

GREAT CHESTERFORD C. OF E. PRIMARY ACADEMY



Two are better off than one, because together they can work more effectively.

Ecclesiastes 4:9

First Aid Policy 2025

Contents

1. Aims	
2. Legislation and guidance	
3. Roles and responsibilities	
4. First aid procedures	
5. First aid equipment	
6. Record-keeping and reporting.....	
7. Training.....	
8. Monitoring arrangements	
9. Links with other policies	
Appendix 1: accident report form	

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](#), 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

As a school with Early Years Foundation Stage, at least one person, who has a current paediatric First Aid Certificate, will be on premises at all times any pupils from EYFS are present, and must accompany children on outings.

3.1 Appointed persons and first aiders

A senior member of staff will be responsible for:

- Taking charge when someone is injured or becomes ill
- Sending pupils home to recover, where necessary
- 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
- Filling in an accident report on the same day, or as soon as is reasonably practicable, after an incident (see the template in appendix 1)

Our school's first aiders are displayed prominently in the school office, staffroom and kitchen.

The admin staff are responsible for:

- Ensuring there is an adequate supply of medical materials in first aid kits, and replenishing the contents of these kits every term

All users have a responsibility to replenish items as necessary.

3.2 The Governing Body

The Governing Body has ultimate responsibility for health and safety matters in the school, but delegates 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 and 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 the First Aid log or an accident report (see appendix 1) for all incidents they attend to

- Informing the Headteacher 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 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 injured person (or their parents/carers, in the case of pupils) has not provided their consent to the school to receive first aid, the first aider will act in accordance with the alternative arrangements (for example, contacting a medical professional to deliver the treatment)
- If a senior member of staff judges that a pupil is too unwell to remain in school, parents will be contacted and asked to collect their child. Upon the parents' arrival, next steps will be recommended
- If emergency services are called, the school office or a member of the leadership team will contact parents immediately
- A member of staff would always accompany a child to hospital if their parent was not present
- 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 certificate on the premises whenever an Early Years pupil is in attendance.

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, at minimum:
 - 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 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 visit leader prior to any educational visit that necessitates taking pupils off school premises.

There will always be at least one trained first aider on school trips and visits. 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.

4.3 Head Injuries

A minor head injury can be a frequent occurrence in a school. Fortunately, the majority of head injuries are mild and do not lead to complications or require hospital admission. However, a small number of children may suffer from a severe injury to the brain and concussion. Complications such as swelling, bruising or bleeding can happen inside the skull or inside the brain up to 24 hours after the bump to the head. The presence or absence of a lump at the site of the bump is not an indication of the severity of the head injury, however if you feel the bump or impact to the head isn't classed as a concern then the following procedures apply.

Minor bump to head

A minor bump to the head is common in children, particularly those of infant school age. If a child is asymptomatic: no bruising, swelling, abrasion, mark of any kind, dizziness, headache, nausea or vomiting. The child appears well, then the incident will be treated as a "bump" rather than a "head injury"

Actions to be taken:

- Child to be assessed by a First Aider
- Apply cold compress
- Complete bumped head slip with details of incident and record in first aid log
- Report to teacher/adult in class
- Parent MUST be spoken to at the end of the day, bumped head slip given to them
- If a child is being collected by another party, the collector must also be told.

Minor head injury – no loss of consciousness

A minor head injury often causes bumps, swellings or bruises on the exterior of the head. Other symptoms could include nausea, mild headache, tender bruising or mild swelling of the scalp, mild dizziness.

Actions to be taken:

- Child to be assessed by a First Aider
- Apply cold compress
- Complete bumped head slip with details of incident and record in first aid log
- Report to teacher/adult in class
- Parent informed by phone call straight away for collection and observation at home
- Bumped head slip to be handed over on collection.
- If there is a delay in the child being collected, close observation of the child is required and no PE/physical activity

Severe head injury – loss of consciousness

A severe head injury will usually be indicated by one or more of the following symptoms: unconsciousness briefly or longer, difficulty in staying awake, seizure, slurred speech, visual problems, difficulty in understanding what people are saying, balance problem, loss of power in arms/legs/feet, pins and needles, amnesia, leakage of blood or clear fluid from nose or ears, or blood, bruising around eyes/behind ears

Action to be taken:

- If there is a neck injury and child is unconscious DO NOT move child
- Call 999 and ask for Ambulance
- Contact parent immediately
- Inform headteacher (or deputy in their absence)
- Two First Aiders to be with child at all times
- Complete accident form

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
- Wrapped sterile adhesive dressings
- Unmedicated wound dressings
- Scissors
- Burns dressings

No medication is kept in first aid kits.

First aid kits are stored in:

- School Office
- Every classroom
- The school kitchen
- The school field
- The STEM Hub

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 that requires medical assistance or sending home
- As much detail as possible should be supplied when reporting an accident that requires further treatment, including all of the information included in the accident form at appendix 1
- A copy of the accident report form will also be added to the pupil's educational record by the admin team.
- All minor first aid will be recorded in the First Aid Log. Classrooms have logs. These should be returned to the office each week.
- Records held in the First Aid Log will be retained for date of incident +12years
- Records held in the accident book for children will be retained by the school until DOB + 25 years, in accordance with regulation 25 of the Social Security (Claims and Payments) Regulations 1979, and then securely disposed if the record has not passed to the next school as part of their pupil folder.
- Records held in the accident book for adults will be retained by the school for date of incident + 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 Headteacher 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 Headteacher / MAT Premises Manager 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 - 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.

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) 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 headteacher / MAT Premises 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 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 class teacher / school office 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. For major incidents a senior member of staff would do this. Parents will always be informed if the emergency services are called.

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.

Staff are encouraged to renew their first aid training when it is no longer valid. The school will arrange for first aiders to retrain before their first aid certificates expire where possible. 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 and is updated at least every 3 years. The EYFS Lead and principal EYFS teaching assistant(s) will have this training.

8. Monitoring arrangements

This policy will be reviewed by the Headteacher annually, or before if required. At every review, the policy will be approved by the Governing Body / Teaching and Learning Committee.

9. Links with other policies

This first aid policy is linked to the:

- Health and Safety Policy
- Educational Visits Policy
- Supporting Pupils with Medical Conditions Policy
- Staff induction
- Safeguarding

Signed: <i>Amy Sargeant</i> Headteacher	Date: October 2025
Signed: <i>Wazir Mughal</i> On behalf of the Governing Body	Date: October 2025
Next Review Date:	September 2026



Appendix 1: Accident report form

Name of injured person		Role/class	
Date and time of incident		Location of incident	
Incident details			
<i>Describe in detail what happened, how it happened and what injuries the person incurred</i>			
Action taken			
<i>Describe the steps taken in response to the incident, including any first aid treatment, and what happened to the injured person immediately afterwards.</i>			
Follow-up action required			
<i>Outline what steps the school will take to check on the injured person, and what it will do to reduce the risk of the incident happening again</i>			
Name of person attending the incident			
Signature		Date	

