



**The Island
Learning Trust**

Sunny Bank Primary School

'To be the best we can be'.

The best learner, the best friend, the best citizen.

First Aid Policy



Written by: E Johnson

Date written: January 2025



Date of next review: January 2026 or following any updates to national and local guidance and procedures.

This policy must be read in conjunction with the TILT Policy: Supporting Pupils with medical conditions policy (statutory)




First Aid Policy Statement

Rationale

Children and adults in our care need good quality first aid provision. Clear and agreed systems should ensure that all children are given the same care and understanding in our school.






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: Guidelines

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](#)
-  [health and safety in schools](#), guidance from the Health and Safety Executive (HSE) on [incident reporting in schools](#),
-  [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










New staff to the school are made aware of this policy when they are appointed.

3: Roles and Responsibilities

All TA's undertake a rolling programme of Paediatric First Aid training, this designated training has also been undertaken by a number of EYFS TAs, subsequently we always have at least 1 member of staff with a current First Aid certificate available to our EYFS setting and the wider school. At lunchtime MSMS are available on all playgrounds and the school medical room is also supervised by a trained First Aider during lunchtime.

3.1 Appointed person(s) and first aiders

The school's appointed persons 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 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
 -  Ensuring parents are contacted following any incident when further medical attention may be required. Parents will be contacted in the event of all head injuries.
 -  Filling in an accident report on the same day if they witness an accident, or as soon as is reasonably practicable, after an incident
 -  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 governing board








The governing board has ultimate responsibility for health and safety matters in the school, but delegates operational matters and day-to-day tasks to the Head of School and staff members.

3.3 The Head of School

The Head of School are 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 Head of School or their Year Leaders 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 office staff will contact parents immediately


 The attending first aider or staff member, who attended the incident 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 1 person who has a current paediatric first aid (PFA) certificate on the premises at all times. See Appendix 1 for full list of first aiders)


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:


- 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


 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 x 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 person leading the trip and agreed by the Head of School prior to any educational visit that necessitates taking pupils off school



premises. Educational trips or visits undertaken by EYFS provision will always have at 1 first aider in attendance.

5 Specific guidance

Cuts

All open cuts should be covered after they have been treated with a wipe that is alcohol free. Children should always be asked if they can wear plasters **BEFORE** one is applied. For children, who are allergic to plasters, parents must provide an appropriate alternative.

Minor cuts should be recorded in the accident file and parents informed.

ANYONE TREATING AN OPEN CUT WHICH IS BLEEDING PROFUSELY SHOULD WEAR GLOVES. All blood waste should be placed in a bag and disposed of in the bins located in the medical room and the disabled toilet in the bottom building.

Head injuries/ Bumped Head

Any bump to the head, no matter how minor should be treated as potentially serious. All bumped Head should be treated with an ice pack and the child should be given an advisory "Bumped Head" letter to take home. The child's teacher should be informed and must keep a close eye on the progress of the child. **ALL** bumped head incidents should be recorded in the accident book. Staff must inform parents if a child has had a bumped head immediately. Any pupil awaiting collection by a parent/guardian must be supervised.

Administering medicine in school

At the beginning of the academic year, class profiles will highlight children with medical conditions. These profiles are available on Teams and class staff are expected to read these when receiving a new class and keep up to date with any changes throughout the year. Medical conditions are also listed by office staff on Arbor. Children with significant Medical conditions have to have a care plan provided by the SENDCo or Leadership Team or school nurse, signed by parents/ guardians. These need to be checked and reviewed regularly. Care plans will be shared with relevant staff and copies of these will be stored in the care plan folder stored in the office. Medications kept in the school for children with medical needs, are stored in the office in secure containers and the refrigerator where necessary. Each child's medication is in a clearly labelled container. Parents must complete a 'Record of Medicine administered to an individual child' form at the school office. This form clearly states dosage and frequency of medicine to be administered and provides parental consent. Once medicine has been administered by staff, the time administered and the dosage given will be recorded and signed.



Controlled drugs e.g. ADHD medication must be stored in the designated locked First Aid box in the school office. A running record of the use of this drug must be kept with the staff member administering recording how many tablets are present prior and after administration.

Asthma

Children with Asthma do not require a care plan (in most cases) however an Asthma Form is completed by parents, a copy of which is kept in the pupil file in the main office and listed on class profiles. A copy of this is then sent to the pupil's classroom, with their named asthma pump in a zipped wallet. In order for children's Asthma pumps to be kept in school, it is the parents/carers responsibility to provide the school with up-to date Asthma Pumps for their children. Adults in the classroom are to check the expiry date on the pumps regularly and inform parents, should the pumps expire or run out. Asthma pumps should be readily available to the person, who it has been prescribed for, and clearly labelled with the child's name. Asthma sufferers should not share inhalers.

In case of an emergency an adult needs to be sent to get the asthma pump while a First Aider remains with the child. Once the pump has been administered, (older children can administer it for themselves under supervision). Asthma pumps must always be taken on Educational trips and visits and available throughout PE lessons.

The school has universal pumps stored in the main office which may be administered to pupil in an emergency.

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 'Parental consent form for administering medicine' form. Parents can obtain the form from the office on the first day of requesting the medicine to be administered at school. Parents/guardians must hand any medication directly into the school office not to class teachers. Nor should any medication be sent into school via a child.

Medication may be administered in school if it is required to be taken 3 times a day however the office staff will only administer once during the day. Classroom 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 in it's original box/bottle/packet. Medications will be stored securely in the school office and any that need to be kept in the fridge will be stored in this manner.

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. This letter is available from the office. If we have concerns over continual headlice, this may require a referral to the School Nursing System and be recorded on My Concern.

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. We will then let parents know. If the chicken pox is scabbed over it is no longer infectious.

6. First aid equipment

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

-  Individually wrapped sterile adhesive dressings (assorted sizes)
-  Sterile eye pads
-  Individually wrapped triangular bandages (preferably sterile)
-  Safety pins
-  Medium-sized individually wrapped sterile unmedicated wound dressings
-  Large sterile individually wrapped unmedicated wound dressings
-  pairs of disposable gloves
-  No medication is kept in first aid kits.


First aid kits are stored in the:


-  School office
-  Medical room
-  The school kitchen
-  Each year group
-  At lunchtime MDMS take first aid kits onto both playgrounds.
-  An emergency first aid kit is available for use during out of school visits. It is the responsibility of year leaders to ensure that they take a First Aid kit on any school visits.

7. Record-keeping and reporting


7.1 First aid and accident/injury recording





 If a pupil requires medical treatment from a health care provider e.g. minor injuries clinic, GP or medical treatment is advised, an accident report will be completed on iAM Compliant by the Head of School on the same day or as soon as possible after the incident. The first aider or attending staff member will complete an accident form to support this process.

 As much detail as possible should be supplied when reporting an accident including:

- Person injured name, address and DOB
- Accident details - date, where it happened and what happened
- Accident/Incident type
- Witness name and address
- Injury detail
- What action taken to prevent re-occurrence
- Follow-up investigation if required
- Whether RIDDOR completed
- Manager details

 Lunchtime incidents which do not require the completion of an accident form/i AM Compliant log will be recorded either in the accident book kept in the medical room or individual accident books kept by MDMS.

 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.

 Staff injuries or accidents which occur at school must be recorded on i AM Compliant.

7.2 Reporting to the HSE

The Head of School 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 Head of School or an individual designated on their behalf 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 scalding 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 Head of School 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)

<http://www.hse.gov.uk/riddor/report.htm>

7.3 Notifying parents

The class teacher or designated office 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. Parents will also be informed if emergency services are called.

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

The Head of School 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 Head of School will also notify relevant local child protection agencies of any serious accident or injury to, or the death of, a pupil while in the school's care.

7.4 Calling the emergency services

In the event of a medical emergency, an ambulance and parents will be contacted: The adult calling the emergency services must be with the child/adult to ensure all relevant information can be shared.

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

1. Your telephone number: 01795 473891
2. Give your location as follows: Sunny Bank Primary School, Sunny Bank, Murston, Sittingbourne, Kent.
3. State that the postcode is: ME10 3QN
4. Give exact location in the setting: Sunny Bank's Primary School's Main Office is located in Sunny Bank road. Drive through to the right gate and press intercom button located to the right of the road.(There is only one entrance to the school by road).
5. Give your name:
6. Give name of child and a brief description of child's symptoms:



It is important to:

Speak clearly and slowly and be ready to repeat information if asked

All contact numbers for children and staff are available from the school office.

8. Training

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.

The school will arrange for first aiders to retrain before their first aid certificates expire.

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.

All staff are expected to read and sign our First Aid Protocol which is issued annually.

9. Monitoring arrangements

This policy will be reviewed by the Head of School every year.

At every review, the policy will be approved by the Local Governing Body.

10. Links with other policies

This first aid policy is linked to the



Health and safety policy






Risk Assessment policy



Supporting pupils with medical conditions policy









Appendix 1 - List of trained first aiders

Name	Role	Location	Qualification
Christina Jenner	Teacher	EYFS	 Paediatric First Aid Training
Siobhan Miles	TA	EYFS	 Paediatric First Aid Training  Emergency First Aid at Work for Schools



Heather Tingey	TA	EYFS	 Paediatric First Aid Training
Olivia Kemp	TA	EYFS	 Paediatric First Aid Training
Carole Conium	TA	EYFS	 Paediatric First Aid Training
Rose Vine	TA	EYFS	 Paediatric First Aid Training
Georgina Curtis	TA	EYFS	 Paediatric First Aid Training



Leanne Strevens	TA Breakfast club After school club	Year 2	 Paediatric First Aid Training
Maria Lougheed	TA	Year 4	 Paediatric First Aid Training
Alison Cole	TA	Whole School	 Paediatric First Aid Training
Faye Gotham	TA	Year 4	 Paediatric First Aid Training
Jacqueline Goatham	TA	Whole school	 Emergency First Aid at Work for Schools
Beatta Conka	EAL TA Breakfast Club After School Club	Whole school	 Emergency First Aid at Work for Schools  Work place first Aid
Paula O'Reilly	HLTA	Year 2	 Emergency First Aid at Work for Schools
Caroline Wood	HLTA	Year 1	 Paediatric First Aid Training

