First Aid Policy

Written by	Reviewed and Ratified by Governors	Shared with Staff	Last Updated	Review Cycle	Next Review due
Polly Ross, Headteacher	October 2026	September 2026 – INSET Day	September 2026	1 year	September 2027

1.0 Statement of intent

1.1 Shefford Lower School is committed to providing emergency first aid provision in order to deal with accidents and incidents affecting staff, pupils and visitors. The arrangements within this policy are based on the results of a suitable and sufficient risk assessment carried out by the school in regard to all staff, pupils and visitors.

The school will take every reasonable precaution to ensure the safety and wellbeing of all staff, pupils and visitors.

1.2 This policy aims to:
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

1.3 Nothing in this policy will affect the ability of any person to contact the emergency services in the event of a medical emergency. For the avoidance of doubt, staff should dial 999 in the event of a medical emergency before implementing the terms of this policy and make clear arrangements for liaison with ambulance services on the school

2.0 Legal framework

This policy is based on the statutory framework for the Early Years Foundation Stage, advice from the Department for Education (DfE) 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
- The 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

- Keeping Children Safe in Education (KCSIE) 2026, which came into force on 1 September 2026
- The statutory framework for the Early Years Foundation Stage (EYFS)
- The Health and Safety (First-Aid) Regulations 1981
- The Management of Health and Safety at Work Regulations 1999
- The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013
- The School Premises (England) Regulations 2012
- All relevant guidance on allergy management and anaphylaxis in schools

2.2 The policy is implemented in conjunction with the following school policies:

- Health and Safety Policy
- Administering Medication Policy
- Supporting Pupils with Medical Conditions Policy
- Behaviour Policy
- Child Protection and Safeguarding Policy
- Lone Working Policy
- Risk assessment policy
- Educational Visits and School Trips Policy
- Allergies Policy
- Safer Recruitment Policy
- RSHE Policy
- Anti-Bullying Policy
- Equality and Diversity Policy

3. Roles and responsibilities

At least 1 person who has a current paediatric first aid (PFA) certificate must be on the premises at all times when children are present and must accompany children on outings. The school will have a sufficient number of suitably trained first aiders to care for employees, in case they are injured at work.

3.1 Appointed person(s) and first aiders

The school's appointed persons are The Deputy Headteacher, Phase Leader and Office Administrator. They are responsible for:

- Taking charge when someone is injured or becomes ill
- Making sure there is an adequate supply of medical materials in first aid kits, and replenishing the contents of these kits
- Making sure 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 home to recover, where necessary
- Filling in an accident report on the same day as, or as soon as is reasonably practicable, after an incident
- Keeping their contact details up to date

Our school's appointed person(s) and/or First Aiders are listed in the office. Their names will also be displayed prominently around the school site.

3.1 The governing board is responsible for:

- The overarching development and implementation of this policy and all corresponding procedures.

FINAL

- Ensuring that the relevant risk assessments, and assessments of the first aid needs of the school specifically, have been conducted.
- Ensuring that there is a sufficient number of appointed first aiders within the school based upon these assessments.
- Ensuring that there are procedures and arrangements in place for first aid during off-site or out-of-hours activities, e.g. educational visits or parents' evenings.
- Ensuring that insurance arrangements provide full cover for any potential claims arising from actions of staff acting within the scope of their employment.
- Ensuring that appropriate and sufficient first aid training is provided for staff, and ensuring that processes are in place to validate that staff who have undertaken training have sufficient understanding, confidence and expertise in carrying out first aid duties.
- Ensuring that adequate equipment and facilities are provided for the school site.
- Ensuring that first aid provision for staff does not fall below the required standard and that provision for pupils and others complies with the relevant legislation and guidance.
- Ensuring that an 'appointed person' is selected from amongst staff to take the lead in first aid arrangements and procedures for the school.

3.2 The headteacher is responsible for:

- The development and implementation of this policy and its related procedures.
- Ensuring that all staff and parents are made aware of the school's policy and arrangements regarding first aid.
- Ensuring that all staff are aware of the locations of first aid equipment and how it can be accessed, particularly in the case of an emergency.
- Ensuring that all pupils and staff are aware of the identities of the school first aiders and how to contact them if necessary.

3.3 Staff are responsible for:

- Ensuring that they have sufficient awareness of this policy and the outlined procedures, including making sure that they know who to contact in the event of any illness, accident or injury.
- Securing the welfare of the pupils at school.
- Making pupils aware of the procedures to follow in the event of illness, accident or injury.

3.4 First aid staff are responsible for:

- Completing and renewing training as dictated by the governing board.
- Ensuring that they are comfortable and confident in administering first aid.
- Ensuring that they are fully aware of the content of this policy and any procedures for administering first aid, including emergency procedures.
- Keeping up to date with government guidance relating to first aid in schools.

3.5 The appointed person is responsible for:

- Overseeing the school's first-aid arrangements.
- Taking charge when someone is injured or becomes ill.
- Looking after the first-aid equipment, e.g. restocking the first aid container.
- Ensuring that an ambulance or other professional medical help is summoned when appropriate.
- Calling the emergency services where necessary.
- Maintaining injury and illness records as required.
- Partaking in an appointed persons course, emergency first aid training, first aid at work, and refresher training where appropriate, to ensure they have knowledge of:
    - What to do in an emergency.

FINAL

- How to assess and monitor a casualty.
- First aid for the unconscious casualty.
- First aid for someone who is having a seizure.
- Maintaining injury and illness records as required.
- Paediatric first aid.

3.6 EYFS-Specific First Aid Requirements

In accordance with the statutory framework for the Early Years Foundation Stage (EYFS), the school will ensure that:

- At least one person who has a current Paediatric First Aid (PFA) certificate is on the premises and available at all times when EYFS children are present
- At least one person with a current PFA certificate accompanies EYFS children on all outings
- There is at least one trained first aider in each EYFS classroom

The school currently maintains at least 4 members of staff with current and full Paediatric First Aid (PFA) certificates to ensure adequate cover across the EYFS provision. PFA certificates will be renewed every 3 years, and the school will ensure that refresher training is arranged before certificates expire to maintain continuous compliance. In accordance with KCSIE 2026 requirements, staff and volunteers working in regulated activity in EYFS settings will not be permitted to begin work until the school has received their enhanced DBS certificate with barred list information. This requirement applies to all first aiders working in EYFS, and is managed through the school's safer recruitment procedures as set out in the Safer Recruitment Policy. The school ensures a paediatric first aider is in the room whenever children are eating.

The school will maintain a register of all EYFS first aiders, including:

- Names and roles
- Date of PFA certification
- Expiry date of certification
- Date of last DBS check

This register will be reviewed termly by the appointed person to ensure continuous compliance with EYFS requirements.

4. First aid provision

4.1 The school will routinely re-evaluate its first aid arrangements through the First Aid Risk Assessment at least every 2 years, to ensure that these arrangements continue to be appropriate for hazards and risks on the school premises, the size of the school, the needs of any vulnerable individuals onsite, and the nature and distribution of pupils and staff throughout the school.

4.2 The school will have suitably stocked first aid boxes in line with the assessment of needs. Where there is no special risk identified in the assessment of needs, the school will maintain the following minimum provision of first aid items:

- A leaflet giving general advice on first aid
- 20 individually wrapped sterile adhesive dressings, of assorted sizes
- 2 sterile eye pads
- 2 individually wrapped triangular bandages, preferably sterile
- 6 safety pins
- 6 medium-sized individually wrapped sterile unmedicated wound dressings
- 2 large-sized individually wrapped sterile unmedicated wound dressings
- 3 pairs of disposable gloves

4.3 All first aid containers will be identified by a white cross on a green background.

FINAL

4.4 The appointed person will routinely examine the contents of first aid boxes, including any mobile first aid boxes for offsite use – these will be frequently checked and restocked as soon as possible after use. Items will be safely discarded after the expiry date has passed.

In addition to standard first aid supplies, the school will ensure that:

- Emergency medication for pupils with known medical conditions (e.g. EpiPens for pupils with severe allergies, inhalers for pupils with asthma) is stored in accessible locations and clearly labelled
- Spare EpiPens are available for emergency use in accordance with the school's Allergies Policy
- All first aid boxes in EYFS settings are checked weekly to ensure compliance with EYFS requirements
- First aid supplies suitable for young children are available in EYFS areas

4.5 First aid boxes are in the following areas:

- The school office
- In every classroom
- First aid room

5. First aiders and appointed persons

5.1 The main duties of first aiders will be to administer immediate first aid to pupils, staff or visitors, and to ensure that an ambulance or other professional medical help is called when necessary.

5.2 The school will ensure that all first aiders hold a valid certificate of competence, issued by a HSE-approved organisation, and that refresher training and retesting of competence is arranged for first aiders within the school before certificates expire.

5.3 The school will be mindful that many standard first aid at work training courses do not include resuscitation procedures for children, and will consequently ensure that appropriate training is secured for first-aid personnel where this has not already been obtained.

5.4 First aiders will ensure that their first aid certificates are kept up-to-date through liaison with the SBM.

5.5 Each classroom's first aiders will be responsible for ensuring all first aid kits are properly stocked and maintained. The appointed person will be responsible for maintaining supplies.

5.6 First aid notices will be clearly displayed throughout the school with information on the names and locations of first aiders to ensure that pupils and staff know who they must contact in the event of illness or injury.

5.7 As a school, we aim to have a minimum of 3 First Aid Trained Staff in each Key Stage though it is common practice to have more than this as most staff receive first aid training. Current trained staff members are listed on the poster, which is visible around school and in the school office. This poster is updated annually. The school delivers 4 levels of first aid training detailed within the table below. Our first aid training meets statutory requirements for schools and early years providers.

FINAL

Level of training	Who receives this	Details	Accrediting body
Basic first aid awareness	All staff	Short bite sized training session on INSET day with key reminders of basic first aid Allergy awareness and recognising anaphylaxis Mental health warning signs Serious violence awareness	This is awareness training delivered in school by school staff
First aid training	Most teachers and Teaching assistants	1 day in person Schools First Aid Course (including epi-pen administration) EpiPen administration Allergy awareness	delivered by St Johns Ambulance
Paediatric first aid training	Most staff working in early years	12 hour Level 3 Paediatric & Infant First Aid Course	delivered by KH First Aid Training
Full first aid at work training (including emergency first aid)	A minimum of 2 designated members of staff	3 day course attended by SLT	delivered by St Johns Ambulance
Mental health first aid	Designated senior mental health first aider (Lorraine Freeman) and other interested staff	Mental Health First Aid (MHFA) course covering: - Recognising mental health problems - Providing initial support - Signposting to appropriate help	Accredited MHFA training provider
Allergy and anaphylaxis training	All staff working with children with known severe allergies	Specific training on: - Recognising anaphylaxis - Administering adrenaline auto-injectors - Emergency procedures for specific pupils	Delivered by school nurse or healthcare professional, or accredited training provider

5.8 The school will ensure that there is always a sufficient number of first-aid personnel available on site at all times to provide adequate cover to all areas of the school.

5.9 In line with government guidance, and taking into account staff to child ratios, the school will ensure that there is at least 4 members of staff with a current and full Paediatric First Aid (PFA) certificate on the premises and available at all times when pupils are present, and accompanying pupils on any and all outings taken. There will be a trained member of staff in each EYFS classroom.

5.10 All staff members will be made aware that agreeing to become a first aider for the school is strictly on a voluntary basis and that they should never feel pressured to take on this role.

5.11 When selecting first aiders, the school will follow the criteria laid out in government guidance, considering the individual's:

- Reliability and communication skills.
- Aptitude and ability to absorb new knowledge and learn new skills.

FINAL

- Ability to cope with stressful and physically demanding emergency procedures.
- Availability to respond immediately to an emergency.

5.12 The school will ensure that first aid training courses cover mental health in order to help them recognise the warning signs of mental ill health and to help them develop the skills required to approach and support someone, while keeping themselves safe. Pupils will be supported in accordance with the school's Social, Emotional and Mental Health (SEMH) approach. The school will have a suitably trained member of staff who is a designated mental health first aider. This member of staff is Duncan Wakefield. The school also has a strategic lead for mental health and wellbeing. This person is Lorraine Freeman.

5.13 - Allergy Awareness and Anaphylaxis Training

The school recognises that allergic reactions, including anaphylaxis, can be life-threatening medical emergencies requiring immediate first aid response. All staff will receive basic allergy awareness training as part of their induction and ongoing safeguarding training. This training will cover:

- Common allergens and allergic reactions
- Recognising the signs and symptoms of an allergic reaction
- The difference between mild, moderate and severe allergic reactions
- When to call 999
- The location of emergency medication (e.g. EpiPens)
- How to access Individual Healthcare Plans (IHPs) for pupils with known allergies

Staff who work directly with children who have known severe allergies will receive specific training on:

- Recognising anaphylaxis (severe allergic reaction)
- Administering adrenaline auto-injectors (EpiPens or similar devices)
- Emergency procedures specific to the individual child's needs as set out in their IHP
- Avoiding cross-contamination and managing allergen exposure risks

The school will maintain an up-to-date register of all pupils with known severe allergies, which will be accessible to all staff and clearly displayed in:

- The school office
- The staff room
- Each classroom where the child is taught
- The school kitchen

Individual Healthcare Plans (IHPs) will be developed for all pupils with severe allergies in partnership with parents/carers and relevant healthcare professionals. These plans will include:

- Details of the child's specific allergies
- Symptoms to watch for
- Emergency medication and where it is stored
- Step-by-step emergency procedures
- Emergency contact details

Emergency medication (e.g. EpiPens) will be:

- Stored in an accessible location known to all staff (not locked away)
- Clearly labelled with the child's name
- Checked regularly for expiry dates by the appointed person
- Taken on all off-site visits where the child is present

In the event of a suspected anaphylactic reaction, staff will:

1. **Call 999 immediately** and state "anaphylaxis" when speaking to the operator
2. Administer the child's adrenaline auto-injector (EpiPen) if trained to do so
3. Lay the child flat (or sit them up if they are having breathing difficulties)
4. Call for a first aider and the DSL
5. Contact the child's parents/carers
6. If there is no improvement after 5 minutes, administer a second dose of adrenaline (if available)
7. Stay with the child until the ambulance arrives
8. Record the incident in accordance with section 8 of this policy

Staff will never delay calling 999 in the event of a suspected anaphylactic reaction, even if they are unsure whether it is anaphylaxis. The school will review its allergy management procedures annually and following any allergic reaction incident to ensure continuous improvement.
Deliberately exposing a child to a known allergen or trigger to induce a reaction is recognised as a safeguarding violation and will be reported immediately to the Designated Safeguarding Lead (DSL).

6. Accommodation

6.1 The school's first aid room will be suitable to use as and when it is needed, and any additional medical accommodation will be available in accordance with the school's first aid needs assessment.
The first aid room will be used to enable the medical examination and treatment of pupils and for the short-term care of sick or injured pupils. The first aid room includes a wash basin and is situated near a toilet.
The first aid room will not be used for teaching purposes.

6.2 The first aid room will:

- Be large enough to hold an examination or medical bed.
- Have washable surfaces and adequate heating, ventilation and lighting.
- Be kept clean, tidy, accessible and available for use at all times when employees are at work.
- Have a sink with hot and cold running water.
- Be positioned as near as possible to a point of access for transport to hospital.
- Display a notice on the door which advises the names, locations and, if appropriate, the contact details of first aiders.

7. Emergency procedures

If an incident, illness or injury occurs, the member of staff in charge will assess the situation and decide on the appropriate course of action, which may involve calling for an ambulance immediately or calling for a first aider.

7.1 Managing Injuries During Physical Intervention

Where a pupil or staff member sustains an injury during the use of physical intervention or restraint:

- Immediate first aid will be provided in accordance with standard procedures
- The incident must be recorded in detail, including the circumstances leading to the restraint, the type of restraint used, duration, and any injuries sustained
- The headteacher and DSL must be informed immediately
- Parents/carers must be informed on the same day
- Any injury to the head, face, or significant injury must be reported to parents by telephone before collection
- The incident will be reviewed by the headteacher and DSL to determine whether:
    - The use of physical intervention was appropriate and proportionate
    - Staff require additional training
    - The pupil requires additional support or a behaviour plan review
    - Any safeguarding concerns have been triggered
- All such incidents will be recorded on CPOMs and reviewed as part of the school's monitoring of restrictive interventions

This is in line with the DfE's guidance on Restrictive Interventions, including the Use of Reasonable Force in Schools (2026) and the school's Behaviour Policy.

7.2 If called, a first aider will assess the situation and take charge of first aider administration. If the first aider does not consider that they can adequately deal with the presenting condition by the administration of first aid, then they will arrange for the injured person to access appropriate medical treatment without delay.

7.3 Where an initial assessment by the first aider indicates a moderate to serious injury has been sustained, or the individual has become seriously unwell, a responding staff member will call 999 immediately.

FINAL

7.4 Where necessary, a trained staff member will administer emergency help and first aid to all injured persons. The purpose of this is to keep the victim alive and, if possible, comfortable, before professional medical help arrives. In some situations, immediate action can prevent the accident from becoming increasingly serious, or from involving more victims. Where the seriously injured or unwell individual is a pupil, the following process will be followed:

- A responding staff member calls 999 immediately and follows the instructions of the operator – this may include the administering of emergency first aid.
- Where an ambulance is required, a staff member accompanies the pupil in the ambulance and calls the pupil's parent as soon as possible to inform them of the course of action taken. The staff member remains with the pupil at the hospital until a parent arrives.
- Where an ambulance is not required, but medical attention is needed, the pupil is taken to a hospital or doctor in a staff car, accompanied by at least **two** staff members – one to drive the car, and one who is a first aider, to sit with the pupil in the back seat and attend to their medical needs. The pupil's parent is called as soon as possible to inform them that this course of action has been taken, and at least one of the staff members remains with the pupil at the hospital or doctor's office until a parent arrives.
- Where a parent has chosen to take a child straight to hospital support will be offered by sending a first aider with the parent or by two members of staff driving the parent to the hospital.
- The school will ensure that no further injury can result from any incidents that occur, either by making the scene of the incident safe, or, if they are fit to be moved, by removing injured persons from the scene.
- Responding staff members will see to any pupils who may have witnessed the incident or its aftermath and who may be worried or traumatised, despite not being directly involved. These pupils will be escorted from the scene of the incident and comforted. Younger or more vulnerable pupils may need parental support to be called immediately.

7.5 Once the above action has been taken, details of the incident will be reported promptly to:

- The headteacher.
- The parents of the victim(s).

7.6 Responding to an incident can be stressful for the first aider. Following the incident, the first aider may require support such as a debrief from any ambulance crew on scene, an appointment with their GP, or mental health support from external helplines and websites located at the bottom of the government page 'Promoting and supporting mental health and wellbeing in schools and colleges'.

7.7 - Mental Health Emergencies

The school recognises that mental health problems can develop into safeguarding concerns and that staff have an important role in promoting good mental wellbeing, preventing the onset of mental illness, and identifying early those who may be experiencing problems.

Staff should be aware that mental health concerns requiring a safeguarding response may include:

- Self-harm
- Suicidal ideation (thoughts about suicide)
- Risk of suicide
- Severe anxiety or panic attacks
- Eating disorders
- Significant behavioural changes that may indicate abuse, neglect or exploitation

Warning signs that staff are well placed to recognise include:

- Significant changes in behaviour, mood or personality
- Withdrawal from friends, family or usual activities
- Difficulty sleeping or changes in sleep patterns
- Changes in eating habits or weight

- Physical signs of self-harm (e.g. cuts, burns, bruises)
- Expressing feelings of hopelessness, worthlessness or having no reason to live
- Giving away possessions
- Talking about death or suicide
- Increased risk-taking behaviour
- Difficulty concentrating or decline in academic performance
- Frequent physical complaints (headaches, stomach aches) with no clear medical cause

If a member of staff has concerns about a pupil's mental health that also constitutes a safeguarding concern, they should:

- Immediately inform the Designated Safeguarding Lead (DSL) or deputy DSL
- Not leave the child alone if there is an immediate risk
- Complete a safeguarding concern form on CPOMs as soon as possible
- Follow the school's child protection procedures

In an emergency where a child is in immediate danger, staff should:

- **Call 999 immediately** if the child has seriously harmed themselves, is threatening to harm themselves imminently, or has taken an overdose
- Take the child to A&E if they are in immediate danger and it is safe to do so
- Stay with the child and ensure they are supervised at all times
- Inform the DSL and headteacher as soon as possible
- Contact the child's parents/carers unless doing so would place the child at greater risk

The school has a designated senior lead for mental health and wellbeing, **Lorraine Freeman**. The school also has two trained mental health at work first aiders **Julia Parry** and **Victoria Joyce**, who can provide initial support and signposting for pupils and staff experiencing mental health difficulties. The school also has a staff wellbeing lead, **Abigail Pates**.

All mental health interventions offered by the school will be safe, effective and appropriate for the child's needs. Where available, staff will make use of support from the school's Mental Health Support Team (MHST).

For pupils requiring ongoing mental health support, this will be managed in accordance with the school's Social, Emotional and Mental Health (SEMH) approach and may include referrals to specialist services such as CAMHS (Child and Adolescent Mental Health Services).

Staff who respond to mental health emergencies may require support following the incident. The school will provide appropriate debriefing and access to support services as needed.

7.8 - Serious Violence Incidents

The school recognises that serious violence is a safeguarding concern. Serious violence may include physical assault causing significant injury, carrying or using weapons, or gang-related violence.

If a member of staff has any concerns about a child carrying, threatening with, or using a weapon, or expressing intent to do so, they must:

- Immediately report the concern to the DSL or deputy DSL
- Not attempt to search the child or confiscate the weapon themselves unless it is safe to do so
- Ensure the safety of all pupils and staff in the immediate vicinity

The DSL will assess the immediate risk, consider whether to call the police (999 if there is immediate danger), and record the incident on CPOMs.

The school will provide early, evidence-based support for children considered at risk of serious violence, including targeted mentoring, therapeutic support, and multi-agency working with police and social care.

FINAL

For further information, see the school's Behaviour Policy and Child Protection and Safeguarding Policy.

7.9 - Prejudice-Based Incidents

The school recognises that children may experience prejudice-based harm, including racism, faith-based prejudice, misogyny/misandry, homophobia, biphobia, transphobia, or disability-based discrimination.

Where a child discloses or staff observe prejudice-based harm, this should be:

- Taken seriously and treated as a safeguarding concern
- Reported to the DSL or deputy DSL
- Recorded on CPOMs
- Addressed in accordance with the school's Child Protection and Safeguarding Policy and Behaviour Policy

The school will create a culture of zero tolerance to all forms of discriminatory behaviour through preventative education, clear behaviour expectations, and staff training.

8. Reporting accidents and record keeping

8.1 In the event of incident or injury to a pupil, a parent will be informed as soon as practicable. In the event of a serious injury or an incident requiring emergency medical treatment, the pupil's class teacher will telephone the pupil's parent as soon as possible. Parents will be informed in writing of any injury to the head, whether minor or major, and be given guidance on the action to take if symptoms develop.

8.2 Any head, face or significant injury will be reported to the parent or carer by phone call before pick up. This includes:

- Any injury requiring hospital treatment
- Any injury causing loss of consciousness
- Any fracture or suspected fracture
- Any deep cut requiring stitches
- Any injury to the eyes, face or head

8.3 A list of emergency contacts will be kept at the school office and on CPoms.

8.4 The appointed person will ensure that records are kept of any injuries, accidents or illnesses, as well as any first aid treatment that is given – this will include:

- The date, time and place of the incident.
- The name and class of the injured or ill person.
- Details of the injury or illness and what first aid was given.
- Details of what happened to the person immediately afterwards, e.g. whether they were sent home or went back to class.
- The name and signature of the first aider or person dealing with the incident.

8.5 The headteacher will ensure that any injury or accident that must be reported to the HSE or LA under RIDDOR obligations is reported in a timely and detailed manner.

8.6 All records will be filed and stored in line with the Records Management Policy and the Data (Use and Access) Act 2025.

8.7 Reporting Mental Health and Serious Violence Incidents

In addition to standard accident and injury reporting, the school will ensure that:

- All mental health concerns that constitute safeguarding issues are recorded on CPOMs and reported to the DSL

- All incidents involving weapons, threats of violence, or serious violence are recorded on CPOMs and reported to the DSL immediately
- Where appropriate, incidents are reported to external agencies including police, children's social care, or the HSE
- Patterns and trends in mental health concerns and serious violence incidents are monitored by the DSL and reported to the governing board termly

Records of mental health and serious violence incidents will be kept securely and in accordance with the school's Records Management Policy and GDPR requirements.

Reporting to the HSE

The Office Manager will keep a record of any accident that results in a reportable injury, disease, or dangerous occurrence as defined in the RIDDOR 2013 legislation (regulations 4, 5, 6 and 7).
The Office Manager will report these to the HSE as soon as is reasonably practicable and in any event within 10 days of the incident – except where indicated below. Fatal and major injuries and dangerous occurrences will be reported without delay (i.e. by telephone) and followed up in writing within 10 days.

9. Offsite visits and events

9.1 Before undertaking any offsite visits or events, the teacher organising the trip or event will assess the level of first aid provision required by undertaking a suitable and sufficient risk assessment of the visit or event and the persons involved.

9.2 The school will take a first aid kit on all offsite visits which contains at a minimum:

- A leaflet giving general advice on first aid.
- 6 individually wrapped sterile adhesive dressings.
- 1 large sterile unmedicated dressing.
- 2 triangular bandages individually wrapped and preferably sterile.
- 2 safety pins.
- Individually wrapped moist cleansing wipes.
- 2 pairs of disposable gloves.

9.3 Additionally, the school will ensure that all large vehicles and minibuses have a first aid box readily available and in good condition which contains:

- 10 antiseptic wipes, foil packed.
- 1 conforming disposable bandage that is not less than 7.5cm wide.
- 2 triangular bandages.
- 1 packet of 24 assorted adhesive dressings.
- 3 large sterile unmedicated ambulance dressings that are not less than 15x20cm.
- 2 sterile eye pads, with attachments.
- 12 assorted safety pins.
- 1 pair of non-rusted blunt-ended scissors.

9.4 For more information about the school's educational visit requirements, please see the Educational Visits and School Trips Policy. There will always be at least 1 first aider with a current paediatric first aid (PFA) certificate on school trips and visits for Early Years children, as required by the statutory framework for the Early Years Foundation Stage (EYFS). There is always a first aider on trips for all children of any age.

9.5 First Aid Provision for Pupils on Part-Time Timetables or Attending Alternative Provision

Where a pupil attends school on a part-time timetable or attends alternative provision (AP) as part of their educational programme:

FINAL

- The school will ensure that appropriate first aid provision is in place during the hours the pupil attends school
- Where a pupil has specific medical needs covered by an IHP, the IHP will be reviewed to ensure it reflects the part-time timetable arrangement
- Parents/carers remain responsible for the pupil's medical needs during the hours they are not in school
- Where a pupil's part-time timetable is due to medical or mental health needs, the school will work with healthcare professionals to ensure appropriate support is in place during school hours
- Any medication required during school hours will be stored and administered in accordance with section 10 of this policy

Alternative Provision:

- Where a pupil attends AP (either full-time or part-time), the school will ensure that the AP provider has appropriate first aid arrangements in place
- Before any AP placement begins, the school will:
    - Confirm that the AP provider has appropriate first aid trained staff
    - Share the pupil's IHP (if applicable) and any relevant medical information with the AP provider, with parental consent
    - Agree protocols for how medical emergencies will be managed and communicated between the school and AP provider
    - Ensure the AP provider has emergency contact details for parents/carers and the school
- Where a pupil requires emergency medication (e.g. EpiPen, inhaler), the school will work with parents/carers and the AP provider to ensure:
    - The pupil has their own prescribed medication with them at the AP
    - The AP provider has staff trained to administer emergency medication
    - Clear protocols are in place for emergencies
- The school will maintain regular contact with the AP provider to monitor the pupil's wellbeing and any medical or first aid incidents
- Any serious medical incidents at the AP will be reported to the school immediately, and the school will inform parents/carers and record the incident in accordance with section 8 of this policy

Safeguarding:

- The DSL will maintain oversight of all pupils attending AP and will be informed of any medical or first aid concerns
- This is in line with our Attendance Policy and Safeguarding and Child Protection Policy

10. Storage of medication

10.1 Medicines will be stored securely and appropriately in accordance with individual product instructions, save where adults working with individual pupils have been given responsibility for keeping such equipment with them. Medicines will be stored in the original container in which they were dispensed, together with the prescriber's instructions for administration, and properly labelled, showing the name of the patient, the date of prescription and the date of expiry of the medicine.

10.2 Medicine brought in by pupils will be returned to their parents for safe disposal when they are no longer required or have expired.

10.3 An emergency supply of medication will be available for pupils with medical conditions that require regular medication or potentially lifesaving equipment, e.g. an EpiPen.

10.4 Parents will advise the school when a child has a chronic medical condition or severe allergy so that an IHP can be implemented and staff can be trained to deal with any emergency in an appropriate way. Examples of this include epilepsy, diabetes and anaphylaxis. A disclaimer will be signed by the parents in this regard.

10.5 Pupils will have any medication stored and, where appropriate administered, in accordance with their EHC plans and the school's Administering Medication Policy.

FINAL

10.6 First Aid Records and Attendance
The school recognises that first aid records may be relevant to attendance monitoring and decision-making. The following procedures apply:

Supporting Medical Evidence for Absence:

- Where a parent reports their child absent due to illness, and the school's first aid records show the child has recently been treated for a related condition at school, this may be taken into account when determining whether the absence should be authorised
- Where a pupil has frequent absences reported as illness, but school first aid records do not show any pattern of illness or treatment at school, the Attendance Champion may request medical evidence in accordance with the Attendance Policy
- First aid staff will not be asked to provide medical evidence or diagnoses, but may be asked to confirm whether a pupil has been treated for specific symptoms at school
- All such requests will be handled sensitively and in accordance with data protection requirements

Chronic Medical Conditions and Attendance:

- Where a pupil has a chronic medical condition covered by an Individual Healthcare Plan (IHP), the school will work with parents/carers and healthcare professionals to ensure appropriate support is in place to maximise attendance
- The IHP will include clear guidance on when the pupil should remain at home due to their condition, and when they can attend school with appropriate support
- Where a pupil with a chronic condition has frequent absences, the SENCO, Attendance Champion, and school nurse will work together to review the IHP and identify any additional support needed
- In line with the Attendance Policy, the school will submit a sickness return to the Local Authority for pupils who have missed 15 or more school days due to medical reasons

Mental Health and Attendance:

- Where a pupil's absence is linked to mental health concerns, the school's mental health first aider (Duncan Wakefield) will work with the Attendance Champion, DSL, and family to develop appropriate support
- This may include reasonable adjustments, a phased return to school, or referral to external mental health services
- All such cases will be managed in accordance with section 7.7 of this policy and the school's Attendance Policy

Safeguarding Concerns:

- Where patterns of absence and/or first aid records raise safeguarding concerns (e.g. frequent injuries, fabricated or induced illness, neglect of medical needs), the DSL will be informed immediately
- This is in line with KCSIE 2026 guidance that where a clinical incident takes place at school, the DSL should work with the responsible healthcare professional to consider whether any safeguarding duty has been triggered

This approach ensures that first aid records are used appropriately to support attendance monitoring while maintaining pupil confidentiality and safeguarding.

11. Illnesses and allergies

11.1 When a pupil becomes ill during the school day, their parent will be contacted and asked to pick their child up as soon as possible.

11.2 A quiet area will be set aside for withdrawal and for pupils to rest while they wait for their parent to pick them up. Pupils will be monitored during this time.

11.3 Where a pupil has an allergy, this will be addressed via the school's Allergies Policy.

FINAL

11.4 The school will manage any emergencies relating to illnesses and allergies in accordance with the Emergency procedures section of this policy.

12. Consent

12.1 Parents will be asked to complete and sign a medical consent form when their child is admitted to the school, which includes emergency numbers, alongside details of allergies and chronic conditions – these forms will be updated at the start of each school year.

12.2 Staff will not act 'in loco parentis' in making medical decisions as this has no basis in law. Staff will always aim to act and respond to accidents and illnesses based on what is reasonable under the circumstances and will always act in good faith while having the best interests of the pupil in mind – guidelines will be issued to staff in this regard.

13. 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.

The school will arrange for first aiders to retrain before their first aid certificates expire. In cases where a certificate expires, the school will arrange for staff to retake the full first aid course before being reinstated as a first aider.

At all times, at least 2 members of staff will have a current paediatric first aid (PFA) certificate that meets the requirements set out in the Early Years Foundation Stage statutory framework. The PFA certificate will be renewed every 3 years.

14 Monitoring and review

14.1 This policy will be reviewed by the governing board, and any changes will be communicated to all members of staff.

14.2 Staff will be required to familiarise themselves with this policy as part of their induction programme. Staff will be informed of the arrangements that have been made in connection with the provision of first aid, including the location of equipment, facilities and personnel. This policy will be summarised within the Staff Handbook.

FINAL