice of first aid;
 - 6 individually wrapped sterile adhesive dressings;
 - 1 large sterile un-medicated dressing;
 - 2 triangular bandages – individually wrapped and preferably sterile;
 - Bottle of water;

- 2 pairs of disposable gloves;
 - Eye pads;
 - Gloves;
 - Face shields.
- Information about the specific medical needs of pupils;
 - Parents' contact details, available on Arbor, via school mobile.

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 un-medicated ambulance dressings (not less than 15cm x 20 cm);
- 2 sterile eye pads, with attachments;
- 1 pair of rustproof blunt-ended scissors.

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

There will always be at least 1 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:

- A leaflet giving general advice on first aid;
- Gauze;
- 20 individually wrapped sterile adhesive dressings (assorted sizes);
- 6 medium-sized individually wrapped sterile un-medicated wound dressings;
- 2 large sterile individually wrapped un-medicated wound dressings;
- 3 pairs of disposable gloves;
- Face shields.

No medication is kept in first aid kits.

First aid kits are stored in:

- Every classroom;
- The school kitchen (*responsibility for stocking is held with Dolce*);
- Medical supplies are also stored in the medical room.

6. Record-keeping and reporting

6.1 First Aid and Accident Record Book

- An accident/illness/incident report will be completed by the relevant member of staff on the same day or as soon as possible after an incident resulting in an injury. The child will be provided the white copy to take home and the yellow copy will remain in the report book (completed report books are stored in the medical room);
- For more significant injuries, as much detail as possible should be supplied when reporting an accident, including all of the information included in the accident form at appendix two;

- Records held in the first aid and accident book will be retained by the school for a minimum of 3 years, in accordance with regulation 25 of the Social Security (Claims and Payments) Regulations 1979, and then securely disposed of.

6.2 Reporting to the HSE

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

The Principal 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.

Information on how to make a RIDDOR report is available here: [How to make a RIDDOR report, HSE](#)

6.2.2 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 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). In this case, the Principal 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:
 - 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.

6.2.3 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 where 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).

6.3 Notifying parents

The Office Manager or Administration Assistant 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. Parents will also be informed if emergency services are called.

6.4 Reporting to Ofsted and child protection agencies

The Principal 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 Principal will also notify Hertfordshire Child Protection Team 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 three).

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.

8. Monitoring arrangements

This policy will be reviewed by the Principal annually. At every review, the policy will be shared with the Full Trust Board.

9. Links with other policies

This first aid policy is linked to the:

- Asthma Policy;
- Health and Safety Policy;
- Supporting Pupils with Medical Conditions.

Appendix One: list of trained first aiders

Staff Member's Name	Role
Lorraine Hake	Office Manager
Victoria Hobson	Principal

Ref no:

Accident Book and investigation Record

The purpose of this form is to record all adverse events. The term **accident** is used where injury or ill health occurs. The term **incident** includes **near misses** and **undesired circumstances**, where there is the potential for injury.

Part 1 Overview

Reported by:			Date/time of adverse event	
Incident	Ill health	Minor injury	Serious injury	Major injury
Brief details (What, where, when, who and emergency measures taken)				

Part 2 Initial assessment

to be carried out by the person responsible for health and safety

Type of event

Actual/potential for harm

Injury		Fatal or major	
Ill health		Serious	
Near-miss		Minor	
Undesired circumstance		Damage only	

RIDDOR reportable?	Y/N	Date/time reported
Entry in accident book?	Y/N	Date entered/reference:

Investigation level

High level		Low level	
Medium level		Basic	

Part 3 Investigation information gathering

1 Where and when did the adverse event happen?

2 Who was injured/suffered ill health or was otherwise involved with the adverse event?

3 How did the adverse event happen? (Note any equipment involved)

4 What activities were being carried out at the time?

5 Was there anything unusual or different about the working conditions?

6 Were there adequate safe working procedures and were they followed?

7 What injuries or ill health effects, if any, were caused?

8 If there was an injury, how did it occur and what caused it?

9 Was the risk known? If so, why wasn't it controlled? If not, why not?

10 Did the organisation and arrangement of the work influence the adverse event?

11 Was maintenance and cleaning sufficient? If not, explain why not.

12 Were the people involved competent and suitable?

13 Did the workplace layout influence the adverse event?

14 Did the nature or shape of the materials influence the adverse event?

15 Did difficulties using the plant and equipment influence the adverse event?

16 Was the safety equipment sufficient?

17 Did other conditions influence the adverse event?

Analysis and further action

18 What were the immediate, underlying and root causes?

19 What risk control measures are needed / recommended?

20 Do similar risk exist elsewhere? If so, what and where?

21 Have similar adverse events happened before? Give details.

Part 4 The risk control action plan

22 Which risk control measures should be implemented in the long and short term?		
Control measures	Completion date	Person responsible
23 Which risk assessments and safe working practices need to be reviewed and updated?		
Name of risk assessment Safe working procedure	Completion date	Person responsible

24 Have the details of the adverse event and investigation findings been recorded and analysed? Are there any trends or common causes which suggest the need for further investigation? What did the adverse event cost?
--

25 Signed on behalf of the investigation team

Name	Signature

26 Members of the investigation team	
Name	Position

27 The findings of this investigation need to be communicated to the following managers, union and employee safety representatives
--

Position	Signature	Date

Appendix Three: First Aiders Poster

First Aiders at Work



Lorraine Hake
(exp. 14/5/27)



Victoria Hobson
(exp. 27/3/28)

Paediatric First Aiders (working in EYFS)



Elena Badelita
(exp. 3/6/27)



Fahmin Razaq
(exp. 3/6/27)



Millie Irish
(exp. 3/6/27)



Molly Curtis
(exp. 1/6/28)



Nikoletta Sari
(exp. 3/6/27)



Thea Atkin
(exp. 1/6/29)

Paediatric First Aiders (working at HCFS)



Adam Nicholls
(exp. 1/6/29)



Amalak Francis
(exp. 3/6/27)



Anam Khan
(exp. 1/6/28)



Anna Merrill
(exp. 3/6/27)



Ashley Holmes
(exp. 3/6/27)



Belle Kalyan
(exp. 1/6/29)



Beth Campbell
(exp. 3/6/27)



Eithne McLoughlin
(exp. 1/6/29)



Ellen Summers
(exp. 3/6/27)



Emma Good
(exp. 1/6/29)



Galina Doychinova
(exp. 1/6/29)



Heather Canty
(exp. 3/6/27)



Janthima Ephgrave
(exp. 3/6/27)



Jessica Banks
(exp. 3/6/27)



Joanna Musialik
(exp. 3/6/27)



Jo Pape
(exp. 1/6/29)



Jonathan Durbin
(exp. 3/6/27)



Kieran Flynn
(exp. 1/6/29)



Lauren Taylor
(exp. 1/6/28)



Lynne Ewen
(exp. 1/6/29)



Maisie Samuel
(exp. 3/6/27)



Maliha Syeda
(exp. 1/6/29)



Martha Surry
(exp. 3/6/27)



Meg Wallace
(exp. 3/6/27)



Megan Shepherd
(exp. 1/6/29)



Melanie Hunter
(exp. 1/6/28)



Melissa Brightman
(exp. 3/6/27)



Michelle Morris
(exp. 1/6/29)



Monika Dudek
(exp. 1/6/29)



Rebecca Delaney
(exp. 1/6/29)



Ruya Gorur
(exp. 1/6/28)



Sam Merton
(exp. 1/6/28)



Samira Riaz
(exp. 1/6/29)



Sarah Davies
(exp. 1/6/29)



Sarah Dobson
(exp. 3/6/27)



Shula Venn
(exp. 3/6/27)



Vitoria Vieira
(exp. 1/6/29)



Wiska Perera
(exp. 1/6/29)



Yasmin Cumberbatch
(exp. 1/6/29)



Yasdenis Sola
(exp. 3/6/27)



Zobia Ghazzali
(exp. 3/6/27)



Zubaida Kauser
(exp. 3/6/27)