



FIRST AID POLICY, PROCEDURE AND GUIDANCE

Status	Current	Approval	FGB
Review frequency	Two years	Author (role)	Headteacher
Date first written	January 2017	Date last approved	February 2021
Date of next review	January 2023	Date withdrawn	N/A

Policy Statement

Foxhills Infant School will undertake to ensure compliance with the relevant legislation with regard to the provision of first aid for all employees and to ensure best practice by extending the arrangements as far as is reasonably practicable to children and others who may also be affected by our activities. Responsibility for first aid at Foxhills Infant School is held by Lucy Howe, Headteacher who is the responsible manager. All first aid provision is arranged and managed in accordance with the Children's Services Safety Guidance Procedure SGP 08-07(First Aid). All staff have a statutory obligation to follow and co-operate with the requirements of this policy.

Aims & Objectives

Our first aid policy requirements will be achieved by:

- Carrying out a First Aid Needs Assessment to determine the first aid provision requirements for our premises
- It is our policy to ensure that the First Aid Needs Assessment will be reviewed periodically or following any significant changes that may affect first aid provision
- The Children's Services First Aid Needs Assessment Form (CSAF-002) will be used to produce the First Aid Needs Assessment for our site (Appendix 1).
- Ensuring that there are a sufficient number of trained first aiders on duty and available for the numbers and risks on the premises in accordance with the First Aid Needs Assessment
- Ensuring that there are suitable and sufficient facilities and equipment available to administer first aid in accordance with the First Aid Needs Assessment
- Ensuring the above provisions are clear and shared with all who may require them

The Headteacher (responsible manager) will ensure that appropriate numbers of qualified first aiders, appointed persons and paediatric trained staff (if appropriate) are nominated as identified by completion of the First Aid Needs Assessment and that they are adequately trained to meet their statutory duties.

Appointed People

At Foxhills Infant School there are two appointed persons:

- Natalie Baker
- Sandie Dulieu

Where the first aid needs assessment identifies that qualified first aid staff are not necessary due to the nature /level of risk, the minimum legal requirement is to appoint a person (the Appointed Person) to be on site at all times during the working day. Appointed persons are in place to take charge of first aid arrangements including looking after equipment and calling emergency services.

Note: Appointed persons are not First Aiders and should not provide first aid for which they have not been trained. However it is good practice to provide appointed persons with some level of first aid training. Such training does not require HSE approval.

Qualified First Aid at Work

At Foxhills Infant School there are two appointed First Aid at Work persons:

- Natalie Baker
- Sandie Dulieu

Qualified First Aid Staff

At Foxhills Infant School there are four qualified first aiders who are as follows:

- Claire Jenkinson
- Sarah Wort
- Michelle Lambelle
- Jo Tuknott

They will be responsible for administering first aid, in accordance with their training, to those that become injured or fall ill whilst at work or on the premises. There may also be other duties and responsibilities which are identified and delegated to the first aider (eg. first aid kit inspections).
(Appendix 2)

Emergency First Aiders

At Foxhills Infant School, all teaching assistants are appointed persons:

- Moira Wallace
- Bel Card
- Jenna Poole
- Mandy Chiverton
- Claire Jenkinson
- Sarah Wort
- Lucy Bennett
- Megan Brealey
- Jan Wright
- Emma Kates

They will be responsible for administering first aid, in accordance with their training, to those that become injured or fall ill whilst at work or on the premises.

First Aid Provision

Our First Aid Needs Assessment has identified the following first aid kit requirements:

- Three first aid kits on the premises, located in the school office but two kits, taken to the playground for use during the lunch hour.
- Three travel first aid kits available for school trips, visits to the nature trail and for use in vehicles
- These travel first aid kits are located in the school office ready for immediate use. A incident book is kept in each box to record incidents.

It is the responsibility of Natalie Baker, the qualified first aider/appointed person, to check the contents of all first aid kits every three months. Each First Aid Box has a contents list clearly displayed on the exterior of the box along with a checked by and dated list. The school uses the Guidelines for First Aid Boxes is taken from the Children's Services First Aid Kit Checklist (CSAF-003) – Appendix 3.

The sofa in the school office is designated as the first aid room for treatment, sickness and the administering of first aid. This area has the following facilities:

- Sofa, warm running water, disposable cups, first aid kit, disposable sick bowls, inhaler cabinet, medical/injury log book, stool and swabs and dressing disposal unit. The epi pens are stored in the lockable first aid box, which is located on the wall in the office.
- The ice packs are stored in the children's kitchen fridge, which is located next to the office.

Emergency Arrangements

Upon being summoned in the event of an accident, the first aider/appointed person is to take charge of the first aid administration/emergency treatment commensurate with their training.

Following their assessment of the injured person, they are to administer appropriate first aid and make a balanced judgement as to whether there is a requirement to call an ambulance.

The first aider/appointed person is to always call an ambulance on the following occasions:

- In the event of a serious injury
- In the event of any significant head injury
- In the event of a period of unconsciousness
- Whenever there is the possibility of a fracture or where this is suspected
- Whenever the first aider is unsure of the severity of the injuries
- Whenever the first aider is unsure of the correct treatment
- Any severe medical condition that requires emergency medical treatment

In the event of an accident involving a child, where appropriate, it is our policy to always notify parents of their child's accident if it:

- is considered to be a serious (or more than minor) injury
- requires further first aid treatment
- requires attendance at hospital
- receives a severe head injury
- results in an injury to a child's private areas

We endeavour to notify Parents by telephone in the first instance. If we are unable to reach Parents by phone, the school will try all numbers on the child's contact list until someone has been contacted and advised of the accident/injury

In the event that parents cannot be contacted and a message has been left, we will continue to attempt to make contact every 15 minutes. In the interim, we will ensure that the qualified first aider, appointed person or another member of staff, remains with the child until the parents can be contacted and arrive (as required).

In the event a child requires hospital treatment, and Parents cannot be contacted prior, a member of school staff (usually the qualified first aider, appointed person, or Headteacher) will accompany the child to hospital and remain with them until the parents arrive. A copy of the child's record should accompany the adult attending the hospital, which should be shared with medical staff as appropriate.

The adult accompanying the child will act in 'loco parentis' and will provide consent for emergency treatment that may be necessary. School staff will be guided by medical professionals at all times and will make decisions that are in the best interests of the child, following medical advice.

The member of staff in loco parentis will be expected to record events in detail and share these with Parents as soon as possible. A written report of all events and actions taken will be made by school staff.

Dealing with Accidents

Minor injuries

These will be dealt with by school staff. This usually involves the school's designated first aider looking at the injury sustained and making a judgement about what treatment is necessary. In most cases, treatment can be administered in school by a first aider. Sometimes medical attention may be necessary or an ambulance may be called in the event of a serious injury.

Prior to administering medicine or prescribed medicine permission from parents and/or carers is sought first; by parents or carers completing a permission form.

Permission for treatment of minor injuries that are non-routine, will be sought by telephoning a parent or carer and obtaining their permission verbally. Permission sought and obtained will be recorded in the accident/injury book. When a child requires urgent medical attention, parents will be telephoned. (Please see administration of medicines policy for more information).

Occasionally, children may hurt parts of their bodies which are private. When this happens the designated first aider will telephone parents or carers first to obtain permission to look at the injury, they will also seek the permission of the child. If a parent or carer does not authorise permission, then they will be asked to collect their child so that they can assess the injury. A first aider will always be accompanied by a second staff member when looking at an injury in a private area of a child's body, and this will be done in the medical section of the office. (Please see our safeguarding policy and documentation with regards to transparency). After the first aider has assessed the injury, parents and carers will be informed and permission for any further actions will be sought. Details of any injury and treatment will be written in the accident/injury book, along with permissions sought and obtained.

Bangs to the head

These are potentially serious. If a child suffers concussion the child's parents must be informed as soon as possible with the recommendation that a visit should be made to the doctor.

In less severe incidents the child's parents will be informed by telephone and a sticker will be given to the child advising parents or carers that they have bumped their head.

Records

All accidents requiring first aid treatment are to be recorded with (at least) the following information:

- Name of injured person
- Name of the qualified first aider/appointed person/emergency first aiders
- Date of the accident
- Type of accident (eg. bump on head etc)
- Treatment provided and action taken

Minor accidents should be recorded in the medical book in the school office. Serious injury should be recorded online, using the Accident/incident reporting form. This form is then sent to the school's headteacher for review and signing.

Health & Safety Executive (HSE) must be notified of fatal, major injuries and dangerous occurrences without delay. This is done via the Corporate Accident Reporting and Investigation System Online reporting forms are available on the HSE website (www.hse.gov.uk).

Specific Medical Conditions

All class teachers are issued at the start of the school year with a report stating which child in their class has a specific medical condition.

Medical Conditions include:

Acute Allergic Reactions

This is potentially life threatening condition. A small number of people are sensitive and may require an immediate injection or inhalation of adrenaline to save life. There must be an inhaler or injection kept in the school office, clearly labelled "Adrenaline" with the child's name and instructions for use, this is kept in a secured area. A photograph of the child should also be displayed for staff to see together with details, the child must be known to the office and kitchen staff.

Asthma

Asthma is a physical condition and not an emotional illness. Sudden narrowing of the air passages in the lungs make it difficult for the person to breath.

Asthma can be controlled by avoiding known irritants and by inhaling specified drugs:

- Relievers should be carried by the asthmatic at all times, where possible or kept in school.
- Preventors are normally taken to prevent an attack, which would not usually be required during the school day as they are acting.

Asthmatics should be encouraged to participate fully in all aspects of school life. Other pupils should be helped to understand asthma so they can support their friends.

Asthma can be a life threatening condition and pupil must have immediate access to their inhalers. Inhalers kept at Foxhills Infant School are available from an unlocked cupboard within the school office (which deemed as the medical room). Children are encouraged to take their inhaler with them for PE lessons.

Asthma training must be an ongoing project for all staff and should be monitored regularly.

Diabetes

Diabetes is a disorder in which the body is unable to control the amount of sugar in the blood. If a child has diabetes routine urine and blood test are normally taken at home. If the child attends a residential trip, consent and training would be needed by appropriate accompanying staff.

Symptoms of diabetes resemble those of drunkenness. Diabetics must eat at regular intervals and occasionally top up between meals. Other children should be made aware of the need for diabetic children to “snack” during the day and their needs.

Teachers need to be aware that sugar balances can be affected by exercise, stress or excitement. Training would be given to all staff when a diabetic attends this school. Emergency procedures, along with photograph of child should be available for staff to view.

Epilepsy

Petite mal involves only a brief interlude of unconsciousness. More severe seizures can be quite frightening, and if one occurs during school hours, staff will need to develop a matter of fact attitude to counter panic amongst other children. Training for responding to an epileptic fit will be monitored and staff given the relevant training as and when necessary.

Individual Cases

Any individual children’s problems will be discussed with the headteacher, parents, staff and any other relevant persons, at the time of admission or diagnosis. The need for medical training and staff awareness will be assessed and carried out as necessary.

Absence Periods

Chicken Pox Absent for five days from the onset of rash.
(Vulnerable children and pregnant females need to be aware)

Rubella Five days from onset of rash (pregnant females need to be aware)
(German Measles)

Measles Five days from onset of rash

Mumps Five days from onset of swollen glands

Guidance on Head Lice





If discovered on a child, inform parent that they have been noticed, advise treatment as soon as possible. Inform teacher of child, send home notes to appropriate class, year group or whole school asking that all children’s heads are checked and treated if necessary.

CHILDREN'S SERVICES ASSESSMENT FORM CSAF-002
First Aid Needs Assessment Form

Part 1	ASSESSMENT OF FIRST AID NEEDS	
Foxhills Infant School		
No.	Aspects to Consider at Your Premises	First Aid Provision Considerations (Insert Your Information)
1	What are the risks of injury and ill-health arising from the work and activities as identified in your risk assessments?	<i>Risk of falling- poorly lit driveway when dusk or dark, a broken paving slab in year R Nature trail- risk of slips and trips. Risk of children breaking free of adult supervision, running may cause child to fall Playground Equipment- climbing frame X2, trim trail- risk of children falling and hurting or grazing arms, legs, head, face. This risk increases when it is wet.</i>
2	Are there any specific risks? (eg. work with hazardous substances, dangerous tools, dangerous machinery, higher risk activities etc)	<i>Asbestos log identifies areas in the school which must not be disturbed. All contractors are asked to sign the log to acknowledge safe and unsafe areas. Cleaning chemicals used by school cleaning staff. Risk of burning, ingestion- risk assessment completed.</i>
3	Are large numbers of people employed on site?	<i>The school employs approximately 45 people. The school is situated on a shared campus with the feeder junior school.</i>
4	What is your record of accidents and cases of ill-health? What type and where did they happen?	<i>Minor accidents and cases of ill health occur daily amongst the children. Since September 2018 the school has reported three accidents (2 pupils and 1 adult)- These accidents are reportable to the local authority.</i>
5	Are there staff/children on site who have disabilities or specific health problems?	<i>1 staff member- Type 1 diabetes 2 staff members- rheumatoid arthritis 3 children requiring epi pens for allergies 8 children requiring inhalers for asthma</i>
6	Are there clients or service users on the site who may need first aid?	<i>No</i>
7	Is there first aid cover for lunch times and for the beginning and end of the working day?	<i>Yes</i>
8	What is the site layout and will the layout require additional first aid cover for separate buildings or floors of a multi-storey building?	<i>Single level access, one story building. We do have a temporary building which serves as an outdoor classroom.</i>
9	Do you have any work experience trainees?	<i>Yes, students throughout the year</i>
10	Are there a number of inexperienced or	<i>Yes, college students and high school students during</i>

	young staff/workers/visitors on site?	<i>work experience placements only, not full time.</i>
11	Do the numbers of people on site vary throughout the day. Are extra first aiders needed for peak periods?	<i>No</i>
12	Do staff work in shift patterns and does each shift have sufficient first aid cover?	<i>No</i>
13	Do you work on a site occupied by other organisations and share first aid arrangements?	<i>We occupy a shared campus but each building is responsible for their own first aid.</i>
14	What is the distance from emergency services and how long are they likely to take to arrive on site?	<i>Southampton General Hospital approx. 5 miles away. Emergency response time: 10 mins approx..</i>
15	Do some staff work alone or remotely (including contracted home workers)?	<i>Yes, but the Site manager knows to make others aware when he is working alone on site. This applies to all staff.</i>
16	Do you have service users aged five years of age or younger?	<i>Yes</i>
17	Do members of the public visit your premises?	<i>Yes</i>
18	Do you have any employees with reading or language difficulties?	<i>No</i>
<p>Do not forget that first aid trained staff, paediatric first aid trained staff and appointed persons take leave and/or are often absent from the premises for other unscheduled reasons. You must appoint sufficient people to cover these absences to enable first aid personnel to be available at all times when people are at work.</p>		

Part 2	SUMMARY OF REQUIRED FIRST AID PROVISION	
Foxhills Infant School		
Level of First Aid Staff (Type of Provision)	Numbers of Staff Required to be on Site at Any Time	Numbers to be Trained to Meet On-Site Requirement
Qualified First Aider	3	4
Emergency First Aider	3	4
School First Aid Trained	1	2
Paediatric First Aid Trained	3	5
Appointed Person	1	2
Other: N/A		
First Aid Kits	Quantity Required	Locations of First Aid Kits
Yes / No	2	School office
	6	Playgrounds for use during lunch hour Class based first aid kits to ensure bubbles can remain contained
Travel First Aid Kits	Quantity Required	Locations of Travel Kits
Yes / No	3	School office

First Aid Rooms/Areas	Quantity Required	Locations of Rooms	
Yes / No	1	School office	
First Aid Needs Assessment Completion			
Manager's comments	Insert comments relevant to assessment as appropriate		
<p>In the future, the school office needs to be re-designed in terms of layout, to ensure privacy for children during first aid administration and when children are unwell. This has now been achieved. There is a new office and a designated medical area for pupils in the event they become unwell at school.</p>			
Name of manager	Signature of manager	Date	
Lucy Howe		11 th January 2019	
Assessment reviews	Set future review dates & sign/comment upon completion		
Review date	Reviewed by	Reviewer signature	Remarks
11 th January 2019	Lucy Howe		Policy and risk assessment updated to reflect staffing changes in the academic year 2017/18
9 th March 2020	Lucy Howe		Policy and risk assessment updated to reflect staffing changes
22 nd January 2021	Lucy Howe		Update risk assessment to reflect staff training and new employees. Update risk assessment to reflect new procedures for first aid linked to the schools' Covid risk assessment



First Aid Certificates

NAME	EXPIRES
FULL FIRST AID CERTIFICATE	
First Aid at Work	
Natalie Baker	28 th February 2023
Paediatric First Aid	
Sandie Dulieu	3 rd May 2021
Claire Jenkinson	28 th February 2023
Sara Wort	3 rd May 2021
Emergency First Aiders	
Moirra Wallace	21 st June 2021
Jenna Poole	21 st June 2021
Bel Card	21 st June 2021
Natalie Baker	21 st June 2021

CHILDREN'S SERVICES ASSESSMENT FORM CSAF-003

First Aid Kit Checklist

To be completed using Children's Services Safety Guidance Procedure No. 08/07 (First Aid)

First Aid Kit Checklist				
Location of First Aid Kit/Box				
Vehicle & Registration No. <i>(if applicable)</i>				
Identity No. of First Aid Kit/Box <i>(if applicable)</i>				
Date of Initial First Aid Kit/Box Check				
Name of Assessing First Aider				
Contents Check				
No.	Premises First Aid Box	Minimum Required	Required Quantity	Actual Quantity
1	Guidance card	1		
2	Individually wrapped sterile adhesive dressings (assorted sizes)	20		
3	Sterile eye pads	2		
4	Individually wrapped triangular bandages (preferably sterile)	4		
5	Safety pins	6		
6	Medium individually wrapped sterile unmedicated wound dressings	6		
7	Large individually wrapped sterile unmedicated wound dressings	2		
8	Pair of disposable gloves	1		
No.	Travel First Aid Kit	Minimum Required	Required Quantity	Actual Quantity
1	Guidance card	1		
2	Individually wrapped sterile adhesive dressings	6		
3	Individually wrapped triangular bandages	2		
4	Large sterile unmedicated dressing (approx. 18cm x 18cm)	1		
5	Safety pins	2		
6	Individually wrapped moist cleansing wipes (alcohol free)	2		
7	Pair of disposable gloves	1		
Additional Checks				
1	Are all items of first aid within expiry date?	YES	NO	
2	Are all items of first aid in good, undamaged condition?	YES	NO	
3	Is the first aid kit/box in good condition & undamaged?	YES	NO	
4	Is the location of the first aid kit/box clean and accessible?	YES	NO	
5	Is the first aid location sign present & in good condition?	YES	NO	
6	Is the list/sign of trained first aiders present & up-to-date?	YES	NO	
Summary of Actions				
FIRST AID KIT PASSED (eg. 3-MONTH) CHECK & NO ACTION REQUIRED		YES	NO	
Actions required if 'NO'				

Name of Assessor		Signature of Assessor		Assessed Date	
Follow-up Actions					
REQUIRED ACTIONS IMPLEMENTED/SHORTAGES REPLENISHED				YES	NO
Name		Signature		Date	

Note: **Minimum Required** – Minimum contents required in any first aid kit under ACOP (legal) guidance

Required Quantity – Your own contents requirements based upon your selected size of first aid kit

Quantities are to be locally inserted before the form is issued or used

Actual Quantity – Actual contents noted at the time of this periodic check of the first aid kit

ADDITIONAL GUIDANCE NOTES FOR COMPLETION

INJURIES, DISEASES & DANGEROUS OCCURRENCES RECORDING & REPORTING PROCEDURES

There is a subtle difference between recording and reporting of accidents. All accidents need to be recorded at school and the level of detail will reflect the seriousness. Some accidents must be reported to the HSE under the Reporting of Injuries, Diseases & Dangerous Occurrences Regulations 1995 (RIDDOR).

When reporting by telephone to the HSE it will be useful to have a copy of [Form F2508](#) in front of you. Update records if injuries are later found to be more serious. Details for reporting & recording are as follows:

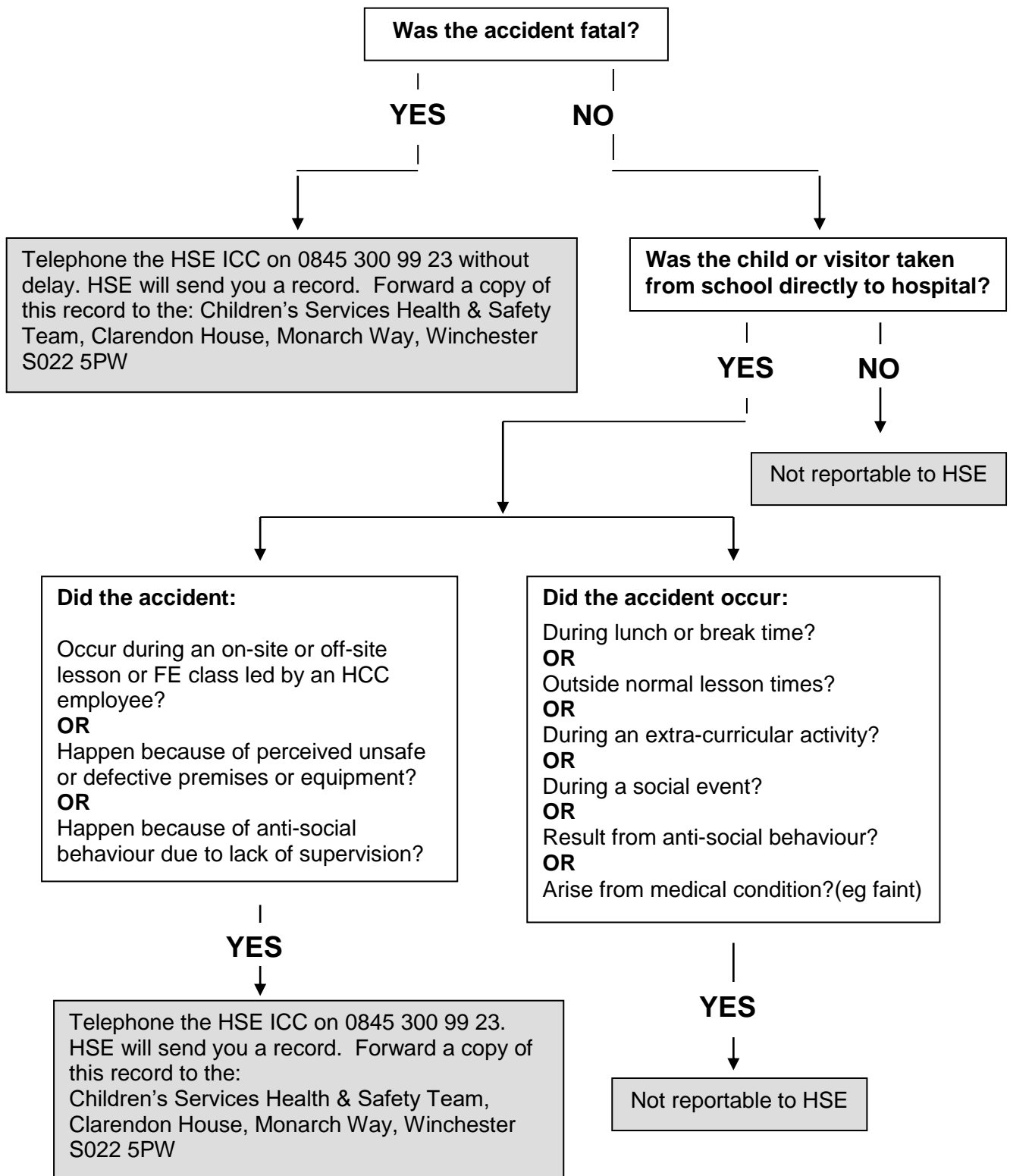
Pupils	Complete one of the three following actions
Routine injury, eg. graze from playground fall	Simple entry in exercise book or similar local record book.
More serious incident, eg. significant first aid provided, parent contacted	Complete this CSRF-003 form and retain at school .
Reportable to HSE (Please see flowcharts included below)	Send a copy of your completed F2508 Form to the HSE or telephone the HSE on 0845 300 9923 who will send you their record where reports are phoned. Forward a copy of your form or the HSE record to Children's Services Health & Safety Team, Clarendon House, Monarch Way, Winchester, S022 5PW
Employees	Complete as appropriate
All accidents	Enter in Accident Book and forward a copy of the report form to Children's Services Health & Safety Team, Clarendon House, Monarch Way, Winchester, S022 5PW.
Reportable to HSE (Please see flowcharts included below)	Send a copy of your completed F2508 Form to the HSE or telephone the HSE on 0845 300 9923 who will send you their record where reports are phoned. Forward a copy of your form or the HSE record to Children's Services Health & Safety Team, Clarendon House, Monarch Way, Winchester, S022 5PW
Visitors	Complete as appropriate
All accidents	Enter in Accident Book and forward a copy of the report form to Children's Services Health & Safety Team, Clarendon House, Monarch Way, Winchester, S022 5PW.
Reportable to HSE (Please see flowcharts included below)	Send a copy of your completed F2508 Form to the HSE or telephone the HSE on 0845 300 9923 who will send you their record where reports are phoned. Forward a copy of your form or the HSE record to Children's Services Health & Safety Team, Clarendon House, Monarch Way, Winchester, S022 5PW
Occupational Diseases	Applies to employees only
Reportable only when a written diagnosis is received from a doctor	Send a copy of your completed F2508 Form to the HSE or telephone the HSE on 0845 300 9923 who will send you their record where reports are phoned. Forward a copy of your form or the HSE record to Children's Services Health & Safety Team, Clarendon House, Monarch Way, Winchester, S022 5PW
Dangerous Occurrences	Occurrences defined under RIDDOR

These rarely happen in schools. Examples of reportable are listed below

Send a copy of your completed F2508 Form to the HSE or telephone the HSE on 0845 300 9923 who will send you their record where reports are phoned. Forward a copy of your form or the HSE record to Children's Services Health & Safety Team, Clarendon House, Monarch Way, Winchester, S022 5PW

Collapse/failure of lift or hoist; failure of pressure system with potential to cause death; electrical short circuit causing fire or explosion and closure for 24 hours; release of biological agent likely to cause severe human infection or illness; collapse of scaffold over 5 metres high; collapse of building, floor or wall; fire or explosion resulting in school closure for 24 hours; escape of flammable substances which could cause a major fire or explosion; escape of substances likely to cause death or damage health; release of asbestos dust.

REPORTING ACCIDENTS TO CHILDREN OR VISITORS IN SCHOOLS TO THE HSE

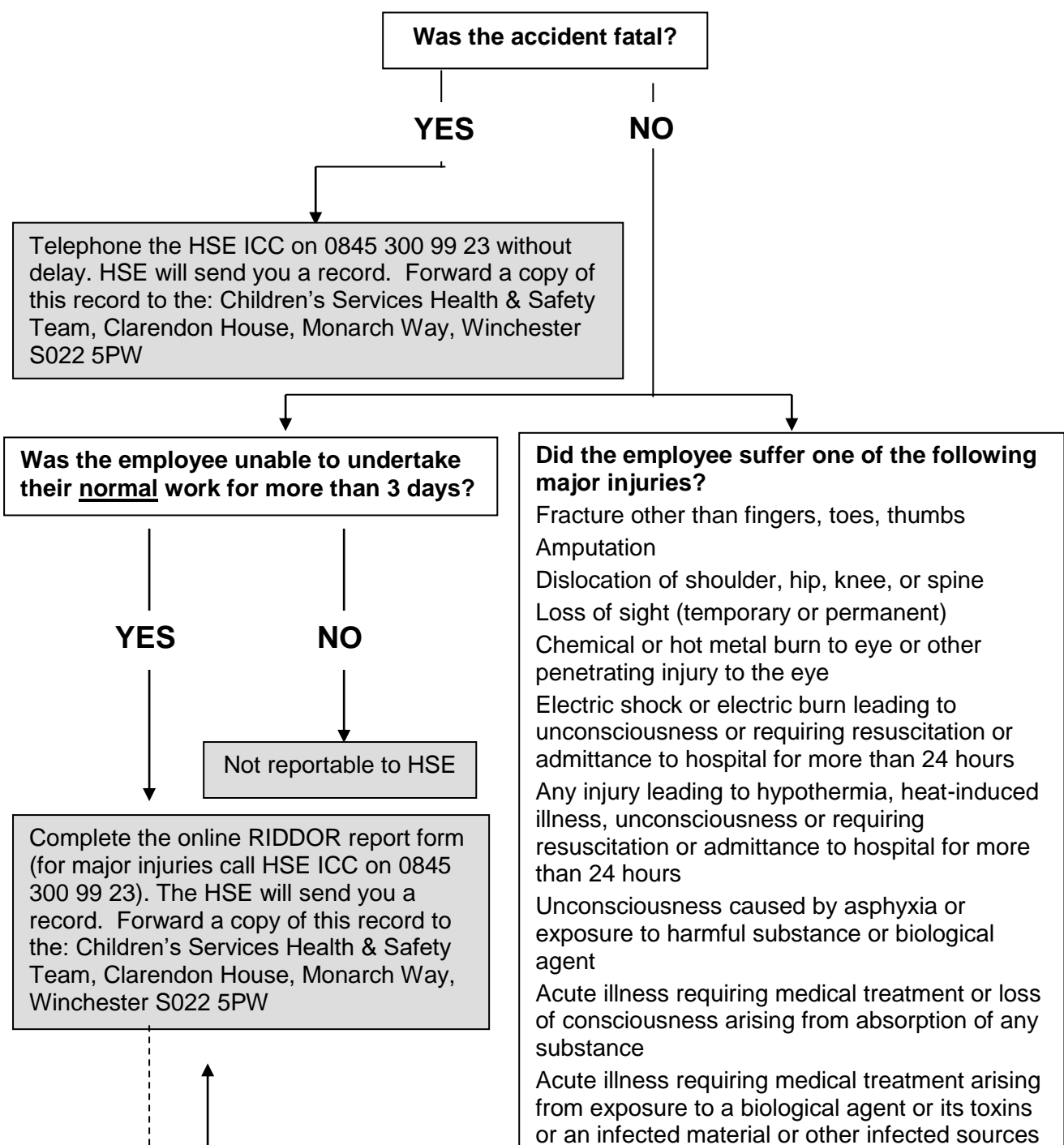


IF IN DOUBT – REPORT IT OR SEEK ADVICE FROM THE CHILDREN’S SERVICES HEALTH & SAFETY TEAM

General Data Protection Regulations 2018

Personal data will only be used to record the incident and for no other purpose. Data will not be passed to any other organisation unless there is a legislative requirement to do so.

FLOWCHART GUIDE FOR REPORTING OF EMPLOYEE ACCIDENTS TO HSE



YES

**IF IN DOUBT – REPORT IT OR SEEK ADVICE FROM THE
CHILDREN’S SERVICES HEALTH & SAFETY TEAM**

NO



Not reportable to HSE