



St Matthew's Primary School

First Aid Policy

Date Policy Written: July 2025

Review Cycle: Every 2 years or sooner if required.

Next review date: July 2027

This Policy must be read in conjunction with

- Safeguarding Policy
- Equalities Policy
- Trips and Visits Policy
- SEND Policy
- Medical Policy
- Health and Safety Policy
- Intimate Care Policy
- DfE guidance "Automated External Defibrillators (AEDs) A Guide for Schools" (Oct 2019)

Introduction

This policy is designed to promote the health, safety and welfare of pupils, staff and visitors of St Matthews Primary School through the provision of first aid equipment and trained personnel in accordance to the requirements of the Health and Safety (First Aid) Regulations 1981.

Definition of First Aid

'First aid is the initial assistance or treatment given to someone who is injured or suddenly taken ill'.

The joint First Aid Manual; British Red Cross, St John's Ambulance and St Andrews Ambulance 8th Edition; Dorling Kingsley.

Aims

At St. Matthews Primary School we understand that first aid saves lives and ensures that minor injuries and illnesses do not turn into major ones. Therefore, the aims of this policy are to ensure that:

- Adequate first aid provision and medical care will be provided for pupils, school personnel and visitors
- There are qualified first aid personnel available who are aware of hygiene and infection control procedures
- First aid equipment is available, appropriate, regularly maintained and easily accessible throughout the school
- All accidents are reported and recorded within the guidelines of this policy
- First aid arrangements are regularly reviewed

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

Roles and Responsibilities

The Governing Body delegates powers and responsibilities to the Headteacher to ensure the school complies with the Health and Safety (First Aid) Regulations 1981 and the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR). They will appoint a link governor (Health and Safety) to report back to the governing body on the effective implementation of the policy.

The Headteacher ensures that the school complies with The Health and Safety (First Aid) Regulations 1981 and the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR) and that a nominated person is appointed to take charge of first aid arrangements (School Medical Officer).

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

- Ensuring that an appropriate number of trained personnel are present in the school at all times
- 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

The School Medical Officer ensures that all first aid training is valid, that first aid resources are well stocked, that school personnel are aware of any specific health needs and or disabilities and that first aid provision is determined:

- at break and lunchtimes
- when school personnel are absent
- for off-site activities and trips
- for all curriculum activities, including P.E

All School Staff are responsible for:

- Ensuring they follow first aid procedures
- Ensuring they know who the first aiders are in school

- Completing accident logs for all incidents
- Informing the headteacher or their manager of any specific health conditions or first aid needs

Qualifications and Training

All school first aiders will hold a valid certificate of competence issued by an organisation whose training and qualifications are approved by the HSE and valid for three years. Refresher training and retesting of competence will be arranged in advance of the certificates expiring. At all times, there will be at least one staff member on the school site who has a current paediatric first aid (PFA) certificate which meets the requirements set out in the Early Years Foundation Stage statutory framework. The PFA certificate will be renewed every 3 years.

The School Medical Officer is a certified first aider and as part of their role will:

- monitor and arrange training and competencies
- look after first aid equipment, including restocking first aid boxes and replacing out of date materials
- ensure that an ambulance is summoned if required (and reported to SLT)
- liaise with their line manager as appropriate with regards to first aid
- ensure that all accidents and injuries are recorded appropriately
- ensure that all members of staff (full, part-time and temporary) are familiar with the school's first aid provision

A register of trained First Aiders is maintained by the School Medical Officer and the Inclusion Team. This includes staff trained in:

- Paediatric First Aid
- First Aid for Schools
- First Aid at Work
- Emergency First Aid at Work
- AED trained staff

Treatment of Injuries

Minor injuries can be treated by any member of staff if they are comfortable to do so. More serious injuries must be treated by a qualified, certified first aider (these individuals can be identified via the first aiders list, found in every classroom and in every accident file). A first aider may call another first aider for assistance should they feel it necessary. The medical mobile can be called in the case of an urgent incident or an emergency. This is carried by the School Medical Officer at all times. If it is necessary 999 should be called from the closest available speakerphone and senior leadership must be informed immediately.

First Aid Materials, Equipment and Facilities

The Medical Room is located in the main administration corridor, adjacent to the ladies toilet. The room is kept for the sole use of administering first aid and medical needs and requirements. It will be kept well stocked and in good order.

First aid kits will be located across the school in:

- each classroom
- the Medical Room
- the Staff Room
- the Site Agent Office
- PE office
- KS1 and KS2 Halls

The kits are stored in the green first aid bumbags and contain the following items:

- waterproof plasters
- sterile dressings
- forehead thermometer
- gauze
- microporous tape
- burns cool sachets
- bandage
- safety pins
- scissors
- sterile gloves
- dressing pads
- face shield
- emergency blanket
- alcohol gel
- eye pad
- finger dressing

When going out on trips, the following items are added to the first aid kits

- antiseptic wipes
- single use ice pack

These kits will be restocked by the School Medical Officer half termly. It is the responsibility of the class staff to keep the bags well stocked between those times. These kits will be kept in **green bags**, which will also hold a folder with first aid information and accident reporting sheets. They must be kept in a cupboard clearly marked with a white cross on a green background. These bags will also contain specific medical resources for children in that class, such as inhalers and epi-pens or creams, along with the correct documentation for these.

In addition to this, **yellow bags** will contain the medical equipment of children on a care plan. They will consist of the child's individual care plan and any medical equipment that the child needs. Adults administering support to children with care plans would have received specific training from the appropriate medical professionals.

Class adults must ensure both the green and yellow bags are accessible at all times and that these bags accompany the children during all of their curricular activities, including at break and lunchtimes and on any offsite trips, events or sporting activities. The bags must be held by the teacher or TA at all times and not be left unattended as it contains confidential information and may also contain items that could be harmful to other children, such as medication and sharps.

Information and Notices

Each classroom has a labelled cupboard containing their first aid kit. In addition to this, a full list of first aiders will be displayed by the phone or door in each classroom to enable people to access support quickly in the case of an emergency. Lists of first aiders will also be prominently displayed in:

- Staff Room
- Common Room
- Next Steps
- main corridors
- all indoor locations where physical activity takes place

Information regarding St Matthew's first aid provision will be included in the induction process for all new members of staff and any other adults who are regularly in school.

In addition to this all classrooms will also have an emergency card. In the event of an emergency where the adult(s) in the room cannot leave a child, another child can be sent with the emergency card to summon help from a nearby classroom or the Medical Room.

Automated External Defibrillators (AED)

The school has an AED which is located on the external wall opposite the staffroom (under the canopies). This is clearly marked with a standard sign for AEDs. There is also a public AED located on our school site, on the external wall by the main office. The management and use of these is in-line with the guidance outlined in "Automated External Defibrillators (AEDs) A Guide for Schools" (Oct 2019).

Although a number of key staff members have been trained in the use of the AED, we recognise that these are designed to be administered by any bystander on the advice of 999. Wherever

possible a trained staff member would be involved in the deployment of this, however treatment would not be delayed if a trained member was not on the scene of the emergency.

The guidance states:

There are four stages to the chain of survival, and these should happen in order. When carried out quickly, they can drastically increase the likelihood of a person surviving a cardiac arrest.

Therefore this is the order of actions that St Matthew's staff are expected to follow

They are:

1. Early recognition and call for help. Dial 999 to alert the emergency services. The emergency services operator can stay on the line and advise on giving CPR and using an AED. *This would be the vital first step and staff would follow the directions given by the 999 operator/emergency service staff*
2. Early CPR – to create an artificial circulation. Chest compressions push blood around the heart and to vital organs like the brain. If a person is unwilling or unable to perform mouth-to-mouth resuscitation, he or she may still perform compression-only CPR. *This is carried out on the guidance of 999 operator/ /emergency service staff*
3. Early defibrillation – to attempt to restore a normal heart rhythm and hence blood and oxygen circulation around the body. Some people experiencing a cardiac arrest will have a 'non-shockable rhythm'. In this case, continuing CPR until the emergency services arrive is paramount. *This is carried out on the guidance of 999 operator /emergency service staff*
4. Early post-resuscitation care – to stabilise the patient. *This is provided by paramedics. Unless the emergency services have been notified promptly, the person will not receive the post-resuscitation care that they need to stabilise their condition and restore their quality of life.*

To support the use of the AED, the School Medical Officer will deliver a short general awareness briefing annually. A Resuscitation Action Plan has also been formulated to facilitate a swift response to cardiac arrest. This is shared with all staff at awareness briefings and a copy is stored beside the AED. Additionally, this can also be found in the staff room, the meeting room, the front office and the Medical Room.

The School Medical Officer is responsible for maintenance, storage and ordering of supplies for the AEDs.

Hygiene and Infection Control

All staff will:

- follow basic hygiene procedures
- be made aware as to how to take precautions to avoid infections
- have access to single use disposable gloves
- have access to handwashing facilities

- wear gloves at all times when dealing with blood or other bodily fluids, or when disposing of dressings or other potentially contaminated equipment

All sharps/needles **must** be disposed of in an authorised and designated 'yellow sharps box' which can be found in the medical room.

All supplies used with blood or bodily fluids must be disposed of in the yellow bin in the Medical Room.

Reporting Accidents and Injuries

All accidents and injuries to children and adults will be recorded in a written or electronic form and such records will be kept for a minimum of three years. All accident reports must be filled out, or countersigned by a qualified first aider (where a first aider has been called).

The record of first aid treatment given by first-aiders and other appointed persons will include:

- the date, time and location at which the incident occurred
- the first name and class of the injured or unwell person
- details of the injury/illness and what first aid was given
- what happened to the pupil or adult immediately afterwards (e.g. went home, went back to class etc.)
- the name and signature of the individual dealing with the incident (if the individual is not a first-aider the account must be countersigned by a first-aider)

All records of accidents will be reported on the Accident Log in individual classes (see appendix 1). At the end of each half term these will be given to the School Medical Officer to be kept in a central register.

All incidents will be reported to parents/carers via an accident at school 'Medical Attention Note' (see appendix 2) informing them about the incident. If a child sustains a significant injury then the parent/carers will be contacted and informed verbally also. This can be done by the School Medical Officer or the main office. In the case of a serious accident, involving outside medical professionals or services, parents/carers will be contacted immediately to inform them. If no parent/carer is available and the pupil requires urgent hospitalisation, a member of staff will accompany the child in the ambulance and school will make arrangements for parents/carers to meet them at the hospital.

Reporting Accidents to the HSE

The following types of accidents will be reported to the HSE as required under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR):

- accidents resulting in loss of life or major injury
- accidents that prevent a person from undertaking their normal work/activity for more than three days
- any accident that requires hospitalisation
- any accident that results in a referral to a medical professional

These accidents will be reported by the School Medical Officer. Any staff involved in a reportable incident, in any capacity, may be asked to provide a written report of what happened. This is to ensure that the accident can be reported accurately.

Additional Medical Information

Care Plans within School

In addition to basic first aid we have a number of children in school with medical healthcare plans for various reasons. Three copies of each care plan are kept in school; one in the Medical Room (master copy), one in the class medical/SEND folder and one in the classroom in the child's yellow bag. The School Medical Officer is trained to meet the needs of all of these children. Other members of staff (usually the child's class teacher/ teaching assistant) will also be fully trained to meet the needs of the child. **Only staff who have received training on the care plans, from appropriate medical professionals, should be implementing the care plan.** Care plans must be read and signed by:

- the School Medical Officer
- a member of the Senior Leadership Team
- the child's class teacher and TA
- any other staff directly involved in meeting the child's educational needs (e.g. Next Steps staff, PE Team, EAL Team, Cover Supervisor)

Any queries should be discussed with the School Medical Officer. Should back up or help regarding a child on a care plan be needed, a list of trained individuals can be found in the classroom accident file.

Emergency Medication

The school has an emergency epipen, inhaler and our own bottle of antihistamine which are all kept in the Medical Room. Any children who have medication outlined in a care plan are expected to have their own supply in school. Wherever possible we would use the child's own medication, however in the event of this having expired or being unavailable for any reason, the school's emergency items are available for use. **Parents/ Carers are asked for written consent regarding the use of the emergency inhaler and emergency epipen annually. Verbal consent must be sought before administering these. However, in the event of an emergency, these would also be administered on the direction of 999 staff.** Any administration of these must be documented and reported to parents in written form.

Asthma

Children with asthma must have an inhaler and a spacer in school to be used as needed. These children should also have an asthma care plan from either the GP or the Asthma Nurse Specialist in school. As a school, we have an emergency inhaler that can be used with parental consent, in the event that the child's inhaler is not in school, has run out, is not available etc. As detailed above, consent **must** be gained before the inhaler is given to any child and the administration must be documented and reported to parents in written form. Consent will be sought on an annual basis. Parents will be informed anytime the emergency inhaler has been administered and advised to ensure their child brings a new inhaler into school. The emergency inhaler can be found in the Medical Room.

In addition to this, children who require an inhaler seasonally or for any other reason such as allergy or wheeze should also have their own inhaler and spacer in school.

Monitoring arrangements

This policy will be reviewed by Natalie Crawford (Assistant Head for Inclusion) every 2 years or earlier as needed.

At every review, the policy will be approved by the Headteacher.

Appendices

1. Accident Log
2. Medical Attention Note

Appendix 2

ST MATTHEW'S PRIMARY SCHOOL

Medical Attention Note



Today your child was treated for a.....

Graze		Cut	
Bump		Bruise	
Twisted ankle		Other	

They were injured on their.....

Head		Hand	
Face		Leg	
Arm		Knee	
Foot		Other	

They were treated with a.....

Cold compress	
Antibacterial wipe/Cleaned	
Plaster	
Elevation/Rest	
Other	

Additional comments

Child's name.....

Class..... Date..... Time.....

If your child has had a head injury and you become concerned, please seek medical advice.

Please see your child's teacher if you would like more information on an injury.