

First Aid Policy

The Gatttons Infant School



Date Reviewed: Autumn 2025

Date Approved: Autumn 2025 (Resources)

Next review due by: Autumn 2026



We are a Rights Respecting School
and therefore, we uphold the principles of
UN's Convention on the Rights of the Child

Article 28 Children have the right to a good quality education.

Article 29 Education should help children to use and develop their talents and abilities. It should also help them to learn to live peacefully, protect the environment and respect other people.

Article 31 Children have the right to play and rest.

Our Aims:

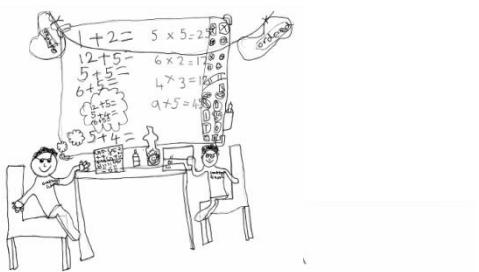
We will cultivate an environment where children are happy and secure and enjoy learning, by:

- ensuring that everyone is treated with respect as an individual whose opinions and beliefs are valued;
- creating exciting, high quality learning environments indoors, outdoors, and in the wider community.
- involving parents/carers and children in decisions about the child's learning.



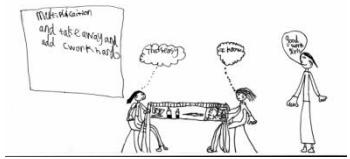
provide a broad, balanced and rich curriculum, by:

- continuously striving for high standards of achievement through engaging, child-centered teaching.
- ensuring a wealth of meaningful learning experiences that meets the needs of each child.



inspire and challenge each child to achieve their full potential and in so doing lay the foundations for life-long learning, by:

- developing our children's confidence and self-esteem.
- ensuring that our children are active, independent learners.
- encouraging our children to begin to take responsibility for themselves, their learning and their behaviour, therefore preparing them for life in a changing world.



Introduction

Legislation and guidance

This policy is based on the [Statutory Framework for the Early Years Foundation Stage](#), advice from the Department for Education on [first aid in schools](#) and [health and safety in schools](#), and the following legislation:

- [The Health and Safety \(First Aid\) Regulations 1981](#), which state that employers must provide adequate and appropriate equipment and facilities to enable first aid to be administered to employees, and qualified first aid personnel
- [The Management of Health and Safety at Work Regulations 1992](#), which require employers to make an assessment of the risks to the health and safety of their employees
- [The Management of Health and Safety at Work Regulations 1999](#), which require employers to carry out risk assessments, make arrangements to implement necessary measures, and arrange for appropriate information and training.
- [The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations \(RIDDOR\) 2013](#), which states 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

Teachers' conditions of employment do not include giving first aid or medication or supervising pupils taking medication, although staff may volunteer to undertake these tasks. Teachers and other staff, are, however, expected to use their best endeavours at all times, particularly in emergencies.

Full training will be given to all staff who volunteer to undertake first aid duties.

This policy should be read in conjunction with the following policies and guidelines:

- Hygiene and Infection Control Guidelines.
- The Administration of Medicine in School Policy.
- The school's Emergency Plan.
- The school's Offsite Activities Policy.

Definition

First Aid is the immediate assistance given to someone who is ill or injured. In school First Aid will usually be sufficient. However, it may be necessary in some cases to refer the casualty to a qualified medical expert.

Aims

- 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.
- To provide a framework for responding to an incident and recording and reporting outcomes.
- To preserve life.

- To prevent the condition worsening.
- To promote recovery.
- To protect the first aider from infection.

1. The Responsibility of the Appointed Person and First Aiders

The school's appointed persons are Mary Ward and Holly Weeks. They are responsible for:

- Taking charge when someone is injured or becomes ill.
- Ensuring there is an adequate supply of medical materials in first aid kits and replenishing the contents of these kits.
- Ensuring that an ambulance or other professional medical help is summoned when appropriate.

First aiders are trained and qualified to carry out the role and are responsible for:

- Acting as first responders to any incidents; they will assess the situation where there is an injured or ill person and provide immediate and appropriate treatment.
- Sending pupils home to recover, where necessary.
- Filling in an accident report on the same day, or as soon as is reasonably practicable, after an incident.
- Keeping their contact details up to date.

The Local Authority and Governing Board

West Sussex County Council has ultimate responsibility for health and safety matters in the school, but delegates' responsibility for the strategic management of such matters to the school's governing board. The governing board delegates operational matters and day-to-day tasks to the Headteacher and staff members.

The Headteacher

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

- Ensuring that an appropriate number of First Aiders are present in the school at all times.
- Ensuring that first aiders have an appropriate qualification, keep training up to date and remain competent to perform their role.
- Ensuring all staff are aware of first aid procedures.
- Ensuring appropriate risk assessments are completed and appropriate measures are put in place.
- Undertaking, or ensuring that managers undertake, risk assessments, as appropriate, and that appropriate measures are put in place.
- Ensuring that adequate space is available for catering to the medical needs of pupils.
- Reporting specified incidents to the HSE when necessary.

Staff

School staff are responsible for:

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

- Completing accident reports for all incidents they attend to where a First Aider is not called.
- Informing the Headteacher or their manager of any specific health conditions or first aid needs.

In the management of a casualty the First Aider must ensure their response is **effective, safe and prompt**. This can be achieved by ensuring the following:

- a) First checking for any **danger** to themselves by removing any potential hazards and protecting themselves.
- b) Checking for a **response** from the casualty and identifying the condition.
- c) Giving immediate, appropriate and adequate treatment.
- d) Arranging for the casualty to be taken home if necessary and/or seen by a doctor.
- e) It may be necessary to call the Emergency Services using 999 or 112, clearly stating the location of the casualty and the condition. The First Aider should ensure that someone is sent to the entrance of the school to guide the Emergency Services to the location of the casualty.

2. Provision of First Aiders

- As a minimum The Gattons Infant School should have at least one member of staff who is an Appointed Person. Such a person should hold a current First Aid at Work Certificate. These certificates should be renewed at least every three years and it is the responsibility of the named personnel to ensure they request training before their certificate expires.
- Additionally, there should be at least two other members of staff trained as First Aiders who should ensure they also have current Emergency Aid in the Workplace Certificates. These certificates should be renewed at least every three years and it is the responsibility of the named personnel to ensure they request training before their certificate expires.
- "At least one person who has a current paediatric first aid (...) certificate should be on the premises and available at all times when children are present and should accompany children on outings" - First Aid in Schools, Early Years and Further Education (14/02/22)
- Whilst Reception children are eating there should always be a member of staff in the room with a valid paediatric first aid certificate.

A list of Appointed Person and First Aiders is displayed in the school office. The person or persons appointed as a First Aider will:

- a) Administer First Aid as and when appropriate.
- b) Maintain First Aid records.
- c) Maintain First Aid boxes and travelling/dinner First Aid kits at the beginning of each half term.
- d) Maintain effective communications as detailed in the policy under item 6) Communications and Record Keeping.
- e) Renew their First Aid certificates as and when appropriate.
- f) Carry out any other duties in connection with First Aid as directed by the Headteacher or governors of the school.

In the absence of any of the above personnel other members of staff who have completed First Aid training delivered by St John Ambulance on the school premises or at another location may administer First Aid.

3. First Aid Posts

- a) In the First Aid Room, in the cupboard in the right-hand corner.
- b) In the First Aid Room there is a large portable First Aid kit for emergencies on the school site.

4. First Aid Equipment

- a) All First Aid kits and cupboards should be clearly marked with a white cross on a green background. The boxes should be clean, waterproof and easy to open. They should also be kept near to hand washing facilities.
- b) First aid cupboards and travelling/dinner first aid kits should contain a sufficient quantity of recommended first aid materials and **nothing else**.
- c) Contents of the cupboards and kits should be replenished as soon as possible after any use is made in order to ensure that there is always an adequate supply of all materials.
- d) Items in the cupboards/kits should not be used after the expiry date shown on the packets.
- e) The First Aid Room and first aid cupboards should be kept clean, damp and dust free.
- f) First aid kits should be kept in the cupboards provided when not in use.
- g) First aid baskets used by the lunchtime supervisors on a daily basis are on the table in the First Aid Room.
- h) First aid boxes in the classrooms should be passed to the First Aider when their contents need replenishing. This is the responsibility of the personnel working in the class.

5. First Aid Equipment

- a) Contents of the First Aid cupboard:
 - a card listing the contents and guidance notes.
 - 20 assorted individually wrapped sterile adhesive dressings (plasters).
 - 2 sterile eye pads with attachments.
 - 3 individually wrapped triangular bandages.
 - 6 safety pins.
 - 6 medium sized individually wrapped sterile unmedicated wound dressings (approx. 10 cm x 8 cm).
 - 2 large individually wrapped sterile unmedicated wound dressings (approx. 13 cm x 9 cm).
 - 3 extra-large individually wrapped sterile unmedicated wound dressings (approx. 28 cm x 17.5 cm).
 - a box of disposable gloves and disposable aprons.
 - gauze swabs.
 - a pair of tweezers and a pair of blunt ended scissors.
 - micropore tape.
- b) Contents of lunchtime first aid kits:
 - a pencil and first aid accident record book.
 - 10 assorted individually wrapped sterile adhesive dressings (plasters).
 - a bottle of fresh tap water (these bottles should be changed each day, the bottles rinsed and left to drain and sterilised weekly).
 - small plastic bag containing gauze swabs, which should be used only if saturated with water.
 - disposable gloves.
 - plastic bags for the safe disposal of soiled dressings.

In addition to the above the travelling bags for off-site activities will contain:

- 4 medium, 2 large, 2 extra-large individually wrapped unmedicated wound dressings and micropore tape.
- 2 sterile eye pads with attachments and 2 individually wrapped triangular bandages.

- 6 safety pins.
- 10 individually wrapped moist cleaning wipes.
- 2 cool kids instant ice packs.

c) Contents of classroom First Aid boxes:

- disposable gloves.
- Plasters.
- Medi wipes.
- 1 roll micropore tape.
- 1 guidance card.
- plastic bags for safe disposal of soiled dressings.
- scissors.
- sick bag.
- swabs (non-sterile)
- triangular bandage
- eye pad dressing x2
- eye wash

d) Supplementary equipment kept in the First Aid Room:

- A blanket and foam mattress.
- Plastic disposable bags for soiled or used first aid dressings (into flip top bins).
- Plastic disposable aprons and gloves.
- Crepe and roller bandages.
- A resusci face shield.
- Sick bags for travelling.
- Boxes and small packets of tissues.
- Sick buckets.

Additionally, the following item is also available:

- Koolpak instant ice packs (kept in the fridge in the First Aid Room).
- Kool Kids instant ice packs in left hand top cupboard in 1st aid room.

6. Communication and Record Keeping

- a) First aid posts must be clearly labelled with a white cross on a green background.
- b) The phone number of the nearest hospital must be prominently displayed by all school phones, also emergency services, G. Ps, dentists and NHS Direct.
- c) Guidance notes on First Aid must be available in all classrooms inside the First Aid box.
- d) A list of children with medical problems such as epilepsy, diabetes, allergies and asthma must be clearly displayed in each class, in the office and First Aid Room. Instructions for the care of these children must be available in the office.
- e) A statutory accident book for employees must keep readily accessible accident records which should be kept for a minimum of three years.
- f) Records must be kept of any first aid treatment given. This must include:
 - Name and class of the injured or ill person.
 - Date, time and place of incident.

- Brief details of injury/illness and first-aid given.
- What happened to the person immediately afterwards e.g., went home/back to class/went to hospital.
- Name and signature of person dealing with the incident.

Records must be made in the red First Aid Record File, kept in the First Aid Room. The only exceptions are:

- ◊ Very minor incidents during the school day which are treated in the classroom must be recorded in the green Class First Aid Record Files. *This file must be kept prominently on display in the classroom.*
- ◊ Very minor incidents at lunchtime which are treated outside/in the classroom must be recorded in the green Lunchtime First Aid Record Files (one per year group). The records completed will be transferred, on a daily basis, into a plastic wallet in the Red First Aid File by the school secretary. There will be a plastic wallet for each year group.

All incidents treated in the First Aid Room at lunchtime should be recorded in the red First Aid First Aid Record File in the First Aid Room.

- g) Accidents resulting in death, major head injuries or serious accidents (i.e., those which require hospitalisation or treatment by a doctor) must be reported to West Sussex. Similarly, any accident resulting in three or more days absence from work must also be reported.
- h) Less serious head injuries must be reported to parents by means of a standard letter, known as a 'Red Letter', so that parents can monitor or follow up treatment at home. These are only to be completed by a member of the office staff or a qualified first aider. All 'Red Letters' sent home MUST be copied and the copy put on the child's file in the office.
- i) At the end of each lunch duty the Lunchtime accident records should be taken to the office for the Appointed Person to examine. Similarly, if any accidents occur during an off-site activity, the accident book should be returned to the office.

7. Hygiene and Infection Control

All staff should take precautions to avoid infection and must follow basic hygiene procedures as detailed below and in the school's Hygiene and Infection Control Guidelines.

- Pupils and staff must cover minor cuts, open or weeping skin grazes, boils etc. with waterproof or other suitable dressings.
- Staff who routinely administer first aid to children, however minor, must at all times have breaks to their own skin covered with a waterproof dressing.
- Hand washing at appropriate times is essential for both children and staff. Hot and cold water, together with soap and disposable towels or hand dryers must always be available. A plastic nail brush must be provided at wash basins used by staff who undertake messy jobs.
- Staff who routinely administer first aid to children must wear a disposable apron when there are especially messy situations involving vomit, blood or other bodily fluids.
- Disposable gloves must be worn if there is bleeding, however slight.

- The basic material for mopping up spillages of blood and other bodily fluids is disposable paper towels. Where small quantities are involved, soft toilet tissue is appropriate as it is easily flushed down the toilet.
- Splashes of blood on the skin must be washed off immediately with soap and water. Splashes of blood into the eyes and mouth must be washed out immediately with water.
- Small quantities of soiled but disinfected paper may be flushed down the toilet where this will not cause a blockage. Larger quantities, together with disposable aprons and gloves, must be placed in a plastic bag, then sealed and disposed of in the Contaminated Waste bin.
- Clothes and linen that are stained with blood should be washed in a washing machine using the hot cycle or boiled after hand washing.

8. Guidance Notes on Treatments

a) External bleeding

- Lightly rinse wound, if dirty, in running water. If the bleeding is heavy do not wash as this prevents the blood from clotting. Raise the limb and apply direct pressure with a pad and fingers.
- Clean surrounding area with soap and water.
- Gently wipe away from the wound using each swab once only, taking care not to wipe away blood clots.
- Foreign bodies in wounds such as small pieces of grit will probably wash off. Any stone, glass etc. which is not easily removed should be left in situ and the wound lightly covered until the injured person can be taken for medical treatment.
- Dab gently, do not use cotton wool to dry, paper towels are more suitable.
- Dress with a plaster or if a larger wound, use a sterile unmedicated dressing and bandage.
- Do not use creams or lotions.

b) Nose bleeds

- Sit casualty down with head well forward, loosen tight clothing around the neck and chest - have a bowl ready for drips if necessary.
- Advise casualty to breathe through their mouth and pinch soft part of nose.
- Tell casualty to spit out any blood in mouth.
- Release pressure after 10 minutes. If bleeding has not stopped continue treatment - do not let casualty raise their head.
- With head still forward gently clean around the nose and mouth using swabs soaked in lukewarm water. Do not plug the nose.
- When bleeding stops tell the casualty to avoid exertion, advise casualty not to blow their nose for at least four hours.
- If still bleeding after 30 minutes seek medical advice.

c) Bumps to the head (not unconscious)

- Sit casualty down and observe closely looking for signs of shallow breathing, pallid face, cold and clammy skin or the casualty feeling sick.
- Apply a cold compress to the bump.
- Allow the casualty to sit quietly for a few moments.
- If the bump results in symptoms of concussion (see above) the child's parents should be called and/or if unable to contact them the child should be taken to hospital.

d) Minor burns and scalds

- Place injured part under slowly running cold water for at least 10 minutes.
- Dress area with clean, preferable sterile, non-fluffy dressing.
- Do not use plasters, ointments etc.

e) Choking

- Remove debris from mouth.
- Encourage casualty to cough.
- Help casualty bend over with head lower than lungs.
- Slap smartly between shoulder blades with heel of hand four times.
- If casualty is small child lay child over knee - support chest with one hand and slap four times as above with other hand.

f) Needlestick/Sharps/Splash Injuries and Human Bites - See Appendix 1

g) Falls/suspected broken bones

- If child falls and you suspect a fracture do not move injured part unnecessarily. Allow child to hold injury in a position which is comfortable for them.

h) Bruising (internal bleeding)

- Apply a cold compress to injured area to restrict bleeding and reduce swelling.

i) Stings

Insect stings inside mouth and throat

- To reduce swelling give casualty ice to suck or rinse mouth with cold water.
- Be aware that if the sting is really bad swelling may cause asphyxia. Urgent medical attention is necessary i.e., hospital.

Stings in skin

- If sting is embedded remove with tweezers but do not squeeze poison sac because this will force the remaining poison into the skin.
- To relieve pain and swelling apply a cold compress.

j) Unconsciousness

- Put them in the recovery position and call for an ambulance.

k) Dental Emergencies (do not give aspirin or paracetamol)

- For a child who attends school with dental pain or develops it during school hours, the parents must be contacted to establish whether they will be taking appropriate action.
- For injuries to the teeth and mouth which occur during the school day the school must contact the parents to ascertain whether there is a family dentist the child can attend.
- If a tooth is broken, the broken part should be found and kept safe so it may be taken to the dentist.
- In the case of a whole tooth, find the tooth, hold it by the crown, do not touch the root, and if not dirty put back in the socket and take child to the dentist. If the tooth is dirty rinse, it in milk or cold water. If it is not possible to insert the tooth, place it in a cup of milk.

I) Drug situations - medical emergencies

The procedures for an emergency apply when a person is at immediate risk of harm. A person who is unconscious, having trouble breathing, seriously confused or disoriented or who has taken a harmful toxic substance, should be responded to as an emergency.

Your main responsibility is for any pupil/staff member at immediate risk, but you also need to ensure the well-being and safety of others. Put into practice the school's first aid procedures. If in any doubt call for medical help.

Always:

- Assess the situation.
- If a medical emergency, send for medical help and ambulance.

Before assistance arrives:

If the person is conscious:

- Ask them what has happened and to identify any drug used.
- Collect any drug sample and any vomit for medical analysis.
- **Do not induce vomiting.**
- **Do not chase or over-excite them if intoxicated from inhaling a volatile substance.**
- Keep them under observation, warm and quiet.

If the person is unconscious:

- Ensure that they can breathe and place in the recovery position..
- **Do not move them if a fall is likely to have led to spinal or other serious injury which may not be obvious.**
- **Do not give anything by mouth.**
- **Do not attempt to make them sit or stand.**
- **Do not leave them unattended or in charge of another pupil.**
- Notify parents/carers.

For needle stick (sharps) injuries:

- Encourage wound to bleed. **Do not suck.** Wash with soap and water. Dry and apply waterproof dressing.
- If used/dirty needle seek advice from a doctor.

When medical help arrives:

- Pass on any information available, including vomit and any drug samples.

Complete a medical record form as soon as you have dealt with the emergency.

LOCAL GUIDANCE FOR SCHOOLS/NURSERIES

RISKS AND PROCEDURES ASSOCIATED WITH NEEDLESTICK/SHARPS/SPLASH INJURIES AND HUMAN BITES

Risks of bloodborne viruses associated with needlestick/sharps/splash injuries and human bites

Bloodborne viruses (BBVs) are infectious agents that some people carry persistently in their blood. They can cause severe disease in some cases and few or no symptoms in others. The virus can be spread to another person and this may occur whether the carrier of the virus is ill or not. The main BBVs of concern are Human Immunodeficiency Virus (HIV), hepatitis B and hepatitis C.

Bloodborne viruses are spread predominantly by direct contact with the blood of an infected person, not by normal social contact and daily activities e.g., coughing, hugging, sharing toilets, food and crockery.

Transmission of BBVs may occur in a number of ways in educational establishments, including:

- Human bites, where blood has been drawn.
- Accidental or malicious inoculation of blood by a contaminated sharp such as a hypodermic needle, EpiPen or lancet.
- Blood splashes to mucous membranes e.g., eyes and mouth
- Contamination of broken skin where clothes have been soaked in blood

In the event of needlestick/sharps/splash injuries and human bites follow the procedures in the attached flow chart

Safe disposal of sharps in educational establishments

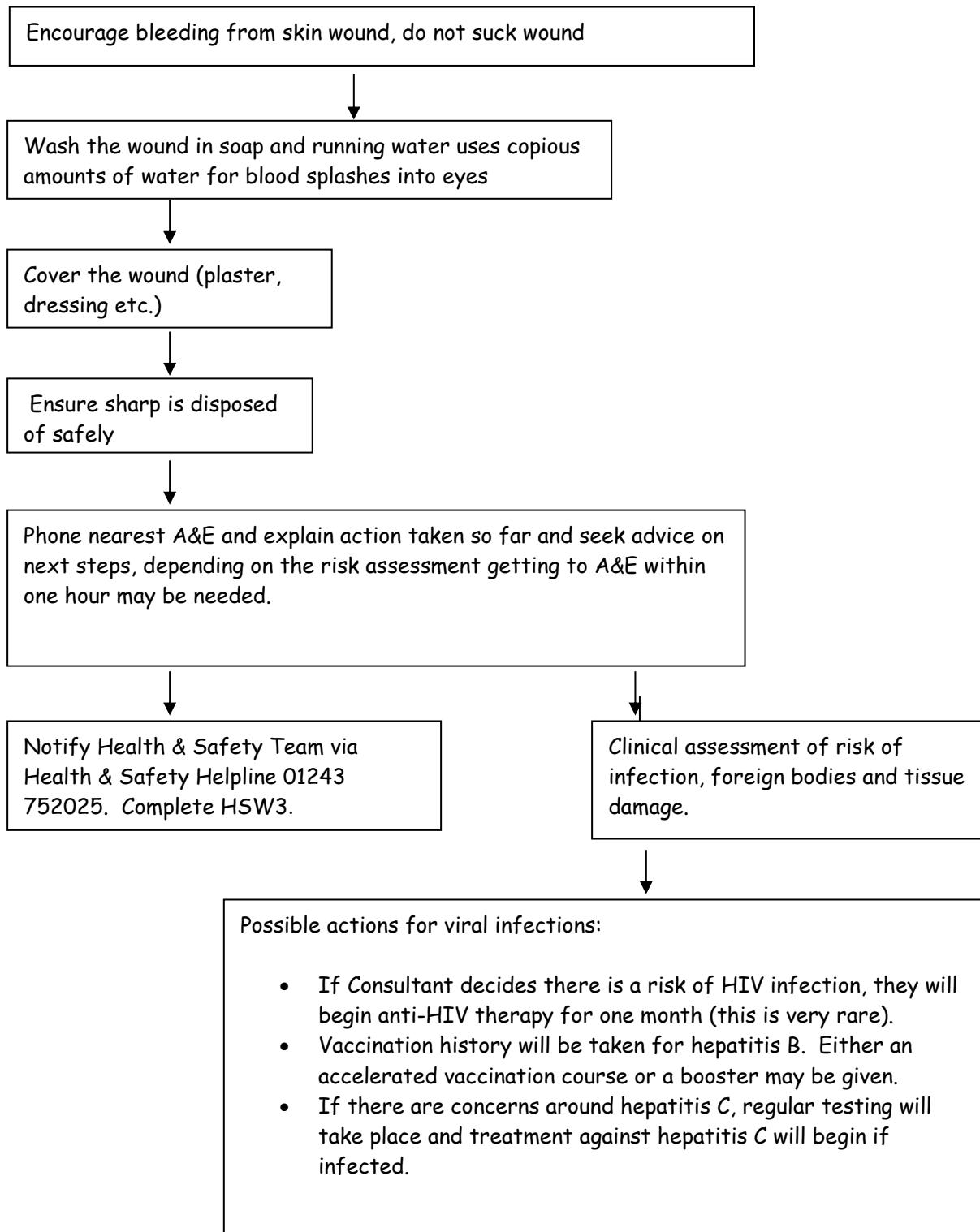
- On discovering a needle in school grounds, guard the needle and summon help from the school office (by phone or by sending a pupil etc.). Request that the sharps retrieval kit (see below) be brought to the location.
- Do not attempt to recover discarded needles while wearing sandals or other open shoes, if the needle is dropped, it could injure your foot. It is also inadvisable to retrieve discarded needles with bare legs for the same reason.
- Never handle needles with your bare hands, always wear protective gloves - even when using tools to move needles.
- Sweep up needles with a dustpan and brush or use a pincer tool, and place them directly into a sharps box.
- Take the sharps box to the needle not vice versa.
- Do not hold the sharps box while depositing the needle, open it and place it on an even surface.
- Inform the head of establishment as soon as possible of any needles found.

Sharps Retrieval Kit should include non-powdered vinyl or latex free CE marked disposable gloves, retrieval tools to avoid handling the needle, (e.g., dustpan/brush, litter picker, /tongs) and sharps box conforming to BS 7320:1990 - can be obtained from WSCC Educational Supplies.

Any queries should be directed to the County Council's Health and Safety Team on 01243 75025 or the Public Health England unit on 0344 225 3861.

PROCEDURES TO FOLLOW IN THE EVENT OF NEEDLESTICK INJURY OR HUMAN BITE WOUND THAT BREAKS THE SKIN

Use normal first aid procedure plus use of disposable gloves.



Hospitals with A&E (24 hr) Departments

Haywards Heath - The Princess Royal Hospital - 01444 441881
Brighton - The Royal Sussex County Hospital - 01273 696955