



TATSFIELD PRIMARY SCHOOL

FIRST AID POLICY

September 2022

VISION STATEMENT

Children, staff and parents working actively in partnership to enable all children to realise their full potential.

We aim to help our children to:

- develop into happy and confident individuals with a secure foundation in learning that will last throughout their lives
- appreciate and understand moral and religious beliefs and develop a respectful attitude for the views of others
- develop enquiring minds, be confident to ask questions and take risks with a desire to achieve
- be independent learners and thinkers who are able to seek solutions creatively and co-operatively
- be caring, resilient and responsible individuals

Aim High, Achieve More



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 Education \(Independent School Standards\) Regulations 2014](#), which require that suitable space is provided to cater for the medical and therapy needs of pupils
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3. Roles and responsibilities

3.1 Appointed person(s) and first aiders

The school's appointed persons are Mrs D. Ellis and Mrs K. Walpole. 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
- Sending pupils home to recover, where necessary

Most staff are trained first aiders 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 in the school accident/First Aid book.

Our school's appointed person(s) and first aiders are listed in appendix 1. Their names will also be displayed prominently around the school.

3.2 The governing board

The Local governing committee 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.

3.4 The Headteacher

The Headteacher is responsible for the implementation of this policy, including:

- Ensuring that an appropriate number of appointed persons and 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 staff 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 an accident report in the accident book for all incidents they attend to where an appointed person is not called
- Informing the Headteacher or their line manager of their own 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 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 the office staff or senior leadership team 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

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
- Information about the specific medical needs of pupils
- Parents' contact details

Risk assessments will be completed by the leader of the trip 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 involving Reception class, 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 school office
- The Practical Room

6. Record-keeping and reporting

6.1 First aid and accident record book

- An accident report will be completed by the member of staff dealing with the injury incident on the same day or as soon as possible after an incident resulting in an injury
- As much detail as possible should be supplied when reporting an accident, including
 - Name of injured person
 - Class/Role
 - Date
 - Location
 - Incident details - *Describe in detail what happened, how it happened and what injuries the person incurred*
 - Action taken - *Describe the steps taken in response to the incident, including any first aid treatment, and what happened to the injured person immediately afterwards.*
 - Follow up action required - *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*
 - Name of person attending the incident
 - This report should be signed and dated.
- A copy of the accident report form will also be added to the pupil's educational record by the Office Manager.
- Records held in the first aid and accident book will be retained by the school for a minimum of 12 years, Oshens reports will be held for 6 years for adults and DOB + 25 years for children

6.2 Reporting to the HSE

The Office 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) Appendix 2. An OSHENS report will be sent to Surrey for any incident that involves a visit to a hospital.

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

A member of the office team, senior leader or class teacher/teaching 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.

6.4 Reporting to Ofsted and child protection agencies

A member of the office team 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 Surrey Safeguarding Children's Board, Local Area Designated Officer and Local Area Officer of any serious accident or injury to, or the death of, a pupil while in the school's care.

7. Training

At Tatsfield Primary School, all Teaching staff, Office staff and Midday supervisors are required to undertake full first aid training every 3 years 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.

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 by the Headteacher every 3 years.

At every review, the policy will be approved by the Headteacher and the full governing board.

9. Links with other policies

This first aid policy is linked to the

- Health and safety policy
- Policy on supporting pupils with medical conditions

Appendix 1: list of [appointed person(s) for first aid and/or trained first aiders]

Staff member's name	Role	Contact details
Mrs Karen Walpole	Administration Assistant	01959 577356
Mrs Debbie Ellis	School Secretary	01959 577356

If the above named staff members are not available, all other members of staff are first aid trained

Appendix 2

www.hse.gov.uk/riddor/reportable-incidents

When do I need to report an incident?

For most types of incident, including:

- accidents resulting in the death of any person
- accidents resulting in specified injuries to workers
- non-fatal accidents requiring hospital treatment to non-workers and dangerous occurrences

the responsible person must notify the enforcing authority without delay, in accordance with the reporting procedure (Schedule 1). This is most easily done by [reporting online](#). Alternatively, for fatal accidents or accidents resulting in specified injuries to workers **only**, you can phone 0345 300 9923.

NB: A report must be received within 10 days of the incident.

For accidents resulting in the over-seven-day incapacitation of a worker, you must notify the enforcing authority within 15 days of the incident, using the appropriate online form.

Cases of [occupational disease](#), including those associated with exposure to [carcinogens, mutagens or biological agents](#), as soon as the responsible person receives a diagnosis, using the [appropriate online form](#).

Types of reportable incidents

Deaths and injuries

If someone has died or has been injured because of a work-related accident this may have to be reported. Not all accidents need to be reported, other than for certain [gas incidents](#), a RIDDOR report is required only when:

- the accident is [work-related](#)
- it results in an injury of a type which is reportable

Types of reportable injury

The death of any person

All deaths to workers and non-workers, with the exception of suicides, must be reported if they arise from a work-related accident, including an act of physical violence to a worker.

Specified injuries to workers

The list of 'specified injuries' in RIDDOR 2013 replaces the previous list of 'major injuries' in RIDDOR 1995.

Specified injuries are (regulation 4):

- 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 body
 - 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
 - requires resuscitation or admittance to hospital for more than 24 hours

For further guidance on [specified injuries](#) is available.

Over-seven-day incapacitation of a worker

Accidents must be reported where they result in an employee or self-employed person being away from work, or unable to perform their normal work duties, for more than seven consecutive days as the result of their injury. This seven day period does not include the day of the accident, but does include weekends and rest days. The report must be made within 15 days of the accident.

Over-three-day incapacitation

Accidents must be recorded, but not reported where they result in a worker being incapacitated for more than three consecutive days. If you are an employer, who must keep an accident book under the Social Security (Claims and Payments) Regulations 1979, that record will be enough.

Non fatal accidents to non-workers (eg members of the public)

Accidents to members of the public or others who are not at work must be reported if they result in an injury and the person is taken directly from the scene of the accident to hospital for treatment to that injury. Examinations and diagnostic tests do not constitute 'treatment' in such circumstances.

There is no need to report incidents where people are taken to hospital purely as a precaution when no injury is apparent.

If the accident occurred at a hospital, the report only needs to be made if the injury is a '[specified injury](#)' (see above).

Occupational diseases

Employers and self-employed people must report diagnoses of certain occupational diseases, where these are likely to have been caused or made worse by their work: These diseases include (regulations 8 and 9):

- carpal tunnel syndrome;
- severe cramp of the hand or forearm;
- occupational dermatitis;
- hand-arm vibration syndrome;
- occupational asthma;
- tendonitis or tenosynovitis of the hand or forearm;
- any occupational cancer;
- any disease attributed to an occupational exposure to a biological agent.

Further guidance on [occupational diseases](#) is available.

Specific guidance is also available for:

- [occupational cancers](#)
- [diseases associated with biological agents](#)



Dangerous occurrences

Dangerous occurrences are certain, specified near-miss events. Not all such events require reporting.

There are 27 categories of dangerous occurrences that are relevant to most workplaces, for example:

- the collapse, overturning or failure of load-bearing parts of lifts and lifting equipment;
- plant or equipment coming into contact with overhead power lines;
- the accidental release of any substance which could cause injury to any person.

Further guidance on these [dangerous occurrences](#) is available.

Additional categories of dangerous occurrences apply to [mines, quarries, offshore workplaces](#)  and relevant transport systems ([railways](#)  etc).

Gas incidents

Distributors, fillers, importers & suppliers of flammable gas must report incidents where someone has died, lost consciousness, or been taken to hospital for treatment to an injury arising in connection with that gas.

Such incidents should be reported using the [online form](#).

Registered gas engineers (under the Gas Safe Register,) must provide details of any gas appliances or fittings that they consider to be dangerous, to such an extent that people could die, lose consciousness or require hospital treatment. The danger could be due to the design, construction, installation, modification or servicing of that appliance or fitting, which could cause:

- an accidental leakage of gas;
- incomplete combustion of gas or;
- inadequate removal of products of the combustion of gas.

Unsafe gas appliances and fittings should be reported using the [online form](#).