

# St Paul's Catholic Primary School



## FIRST AID POLICY

(Adopted from The Key)

### Our Mission Statement

*"Do everything with love"*

*(St Paul's first letter to the Corinthians 16:14)*

#### **This means that we will....**

- Show our love for Jesus in everything we say and do
- Respect everyone by recognising that God made us all different but equally valued.
- Strive for excellence and find ways to share, develop and celebrate our talents.
- Promote a safe, happy and enjoyable environment.
- Actively support our school, parish and the wider community.

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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 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 School Premises \(England\) Regulations 2012](#), which require that suitable space is provided to cater for the medical and therapy needs of pupils

## 3. Roles and responsibilities

### 3.1 Appointed person(s) and first aiders

The school's 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 children 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)

Our school has all staff first aid trained with specific member of staff Paediatric trained and emergency first aid trained (staff)

### **3.2 The governing board**

St Paul's Board of Governors have ultimate responsibility for health and safety matters in the school, but delegates responsibility for the strategic management of such matters to the school's governing board.

The governing board delegates operational matters and day-to-day tasks to the Headteacher and staff members.

### **3.4 The Headteacher**

The Headteacher 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
- Completing accident reports (see appendix 2) for all incidents they attend to
- Informing the Headteacher of any specific health conditions or first aid needs

## **4. First aid procedures**

### **4.1 In-school procedures**

**See School Specific Accident reporting procedures Appendix 2.**

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 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 child 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 Headteacher or a member of the Senior Leadership Team will contact parents immediately
- The First Aider will complete an accident book immediately and if necessary an HS1 form will be completed, passed to the Headteacher who will complete the form and pass to Portsmouth City Council Health and Safety Department.

There will be at least 1 person who has a current paediatric first aid (PFA) certificate on the premises at all times.

#### **4.2 Off-site procedures**

When taking children off the school premises, staff will ensure they always have the following:

- A school mobile phone
- A portable first aid kit
  - A leaflet giving general advice on first aid
  - 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 children
- 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 class teacher 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 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 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

No medication is kept in first aid kits.

First aid kits are stored in:

- The medical room
- School vehicles

## 5.1 Defibrillator

An Automated External Defibrillator (AED) is a machine used to give an electric shock when a person is in cardiac arrest, i.e. when the heart stops beating normally. Cardiac arrest can affect people of any age and without warning. If this happens, swift action in the form of early cardiopulmonary resuscitation (CPR) and prompt defibrillation can help save a person's life.

The Defibrillator is located in the main office and the decision to use it should be made by qualified members of staff only. The use of the defibrillator does not remove the need to call for emergency medical support.

After use, the trained member of staff who used the defibrillator should report its use to the Facilities Manager to ensure that the machine is checked and deemed ready for further use. Any equipment used from the medical pack must be replaced immediately.

## 6. Record-keeping and reporting

### 6.1 First aid and accident record book

- The Accident, illness and incident reporting pad will be completed by the first aider 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 3
- For all bumped head injuries, the parents will always be informed of the accident by text message.
- 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

A record will be kept 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).

A report will be sent to the Health and Safety Executive as soon as is reasonably practicable and in any event within 10 days of the incident.

#### 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 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 Facilities Manager 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 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)

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>

**6.3 Notifying parents**

The parent will be informed of any accident or injury sustained by a child, and any first aid treatment given, on the same day by a member of St Paul's staff. Parents/carers will also be informed if emergency services are called.

**6.4 Reporting to Ofsted and child protection agencies**

The Headteacher will notify Ofsted of any serious accident, illness or injury to, or death of, a child 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 Portsmouth City Council of any serious accident or injury to, or the death of, a pupil while in the school's care.

## **7. 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.

All members of staff complete a basic first aid course every 3 years. Designated members of staff are paediatric trained and adult at work trained.

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. Monitoring arrangements**

This policy will be reviewed every year and approved by the Headteacher.

## **9. Links with other policies**

This first aid policy is linked to the

- Health and safety policy
- Risk assessment policy
- Policy on supporting children with medical conditions

## Appendix 1

### ST PAUL'S CATHOLIC PRIMARY SCHOOL



#### Accident Reporting Procedures

- If a child is hurt during break or lunch time they will be assisted by the first aider on duty on the playground, if further first aid is required the child will be accompanied to the first aid room.
- First aid room is now manned by a qualified first aider during morning break times.
- The Accident, illness and incident reporting pad will be completed with all relevant details, white copy for child to take home, yellow copy to be given to school office for filing
- Any child with a bumped head will be given a red paper wristband at the time of the incident (whether at break time or in class) this is to identify them to staff as needing to be monitored for the remainder of the day.
- An accident form will be completed and taken immediately to the school office.
- A member of the office team will text parents to advise of injury.
- A member of the child's class team must collect the white copy of the accident form from the school office to hand to the parent at the end of the school day or to give to the child to take home.
- For any child that has an accident that results in additional professional medical care, please complete an HS1 form and return it to Headteacher.
- For any adult that has an accident, please complete an HS1 form or HS3 for Violent reporting form.

Below is some handy info on head injuries if in doubt or concerned please escalate to SLT and advise admin if a parent needs to be contacted again.

**For the following symptoms, call for an ambulance:**

- cannot be wakened, unconscious
- difficulty staying awake
- extremely confused state
- problems in speaking, walking or balance
- numbness or weakness in part of their body
- vision problems with nausea or dizziness
- clear fluid coming from ears or nose
- bleeding from ears or bruising from behind the ears
- a black eye that wasn't the result of a blow to that area
- a seizure or convulsion
- neck pain.

**For the following symptoms, visit your nearest A&E department:**

- woken up after being knocked out
- has memory problems
- a headache that doesn't go away
- been vomiting since the injury
- significant changes in behaviour.

**For the following symptoms, seek medical advice by phoning 111:**

- headache
- feeling sick
- slight dizziness
- difficulty in concentrating
- double vision.

