

First Aid Policy

Beaconside Primary and Nursery School



Approved by:	Lorraine Hadley (Headteacher)	Date:	15/09/2025
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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](#), 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 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 appointed person is Ellen Nolan. They 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 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

Our school's appointed persons and first aiders are listed in appendix 1. Their names are also displayed prominently around the school.

3.2 The local authority and governing board

Worcestershire County Council has 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.

3.3 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, 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
- 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 for all incidents they attend to where a first aider is not called
- Informing the headteacher 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 will complete an accident report form using Medical Tracker. This will send an email alert to the parents.
- Head injuries - Parents are to be informed in every case via an email and if deemed necessary, a phone call. The child will wear a head bump sticker to alert all adults and parents of a head bump and details are recorded on Medical Tracker. The class teacher should always be informed.
- Accidents at lunchtime - The lunchtime assistants carry antiseptic wipes, and plasters in their pouches and deal with minor accidents on site. More serious cases are brought to the medical room.
- 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, a member of office staff or SLT will contact parents immediately

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

If hospital treatment is necessary:

- There must be no delay to treatment or despatch of the injured pupil to hospital while waiting for parents or guardians to arrive.
- A member of the school staff (teaching or support staff) must accompany the pupil to hospital if their parents have not arrived in time to do so, unless (exceptionally) the ambulance crew specifically request otherwise.
- The member of staff accompanying the pupil should normally wait at the hospital until the pupil's parent or guardian arrives, unless the nursing staff advise them not to do so.
- Staff accompanying a pupil to hospital should not normally give their consent to medical treatment unless it is specifically requested by a doctor, who should be asked to assume the responsibility for this decision.
- In an emergency situation, however, consent should be given on the advice of a senior hospital doctor, provided that reasonable steps have been made to contact the parent or guardian, even if it is known that their consent might not have been given.
- Staff accompanying pupils to hospital from an educational visit should hold the written consent of parents to emergency treatment on the parental consent form, which should be shown to the doctor on arrival.
- The first aider/relevant member of staff will complete an accident report on the same day or as soon as is reasonably practical after an incident resulting in an injury. This will be done on Medical Tracker.
- The appointed person (Ellen Nolan) should complete the appropriate accident report via the LA on-line reporting as soon as possible if required

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
- Parents' contact details

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 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 Administration of Medicines

A record must be kept of all drugs to be administered at school. A written request must be made on behalf of the child by someone having parental responsibility. All medicines must be prescribed by a registered medical practitioner and medicines from any other source must not be given. Medicines should be stored in a safe place when not in use. Schools should ensure that medicines held on the pupil's behalf are 'in date' and if medicines become out of date, parents should be notified and the medicine returned to them.

4.4 Asthma Inhalers and EpiPens

Where a child has long term or complex needs all teaching and non-teaching staff will be informed. Where necessary staff will be trained by the school nurse to administer medication (e.g. how to use an EpiPen to deal with anaphylactic shock).

Asthma can be a life threatening disease and attacks can start very rapidly. It is therefore vital that the asthmatic pupils have instant access to their inhalers. It is entirely reasonable to allow pupils to keep their inhalers on their person, in their classroom, or their school bag. Records are kept around the school of pupils diagnosed with the condition and the location of their inhaler. Up to date treatment plans are available in the medical room and all use of inhalers is recorded.

Children who have EpiPens for severe allergies should have two in school, clearly labelled with their names. One should be kept in their classroom, the other to be kept in the medical room. It is parent's responsibility to ensure all medicines kept in school are in date. In an emergency the emergency services must be contacted immediately before informing parents.

5. First aid equipment

5.1 First Aid Boxes

First aid boxes are marked with a white cross on a green background. There is also a similar sign in a visible position, close to the first aid box so that it can be easily located. These are kept in the medical room. There are additional boxes in the EYFS area, the mobile classroom, EYFS, KS1 central areas, Oasis Room and the kitchen.

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

- 1 guidance leaflet giving general first aid advice;
- disposable gloves#;
- 10 individually wrapped medical wipes;
- 20 individually wrapped sterile adhesive dressings (plasters)* - assorted sizes;
- 2 sterile eyepads;
- 4 triangular bandages;
- 6 medium size (approx. 12cm x 12cm) wrapped, sterile unmedicated dressings;
- 2 large size (approx. 18cm x 18cm) wrapped, sterile unmedicated dressings;
- 6 safety pins.

No medication is kept in first aid kits.

5.2 Disposable Gloves

At least one unused pair must be available at all times. Powder free vinyl gloves are used. Disposable gloves must be worn by all staff having to deal with bleeding or spillages of body fluids, no matter how small. Hands should be washed **before** taking the gloves off. Gloves, paper towels and contaminated dressings or other materials should be sealed in a plastic bag and disposed of in the normal school waste. Hands should be washed again afterwards.

5.3 Sticking Plasters

There is **no** prohibition on the use of sticking plasters, but it is recommended that at least some of those kept should be of the hypoallergenic type as some children show an allergic reaction to normal types.

Waterproof plasters may not "breathe" as well as fabric types, but the latter may be more likely to trap dirt, increasing the risk of infection in the wound. First aiders will need to consider which type is the more suitable in any given situation.

5.4 Other First Aid Materials

The following items may also be kept in schools, but must not be kept in a first aid box. They may be kept under the direct control of a trained first aider, at the discretion of the headteacher, and must not be used by other staff.

- Tube of Savlon cream or spray can of Savlon Dry;
- Tube of Anti-histamine cream (for insect bites and stings);
- Any medications required for emergency treatment of individual pupils
(eg. glucose tablets for diabetics, adrenaline injector for anaphylaxis) **but only for use by those specifically trained in their use;**
- Salbutamol (Ventolin) inhaler (for diagnosed asthmatics only).

5.5 Automated External Defibrillators (AED)

An 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 held within a carry case and is stored in a clearly identified cabinet in the medical room.

AEDs are designed to be used by someone without any specific training and by following step-by-step instructions on the AED at the time of use. All First Aiders at Beaconside have been trained on the use of AEDs as part of their First Aid training. All other staff have received an awareness briefing regarding the use of the AED.

If one person is on the scene of a cardiac arrest, they should immediately call the emergency services - 999 and start CPR immediately afterwards. If two people are on the scene, one should call the emergency services while the other starts CPR. The person administering CPR should not leave the casualty unless absolutely essential. Where possible, it is suggested that arrangements are implemented to enable the AED to be brought to the scene.

Most AEDs will store data, which can subsequently be used to assist with ongoing patient care. School will contact the local ambulance service after an AED has been used and make arrangements for the data to be downloaded. In the meantime, the AED may still be used if required, but care should be taken not to turn it on and off unnecessarily as this could potentially erase the data. School will ensure that the AED is ready for use again by replacing pads and other consumables as required, and ensure that it is not displaying any warning lights or messages.

Modern AEDs undertake regular self-tests and, if a problem is detected, will indicate this by means of a warning sign or light on the machine. Ade Langfield (Site Manager) will check the defibrillator on a weekly basis and record these checks in the log book situated by the AED.

6. Record-keeping and reporting

6.1 First aid and accident recording

An accident form will be completed by the first aider/relevant member of staff on the same day or as soon as possible after an incident resulting in an injury. This will be done on Medical Tracker.

- The appointed person (Ellen Nolan) should complete the appropriate accident report via the LA on-line reporting as soon as possible if required
- A copy of the accident report form will also be shared with parents; an email will be sent directly from Medical Tracker.
- Records held 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 appointed person 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 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 accident 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 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

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 appointed persons 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. An email will be sent via Medical Tracker. This will be followed up with a phone call at the discretion of the first aider.

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 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 headteacher will also notify The Local Authority Safeguarding Board 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 have completed a training course, and 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.

At all times, all EYFS staff 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. New members of EYFS staff will have 3 months in which to receive training.

8. Monitoring arrangements

This policy will be reviewed by the headteacher annually.

At every review, the policy will be approved by the FGB committee.

9. Links with other policies

This first aid policy is linked to the

- Health and safety policy
- Policy on supporting pupils with medical conditions
- Asthma Information and Procedures Document
- Emergency Action Plan in the event of Anaphylactic Reaction

Appendix 1: list of trained first aiders

First Aiders		
Name	Training Type	Renewal
Katie Coleby	Paediatric First Aid	Nov-25
Liz Jones	Paediatric First Aid	Nov-25
Sarah Lodge	Emergency First Aid at Work + Paediatric element	Nov-25
Katie Waterhouse	Emergency First Aid at Work + Paediatric element	Nov-25
Suzanne Williams	Paediatric First Aid	Mar-26
Ellen Nolan	First Aid at Work	Apr-26
Carly Dolan	Paediatric First Aid	Apr-26
Milly Danks	Paediatric First Aid	Apr-26
Trish Taylor	Paediatric First Aid	Jan-27
Katie Richards	Paediatric First Aid	Dec-26
Courtney Battson	Paediatric First Aid	Mar-27
Alison Cammack	Paediatric First Aid	Aug-27
Zoe Hodson	Emergency Paediatric First Aid	Oct-27
Bethany Maycock	Emergency Paediatric First Aid	Oct-27
Cathy Brindley	Paediatric First Aid	Oct-27
Sadie Sherwood	Emergency Paediatric First Aid	Oct-27
Deanna Dodd	Emergency Paediatric First Aid	Oct-27
Stephanie Adam	Emergency Paediatric First Aid	Oct-27
Laura Handley	Emergency First Aid at Work	Sep-27
Alison Bennett	Emergency First Aid at Work	Apr-28

