



ST BERNADETTE'S  
CATHOLIC PRIMARY SCHOOL

# First Aid Policy

St. Bernadette's Catholic Primary School

Approved by BoD: 30/09/2024  
Policy Review Date : 30/09/2027

## Mission Statement

At St Bernadette's, we follow Jesus by sharing His light through our words and actions, spreading His word in how we live and learn, trusting His plan even when the path is uncertain, loving one another with compassion and respect, and serving others with humility, just as Christ did. Through these daily acts of faith and kindness, we grow together as a community of disciples.

## Aims

The aims of our First Aid Policy are to:

- Ensure the health and safety of all staff, children 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

## 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

## **Roles and Responsibilities**

### **First Aiders**

The School has:-

- 14 trained Paediatric First Aiders
- 1 First Aid at Work First Aider and
- 1 Emergency First Aider.

They are responsible for:

- Taking charge when someone is injured or becomes ill
- Ensuring there is an adequate supply of medical materials in their 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
- Sending pupils to the School Office where the Head Teacher/Assistant Head Teacher will assess them and make a decision on whether they need to go home to recover
- Filling in an Accident/Injury Report Slip (see Appendix 1) on the same day for the child to take home to parents/carers and logging the incident in their Class Accident Book

Our School's First Aiders are listed in Appendix 2. Their names will also be displayed prominently around the school.

### **The Head Teacher**

The Head Teacher 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
- 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

## **Staff**

School staff are responsible for:

- Ensuring they follow first aid procedures
- Ensuring they know who the First Aiders in school are
- Completing Accident/Injury Report Slip (see Appendix 1) for all incidents they attend to where a First Aider is not called and documenting it in their Class First Aid Book.
- Informing the Head Teacher of any specific health conditions or first aid needs

## **In-School First Aid 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, the Head Teacher/Assistant Head Teacher will be consulted and parents will be contacted and asked to collect their child. Upon their arrival, the First Aider/Head Teacher/Assistant Head Teacher will recommend next steps to the parents

- If emergency services are called, the Head Teacher/Deputy Head Teacher or if not available the School Office staff will contact parents immediately
- The relevant member of staff will complete an Accident/Injury Report Slip on the same day or as soon as is reasonably practical after an incident resulting in an injury

### **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

Risk assessments will be completed by the lead member of staff 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.

### **First Aid Equipment**

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

- A Leaflet with General First Aid Advice
- Accident/Injury Report Slips
- Small, Regular and Large Conforming Bandages
- Eye Pad Bandages
- Triangular Bandages
- Adhesive Tape
- Low Adherent Dressings
- Mouth Shield
- Burns Dressings
- Gauze Swabs
- Disposable Gloves
- Antiseptic Wipes

- Plasters of assorted sizes
- Scissors
- Eye Wash
- Sick Bags
- Waste Bags

No medication is kept in first aid kits.

First Aid Kits are stored in:

- The Main Office
- In each Classroom
- The Beehive Out of School Club
- School Kitchen
- With Lunchtime Supervisors

## **RECORD-KEEPING AND REPORTING**

### **Accident/Injury Report Slips and Accident Record Book**

- An Accident/Injury Report Slip is completed if the injury needs only very minor first aid - a wipe, cold compress, plaster or ice pack for a short time. This is sent home with the child. The injury is then recorded in the Classroom/School Office First Aid Book for our records.

### **Reporting to the Health and Safety Executive**

The Head Teacher 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 Teacher will report these to the Health and Safety Executive as soon as is reasonably practicable. The Head Teacher will also report these to the Operations Manager at the MAC who will log these on EVERY.

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>

### **Notifying Parents**

The Class Teacher or Teaching Assistant will inform parents of any accident or injury sustained by a pupil at the end of school, along with giving them an Accident/Injury Report Slip. A bump to the Head or a nasty cut will result in a quick phone call home to the parent/carer by the School Office just to inform them.

### **Reporting to Ofsted and Child Protection Agencies**

The Head Teacher 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 Teacher will also notify Local Authority Child Protection Agencies (MASH team) of any serious accident or injury to, or the death of, a pupil while in the school's care.

### **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 (see Appendix 2).

Staff are encouraged to renew their first aid training when it is no longer valid. 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.

### **Links with other Policies**

This First Aid Policy is linked to the

- Health and Safety Policy
- Policy on Managing Medicines and Medical Conditions in School



**ST. BERNADETTE'S CATHOLIC PRIMARY SCHOOL**

**ACCIDENT/INJURY REPORT SLIP**

NAME OF CHILD: ..... CLASS: .....

LOCATION: ..... TIME: .....

		TICK		TICK
<b>HEAD</b>	BACK OF HEAD		ASTHMA	
	FOREHEAD		BRUISE	
	CHEEK/JAW		BUMP	
	EYE/NOSE		CUT	
	MOUTH/TEETH		DIARRHOEA	
	SIDE OF HEAD/EAR		GRAZE	
			HEADACHE	
<b>ARM</b>	SHOULDER		HIGH TEMP	
	ARM		NAUSEA	
	WRIST		NOSEBLEED	
	HAND/FINGER		PAIN/ACHE	
			SPRAIN	
<b>LEG</b>	LEG		SWOLLEN	
	KNEE		TWISTED	
	ANKLE/FOOT		VOMITING	
	FOOT			
<b>BODY</b>	CHEST		CLEANED	
	STOMACH		COLD COMPRESS	
	BACK		INHALER USED	
			OBSERVED	
	COLLISION		PLASTER APPLIED	
	FALL		PARENT CALLED	
	TRIP		AMBULANCE CALLED	
	OTHER			

NAME OF FIRST AIDER: .....

SIGNED: .....

DATE: .....

**IMPORTANT**

PLEASE CONSULT YOUR DOCTOR OR LOCAL HOSPITAL IF YOUR CHILD SUFFERS ANY DROWSINESS, VOMITING, IMPAIRED VISION OF EXCESSIVE PAIN AFTER RETURNING HOME. IF YOUR CHILD HAS BEEN SENT HOME DUE TO VOMITING/DIARRHOEA, HE/SHE MUST REMAIN AT HOME FOR 48 HOURS AFTER THE LAST BOUT OF VOMITING/DIARRHOEA.

### USEFUL INFORMATION ON HEAD INJURIES

Lots of children have bumps to the head which are not serious. Below are descriptions of more serious head injuries and what to look out for.

#### Types of Head Injury and Possible Causes:

**Concussion.** Where the brain is shaken and hits against the inside of the skull. This can be caused by a fall or a blow to the head. Concussion may also cause unconsciousness for a short period, but can be followed by an improvement in response and full recovery.

**Compression.** Swelling or bleeding in the skull puts pressure on the brain. This can occur from injury, a ruptured blood vessel, a tumour or infection (meningitis). There may be a history of a recent head injury with apparent recovery but then a deterioration in the patient's level of consciousness can occur.

**Fractured skull.** Damage to the skull may cause bleeding within the skull causing compression. The broken bone may damage the brain or 'brain shaking' may have occurred causing concussion.

#### Signs & Symptoms:

##### **Compression**

- Level of response worsens as the condition develops.
- Intense headache.
- Flushed, dry skin.
- Deep, noisy, slow breathing.
- Slow, strong pulse.
- One or both pupils may dilate as pressure increases.
- Condition worsens and fits may occur.

##### **Concussion**

- Short term memory loss, confusion, irritability.
- Mild, general headache.
- Pale, clammy skin.
- Shallow/normal breathing.
- Rapid, weak pulse.
- Normal pupils, reacting to light.
- Possible nausea or vomiting.

##### **Fractured skull**

- Bleeding, swelling or bruising to the head.
- A soft area or depression of the scalp.
- Bruising around one or both eyes.
- Bruising or swelling behind the ear.
- Bleeding or fluid coming from the nose or an ear.
- Deformity or lack of symmetry to the head.
- Blood in the white of the eye

**If in any doubt, dial 999**