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Policy Document

First Aid Policy

Policy Tier	2
Policy Owner	Executive Team
Ratifying Body	CEO
Approval Date	October 2026
Next Review Date	October 2027
Version Number	3.0

Applicability:

This policy applies to staff in accordance with its designated policy tier.

- Tier 1**:** Applies to all schools and centrally based staff and must be adopted in full without modification.
- Tier 2: Applies trust-wide but allows limited contextualisation to reflect individual school circumstances.
- Tier 3: Applies at school level and is approved and implemented through local governance arrangements

1.0 Arrangements for First Aid

Teachers and other staff working with pupils and students are expected to use their best endeavours at all times, particularly in emergencies, to secure the welfare of the pupils and students in education in the same way that parents might be expected to act towards their children. In general, the consequences of taking no action are likely to be more serious than those of trying to assist in an emergency.

2.0 Practice in Schools

1. First Aid slips are official legal documents and should be completed in detail. It should be very clear as to what has happened to the child and all sections of the form need to be completed
2. All first aid areas in school will have definitive names and these names will be added by staff to the cover of the first aid slips book. This way we are clear where they belong e.g. Beeches, Oaks, KS1/KS2 first aid area etc
3. Each first aid booklet for each area must be kept in that area and not have sheets ripped out to be shared across the different areas
4. Once a book of slips is completed then these will be stored in the office. The person responsible for archiving the First Aid Slip books and storing them is Ahlanah Shah for the Beeches and Farhana Zafir in the Oaks.
5. A good quality pen should be used to complete the first aid slips and the person completing the slip should apply pressure when writing to ensure that the carbon copy is clear to read
6. Make sure the time and date is recorded clearly and accurately
7. First aid books are located in the following areas EYFS, KS1, KS2 and in resource bases.

3.0 Roles & Responsibilities

First Aid Champion

The First Aid Champion is Aysha Hussain who is lined managed by the First Aid lead Clair Hollis who is responsible for:

- regularly checking resources and equipment every half term
- checking all first aid resources are within the expiry date
- completing stock checks each half term and order any necessary supplies
- liaising with first aiders
- providing each class with their own first aid box/bag
- checking the emergency Auto Adrenaline Injectors are in date
- checking the emergency inhalers (x2) and disposable spacers are in date

All first aid areas should be clearly named. Resources and equipment checked as mentioned above should be logged on a sheet that has all the areas named and signed and dated (see appendix E). These need to be kept in a named folder in the office.

First Aid Lead

The First Aid Lead is Clair Hollis and they are responsible for:

- line managing the First Aid Champion
- check when first aid qualifications expire working with the office manager to book courses
- ordering the emergency Auto Adrenaline Injectors

- ordering the emergency inhalers (x2) and disposable spacers updating medical information on the Schools Management Information System
- liaising with the school nurse and parents regarding medical needs
- arranging allergy, asthma and any other medical training for staff
- ensuring allergy, asthma and all other medication have a clear pharmacy label with the child's name and are within the expiry date and stored appropriately

Office Manager

The Office Manager is responsible for:

- arranging first aid training for staff in consultation with the First Aid Lead and First Aid Champion
- storing first aid certificates

4.0 Materials, Equipment and Facilities

The school will provide materials, equipment and facilities as set out in the DfE Guidance on First Aid in Schools.

Resources

First Aid bags, boxes and trollies

- First aid boxes/bags in classrooms are stored where they are visible and easy to access in the classroom and are clearly labelled with the class name
- All are labelled for individual classes
- First aid trollies/stations are in the playground for first aiders to access and use
- Bags are available for staff to take with them on school outings
- Responsibility to regularly check first aid boxes located in the classrooms lies with the First Aid Champion, however, staff working in the classes need to let them know if first aid boxes need replenishing. Aysha Hussain should be notified immediately and extra supplies should be requested.
- Additional first aid supplies are kept in the Beeches First Aid room and the Oaks First Aid cupboard. Only access these resources in an emergency. Always request resources from Aysha Hussain as this will then help the individual to identify what needs to be ordered
- First aid box requirements can be found within Appendix C

Medical boxes/bags

- Medical boxes contain folders with information about student's medical conditions are included within the class medical boxes. These medical boxes must be taken to the place the child/ren are at all times if they away from the class attending assemblies, PE lessons and computer sessions etc. Supply staff should be made aware of this information and this is included in the supply staff leaflet
- All medical forms for completion are available within each classroom box
- All medical resources i.e. Inhalers, Epipen, cream and medication are included within pharmacy labelled containers in each classroom box
- Prior to using any medication, the parent must meet with the First Aid Lead or Headteacher to fill in a medical form. This will be uploaded onto the school system and the class staff will be informed and all paperwork updated
- No medication should be administered to a child unless they have a condition that is life- long like diabetes/ADHD and are prescribed medication that has to be taken during the day. Staff must be trained by qualified individuals to administer this medication. The medication must be administered by two people and the time and dosage logged onto a sheet (in line with the administering medication policy and training)
- No other medication should be given

Defibrillator

- Defibrillators are kept in the Beeches Office and the Oaks Office. Training to use them is provided by the First Aid Company that delivers the First Aid Training.
- The battery in the defibrillator is checked on a monthly basis by the First Aid Lead. The pads are also checked as they have a life span too. (Appendix E) The Site Manager also checks these on a weekly basis to ensure that the light is flashing and this recorded on I am Compliant.

5.0 First Aid Incidents

Cuts

The nearest staff member to a child with a small cut deals with the matter. All open cuts should be covered after they have been treated with a sterile wipe.

All staff can treat cuts, however, a fully trained first aider must attend the pupil to give advice. Cuts should be recorded in the first aid book and parents informed with a phone call if it is more severe cut. If a plaster is applied keep an eye on the child as they may have an allergic reaction to it that the school may not be aware of.

ANYONE TREATING AN OPEN CUT SHOULD USE DISPOSABLE RUBBER GLOVES AND WEAR A DISPOSABLE APRON. The gloves and apron need to be disposed of in a clinical waste bin. If you do not have a bin, please contact Adam or Joy to support you in ordering one.

Head Injuries (the whole head, from the neck upwards) – see below

Allergic Reaction

Staff are trained to identify the signs of serious allergic reactions and in the administration of adrenaline auto injectors (AAI). In case of a less serious allergic reaction a first aider should examine the child and follow care plan instructions. Pictures are available within medical folders found located within class medical boxes of all the pupils known to have allergic reactions. All pupils with allergies wear lanyards to identify allergens. The children's AAIs are stored in each classroom medical box in clearly marked boxes. The spare AAIs are stored at the Beeches Office and the Oaks Office.

Chicken Pox and other Infectious Diseases

If a child is suspected of having chicken pox, measles etc. we will examine the child's arms or legs. Chest and back will only be checked if we are concerned. We should call a first aider and two adults should be present. The child should always be asked if it is appropriate to them if the adults check their chest and back. For the inspection of other rashes, the same procedure should be followed. If we suspect the rash to be contagious (such as scabies, impetigo, conjunctivitis) we need to inform parents and request that the child is treated before returning to school. In most cases once treatment has begun it is safe for children to return to school. If more than one child is suspected to have the same disease/rash in one class a letter should be sent home to all parents in that class, to inform them so they can be aware in case their child shows signs of having caught it and they can treat it straight away.

Head Lice

Staff must not touch children or examine them for head lice. If you suspect a child or children have head lice, the class teacher needs to inform the parents/carers. A standard letter should be sent home with all the children in that class where the suspected head lice incident is. If you have concerns about a child's head lice the school nurse (via Clair Hollis) can be contacted who is able to examine children and also give advice and guidance to parents /carers on how best to treat the condition.

Early Collection Procedure

- When a child is signed out early for any reason, this must be recorded in the inventory.
- The specific reason for early collection must be clearly stated.

Children who show symptoms of a concussion after a head injury need to be taken to hospital. The parents are to be informed and the emergency services called. A Trust accident form (Appendix D) must also be completed with a member of the Senior Leadership Team (SLT). This form along with the head injury report is reviewed by the Head Teacher and then sent by email to accidents@leightrust.co.uk by a member of SLT.

Calling the Emergency Services and Contacting Next of Kin

In case of a major accident, it is the decision of the fully trained first aider to decide if the emergency services need to be called. Staff are expected to support and assist the trained first aider in their decision. The Head Teacher must be informed if such a decision has been made even if the accident happened on a school outing. If the casualty is a child, their parents / carers should be contacted immediately and given all the information required. If the casualty is an adult, their next of kin should be called immediately. All contact numbers for children and staff are available from the school office or on the Schools Management Information System. If an ambulance is called it must NEVER be cancelled by the school if the emergency services decide to cancel the ambulance, then further advice to next steps must be sought. ANYONE can call an ambulance.

Staff Requiring First Aid

The school has a responsibility to provide first aid to all staff. When a member of staff has an accident/incident they should seek first aid from any of the qualified first aiders. All first aid administered to staff should be recorded on an accident form that can be obtained from the office and the incident must be reported to the Head Teacher. If the accident/incident results in the member of staff being taken to hospital where they receive treatment and are then absent from work for three days or more, the Head Teacher must be notified. Please also email the accident form to accidents@leightrust.co.uk. The Trust will review the accident/incident form and inform the Head Teacher if it needs to be reported to the HSE.

6.0 Head Injury Procedures

If a child bumps their head, alert the first-aider who will apply a cold compress and arrange for parent to be telephoned. Inform the parent of the accident and advise them about the child / young person's condition. Advise parents that they are welcome to visit if they would like to see the child / young person to confirm they are well. Monitor the child, complete the First aid slip for parents to sign when they arrive or at the end of day. Parents must receive a copy of the first aid slip and staff retain the carbon copy. Staff need to complete the class Head Injury Report Sheet below if the first aid slip has been removed from the book and a carbon copy will not be retained.

Insert School Logo

Head Injury Report sheet

Pupils name: _____ Class _____

The First aid slip and NHS letter with verbal advice have been given to the parents/carers.

Date:	Relationship to child:	Parent/Carer name:	Parents signature:	Member of staff name and role:	Member of staff signature:

If the child is picked up at the end of the day the member of staff in the class should have the first aid slip and explain the Head Bump Procedure

- Inform the parent of the head bump.
- Explain what first aid has been given.
- Talk the parent through each possible symptom, using the visual prompts on the first aid slip.
- Ensure this conversation is completed before the child is dismissed.

Once a book of slips is completed then these will be stored in the office. The person responsible for archiving the First Aid Slip books and storing them is Ahlanah Shah for the Beeches and Farhana Zafir in the Oaks.

It is best practice for the child to remain where they are and the First Aider go to the child, however, on many occasions the pupils will walk to the First Aid room/area. If child is unconscious or unable to stand, the first aider MUST go to the child.

First aider:

- Check the bump and apply a cold compress to the area
- Make the child as comfortable as possible.
- Alert the member of SLT on duty if you have concerns so they can support in making the 999/parent call with their mobile phone (if there is no member of SLT outside, ask someone else to alert them)
- You do not need to seek a 2nd opinion from another first aider: go with your gut and call the emergency services on 999 if you believe it is needed
- Stay with the child. If an ambulance is called, you or another trained first aider must stay with the child until they leave the premises.

Call 999 if someone displays any of these symptoms:

- been unconscious has not woken up

- difficulty staying awake or keeping their eyes open
- a fit (seizure)
- problems with their vision
- clear fluid coming from their ears or nose
- bleeding from their ears or bruising behind their ears
- numbness or weakness in part of their body
- problems with walking, balance, understanding, speaking or writing
- hit their head in a serious accident, such as a car crash
- Complains of chest pain

Other symptoms of concussion which indicate a visit to A&E is necessary include:

- been unconscious but have now woken up
- been vomiting since the injury
- a headache that does not go away with painkillers
- a change in behaviour, like being more irritable
- problems with memory
- a blood clotting disorder (like hemophilia) or take blood-thinners (like warfarin)
- had brain surgery in the past

The person making the 999 call:

- Answer the operator's questions and, if possible, make notes of the conversation
- Find out how long the ambulance is likely to take
- Before ending the call say 'Do you have any other questions you need to ask me?'
- If an ambulance is called, insist that it attends school
- Inform the parent and ask them to come to school
- Alert the office staff that an ambulance and parent has been called and explain where you are; ask a member of office staff to stand outside to direct the ambulance
- Whilst waiting, attempt to find out how the accident happened and make notes
- If the symptoms change, call 999 again

When child is collected, the parent must be given the NHS (Appendix B) Head Injuries Advice sheet.

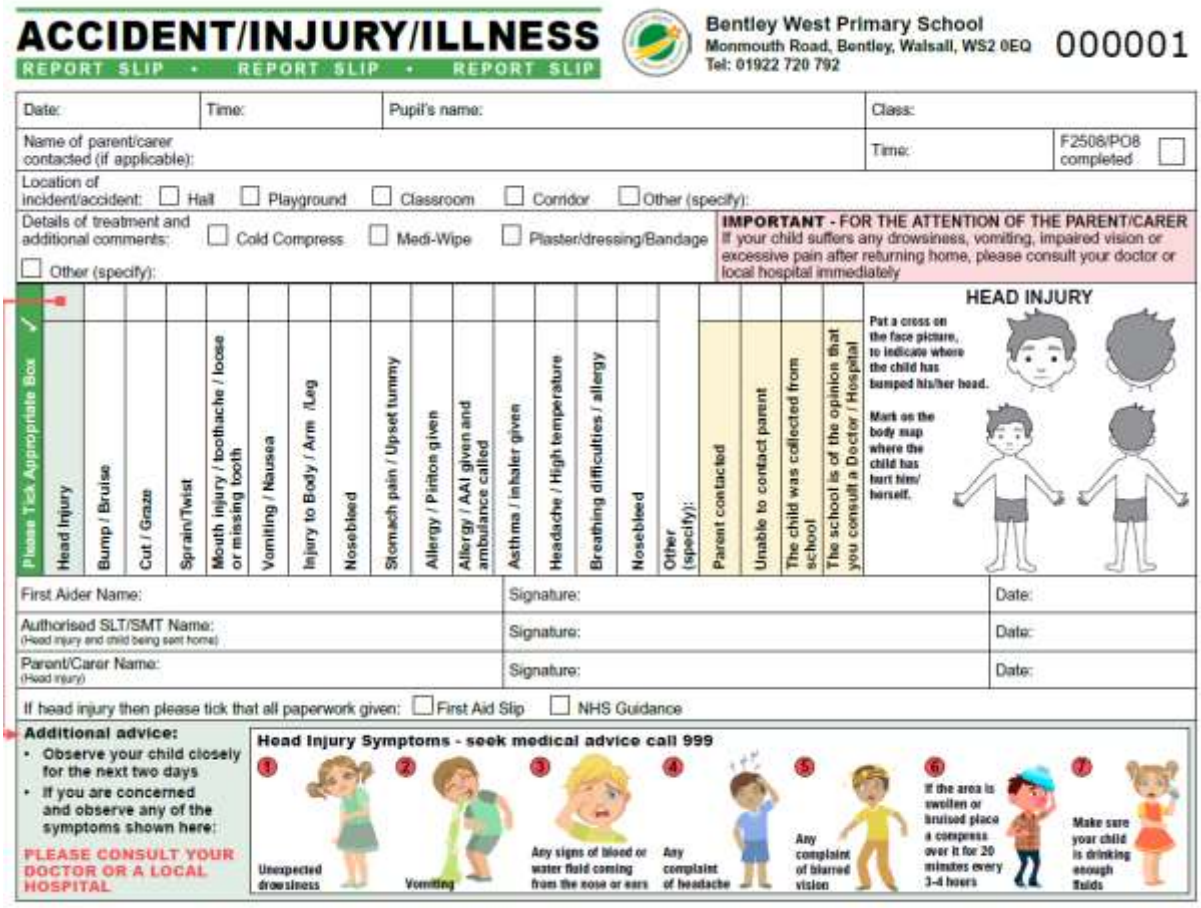
Most head injuries are not serious. Children do not usually need to go to hospital and should make a full recovery within 2 weeks.

In this case:

- Complete the First Aid Slip in full and share with the classroom staff
- Ask the office to inform the parent of the bump and ask them if they would like to collect their child to monitor them or take them to a walk-in center to be checked
- **If the child is collected, a follow up call must be made by office staff before the end of the school day (5pm) and recorded on the Schools Management Information System**

- The following day, if the child is absent, a follow up phone call should be made to the family to ask enquire about the symptoms (regardless of whether they have already phoned in with the reason).
- For very minor bumps, the child may stay in school and be monitored in class
- A First Aid slip must be completed for all head injuries even for those children that stay in school.

Appendix A: Example of a Leigh Trust First Aid Slip with clear visuals explaining symptoms to stay vigilant about after a head bump



ACCIDENT/INJURY/ILLNESS

REPORT SLIP • REPORT SLIP • REPORT SLIP

Bentley West Primary School
Monmouth Road, Bentley, Walsall, WS2 0EQ
Tel: 01922 720 792

000001

Date:	Time:	Pupil's name:	Class:	
Name of parent/carer contacted (if applicable):			Time:	F2508/PO8 completed ☐

Location of incident/accident: ☐ Hall ☐ Playground ☐ Classroom ☐ Corridor ☐ Other (specify):

Details of treatment and additional comments: ☐ Cold Compress ☐ Medi-Wipe ☐ Plaster/dressing/Bandage ☐ Other (specify):

IMPORTANT - FOR THE ATTENTION OF THE PARENT/CARER
If your child suffers any drowsiness, vomiting, impaired vision or excessive pain after returning home, please consult your doctor or local hospital immediately

Please Tick Appropriate Box ✓	Head Injury	Bump / Bruise	Cut / Graze	Sprain/Twist	Mouth injury / toothache / loose or missing tooth	Vomiting / Nausea	Injury to Body / Arm /Leg	Nosebleed	Stomach pain / Upset tummy	Allergy / Pinitos given	Allergy / AAI given and ambulance called	Asthma / inhaler given	Headache / High temperature	Breathing difficulties / allergy	Nosebleed	Other (specify):	Parent contacted	Unable to contact parent	The child was collected from school	The school is of the opinion that you consult a Doctor / Hospital

HEAD INJURY

Put a cross on the face picture, to indicate where the child has bumped his/her head.

Mark on the body map where the child has hurt him/ herself.

First Aider Name:	Signature:	Date:
Authorised SLT/SMT Name: (Head injury and child being sent home)	Signature:	Date:
Parent/Carer Name: (Head injury)	Signature:	Date:

If head injury then please tick that all paperwork given: ☐ First Aid Slip ☐ NHS Guidance

Additional advice:
- Observe your child closely for the next two days
- If you are concerned and observe any of the symptoms shown here:

PLEASE CONSULT YOUR DOCTOR OR A LOCAL HOSPITAL

Head Injury Symptoms - seek medical advice call 999

1. Unexpected drowsiness
2. Vomiting
3. Any signs of blood or water fluid coming from the nose or ears
4. Any complaint of headache
5. Any complaint of blurred vision
6. If the area is swollen or bruised place a compress over it for 20 minutes every 3-4 hours
7. Make sure your child is drinking enough fluids

Appendix B – Head Injury Advice Sheet to be given to parents

Head Injury Advice Sheet

Advice for parents and carers of children

Healthier Together

NHS

How is your child?

RED

If your child has any of the following during the next 48 hours:

- Vomits repeatedly i.e. more than twice (at least 10 minutes between each vomit)
- Becomes confused or unaware of their surroundings
- Loses consciousness, becomes drowsy or difficult to wake
- Has a convulsion or fit
- Develops difficulty speaking or understanding what you are saying
- Develops weakness in their arms and legs or starts losing their balance
- Develops problems with their eyesight
- Has clear fluid coming out of their nose or ears
- Does not wake for feeds or cries constantly and cannot be soothed

You need urgent help.
Go to the nearest Hospital Emergency (A&E) Department or phone 999

AMBER

If your child has any of the following during the next 48 hours:

- Develops a persistent headache that doesn't go away (despite painkillers such as paracetamol or ibuprofen)
- Develops a worsening headache

You need to contact a doctor or nurse today.
Please ring your GP surgery or contact NHS 111 - dial 111 or for children aged 5 years and above visit 111.nhs.uk

GREEN

If your child:

- Is alert and interacts with you
- Vomits, but only up to twice
- Experiences mild headaches, struggles to concentrate, lacks appetite or has problems sleeping

If you are very concerned about these symptoms or they go on for more than 2 months, make an appointment to see your GP.

Self Care
Continue providing your child's care at home. If you are still concerned about your child, contact NHS 111 – dial 111 or for children aged 5 years and above visit 111.nhs.uk

How can I look after my child?

- Ensure that they have plenty of rest initially. A gradual return to normal activities/school is always recommended.
- Increase activities only as symptoms improve and at a manageable pace.
- It is best to avoid computer games, sporting activity and excessive exercise until all symptoms have improved.

www.what0-18.nhs.uk

This guidance is written by healthcare professionals from across Hampshire, Dorset and the Isle of Wight

Head Injury Advice Sheet

Advice for parents and carers of children

Concussion following a head injury

- Symptoms of concussion include mild headache, feeling sick (without vomiting), dizziness, bad temper, problems concentrating, difficulty remembering things, tiredness, lack of appetite or problems sleeping – these can last for a few days, weeks or even months. Some symptoms resolve quickly whilst others may take a little longer.
- Concussion can happen after a mild head injury, even if they haven't been "knocked out".
- 9 out of 10 children with concussion recover fully, but some can experience long term effects, especially if they return to sporting activities too quickly. It is really important that your child has a gradual return to normal activities and that they are assessed by a doctor before beginning activities that may result in them having another head injury.
- If you are very concerned about these symptoms or they last longer than 2 months, you should seek medical advice from your doctor.

Advice about going back to nursery / school

- Don't allow your child to return to school until you feel that they have completely recovered.
- Try not to leave your child alone at home for the first 48 hours after a significant head injury.

Advice about returning to sport

- Repeated head injury during recovery from concussion can cause long term damage to a child's brain.
- Expect to stay off sport until at least 2 weeks after symptoms are fully recovered.
- Always discuss with your child's school and sports club to discuss a gradual return to full activity.

For further information:

Rugby: goo.gl/1fsBXz

Football: goo.gl/zAgbMx

For further support and advice about head injuries, contact:

- Visit the Brain Injury Trust website.

CS51313

www.what0-18.nhs.uk

This guidance is written by healthcare professionals from across Hampshire, Dorset and the Isle of Wight

Appendix C: First Aid Box Contents

Minimum Expected First Aid box contents per 50 people:

1 x Guidance Leaflet giving general guidance on first aid (for example HSE leaflet *Basic advice on first aid at work).*

- 60 x Adhesive Plasters
- 6 x No 16 Eye-pad
- 8 x Triangular Bandage
- 24 x Safety Pins
- 4 x wound Dressings (18 x 18cm)
- 12 x wound Dressings (12 x 12cm)
- 3 x Gloves (Pairs)
- 20 x Wipes

Classroom

- 10 x Adhesive Plasters
- 2x No 16 Eye-pad
- 2 x Triangular Bandage
- 6 x Safety Pins
- 4 x wound Dressings (18 x 18cm)
- 4 x wound Dressings (12 x 12cm)
- 3 x Gloves (Pairs)
- 10 x Wipes

The minimum contents of a Travelling First Aid kit should contain:

- A leaflet giving general guidance on first aid (for example HSE leaflet *Basic advice on first aid at work)*
- 9 x wound Dressings (12 x 12cm)
- 3 x wound Dressings (18 x 18cm)
- 6 x Triangular Bandages
- 12 x Safety Pins
- 4 x Eye Dressings
- 40 x Plasters
- 10 x Sterile Wipes
- 2 x Disposable Gloves (1 Pair)
- 1 x First Aid for Children Pocket Guide
- 1 x Pupil Accident Book

Appendix D – Trust Accident Form – the accident form is to be emailed to accidents@leightrust.co.uk.

Name of injured person		**Role/class**	
Date and time of incident		**Location of incident**	
Incident details			
Describe in detail what happened, how it happened and what injuries the person incurred			
Action taken			
Describe the steps taken in response to the incident, including any first aid treatment, and what happened to the injured person immediately afterwards.#			
Follow-up action required			
Outline what steps the school will take to check on the injured person, and what it will do to reduce the risk of the incident happening again			
Name of person attending the incident			
Signature		**Date**	
Signature of Head Teacher/SLT		**Date**	

Appendix E: First Aid Champion - half termly check form

	First Aid Area:	First Aid Area:	First Aid Area:	First Aid Area:	First Aid Area:
Resources in all areas in line with appendix C	**Please sign and date each box**	**Please sign and date each box**	**Please sign and date each box**	**Please sign and date each box**	**Please sign and date each box**
Resources within expiry date	**Please sign and date each box**	**Please sign and date each box**	**Please sign and date each box**	**Please sign and date each box**	**Please sign and date each box**
Updates for first aiders –	**N/A if nothing needs to be shared** **Please sign and date each box**	**N/A if nothing needs to be shared** **Please sign and date each box**	**N/A if nothing needs to be shared** **Please sign and date each box**	**N/A if nothing needs to be shared** **Please sign and date each box**	**N/A if nothing needs to be shared** **Please sign and date each box**
Qualifications are in date.	**List any staff whose training will expire in the next two months and book training**				
Order supplies if needed	**list resources needed**				
Check emergency epi-pen and inhalers	**Where are they stored?** **Are they in date?** **Are there TWO emergency Epi-pens? This is non-negotiable** **Are there TWO emergency inhalers? This is non-negotiable**				
Defibrillator	**How many defibrillators at the school?** **Where are they situated?** **Has the defibrillator battery been checked?** **Has the defibrillator pads been checked are they in date?** **Have they all been checked?**				
First aid slip	**Check if completed properly** **Check if head bump letters are kept in a folder** **Please sign and date each box**				

Date:_____ all checks are completed.

Person checking: Name:_____ Signature:_____

This form will be quality assured by the school Executive Head Teacher, Finance Person linked to the school and the Estates Team – further information will be shared with these individuals.