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# THE LATYMER SCHOOL

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Founded 1624

## FIRST AID POLICY

### STATUTORY

<b>Statutory</b> Policy Review by	Pupils and Personnel Committee, March 2024
Policy adopted	Full Governors' Meeting, March 2024
Review date of policy	March 2025 (One Year)

## 1. Equality

We have carefully considered and analysed the impact of the following behaviour policy and procedures on equality and the possible implications for pupils with protected characteristics, as part of our commitment to meet the Public Sector Equality Duty (PSED) requirement to have due regard to the need to eliminate discrimination, advance equality of opportunity and foster good relations.

## 2. Aims

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

## 3. Legislation and guidance

This policy is based on advice from the Department for Education on [first aid in schools](#) and [health and safety in schools](#), and 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, facilities and personnel to enable first aid to be administered to employees, if they are injured or taken ill at work
- [The Management of Health and Safety at Work Regulations 1992](#), which require employers to make suitable and sufficient 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 to their employees and other people (student, contractors visitors etc) arising from work activities.
- [The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations \(RIDDOR\) 2013](#), requires employers and others in control of premises to report certain accidents, diseases and dangerous occurrences (near misses) arising out of or in connection with work to the HSE (Health and Safety Executive).
- [Social Security \(Claims and Payments\) Regulations 1979](#), which set out rules on the retention of accident records
- [The School Premises \(England\) Regulations 2012](#), there are minimum standards for the premises of all maintained schools in England. The regulations cover provision for pupil toilets and washing facilities, medical accommodation, health and safety welfare, acoustics, lighting water supplies and outdoor space

## **4. Roles and responsibilities**

The Latymer School reviews our first aid needs on an annual basis and ensures that there are a sufficient number of suitably trained first aiders to care for both students and employees. The Welfare Assistant is responsible for first aid arrangements.

### **4.1 Welfare Assistant**

The Welfare Assistant is 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 (see section 7) 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 (see the template in appendix 2)
- Keeping their contact details up to date

The Welfare Assistant, first aiders, emergency first aiders and members of staff who are EpiPen trained are listed in appendix 1. The first aider names will also be displayed prominently around the school.

### **4.2 The governing board**

The governing board has ultimate responsibility for health and safety matters in the school, but delegates operational matters and day-to-day tasks to the headteacher and staff members.

### **4.3 The headteacher**

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

- Ensuring that an appropriate number of trained first aid personnel 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 (see section 6)

#### **4.4 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 (see appendix 2) for all incidents they attend to where either the Welfare Assistant or a first aider is not called
- Informing the headteacher or their manager of any specific health conditions or first aid needs

### **5. First aid procedures**

#### **5.1 In-school procedures**

In the event of an accident resulting in injury:

- The closest member of staff present will assess the seriousness of the injury and seek the assistance of the Welfare Assistant who will provide the required first aid treatment
- If the Welfare Assistant is not available, the member of staff will contact the school office who in turn will find an available qualified first aider to give assistance
- The Welfare Assistant and/or first aider, if called, will assess the injury and decide if further assistance is needed from a colleague or the emergency services. They will remain on scene until help arrives
- The Welfare Assistant and/or first aider will also decide whether the injured person should be moved or placed in a recovery position
- If the Welfare Assistant and/or first aider judges that a pupil is too unwell to remain in school, parents will be contacted and asked to collect their child. Upon their arrival, the Welfare Assistant and/or first aider will recommend next steps to the parents
- If emergency services are called, the Welfare Assistant, first aider, emergency first aid qualified member of staff or the member of staff present will contact 999 directly from the scene. The ambulance call handler will ask a series of questions relating to the accident or illness
- If emergency services are called, the Welfare Assistant or member of the school office will contact parents immediately

- The Welfare Assistant will complete an accident report form on the same day or as soon as is reasonably practical after an incident resulting in an injury
- If the Welfare Assistant is not available to complete an accident report form, the qualified first aider who provided first aid will complete the accident report form
- If a pupil's prescribed inhaler is not available (for example, because it is broken, or empty), an emergency salbutamol inhaler will be used by children, for whom written parental consent for use of the emergency inhaler has been given, who have either been diagnosed with asthma and prescribed an inhaler, or who have been prescribed an inhaler as reliever medication

## **5.2 Lunchtime procedures**

In the event of an accident resulting in injury:

- A designated, qualified first aid lunchtime supervisor will be responsible for a first aid kit and will provide first aid treatment for cuts and bruises
- The designated, qualified first aid lunchtime supervisor or member of staff present will assess the seriousness of the injury. A lunchtime supervisor will seek the assistance of the Welfare Assistant using a two-way radio. The Welfare Assistant will provide the required first aid treatment
- If the Welfare Assistant is not available, a qualified first aid lunchtime supervisor will provide first aid treatment for cuts and bruises. A lunchtime supervisor will contact the school office using the two-way radio, who in turn will find an available qualified first aider to give further assistance
- The Welfare Assistant and/or first aider, if called, will assess the injury and decide if further assistance is needed from a colleague or the emergency services. They will remain on scene until help arrives
- The Welfare Assistant and/or first aider will also decide whether the injured person should be moved or placed in a recovery position
- If the Welfare Assistant and/or first aider judges that a pupil is too unwell to remain in school, parents will be contacted and asked to collect their child. Upon their arrival, the Welfare Assistant and/or first aider will recommend next steps to the parents
- If emergency services are called, the Welfare Assistant or member of the school office will contact parents immediately
- The Welfare Assistant will complete an accident report form on the same day or as soon as is reasonably practical after an incident resulting in an injury
- If the Welfare Assistant is not available to complete an accident report form, the qualified first aider who provided first aid will complete the accident report form

## **5.3 Off-site procedures**

When taking pupils off the school premises, staff will ensure they always have the following:

- A school mobile phone

- A portable first aid kit
- A first aid and accident book
- A trip or visit leader will be responsible for liaising with the Welfare Officer to ensure that an Individual Care Plan (ICP) is taken on the trip or visit. The ICP will include information about the specific medical needs of pupils and parents'/carer's contact details

The first aider, emergency first aid qualified member of staff or trip leader will complete an accident report form on the same day or as soon as is reasonably practical after an incident resulting in an injury. The accident report form should then be given to the Welfare Officer when the school trip or visit returns to school. The Welfare Officer will add the accident report form to the school records.

Risk assessments will be completed by the trip or visit leader prior to any educational visit that necessitates taking pupils off school premises. The Educational Visits Coordinator is available to advise and guide staff regarding risk assessments.

There will always be at least one first aider or Emergency First Aid qualified member of staff on all residential trips. It is preferable that a qualified first aider or Emergency First Aid qualified member of staff is present on all school trips. If this is not possible, the trip leader is required to consider this when carrying out their risk assessment.

If a pupil's prescribed inhaler is not available (for example, because it is broken, or empty), an emergency salbutamol inhaler will be used by children, for whom written parental consent for use of the emergency inhaler has been given, who have either been diagnosed with asthma and prescribed an inhaler, or who have been prescribed an inhaler as reliever medication.

Paracetamol be given to children on a school trip or visit, for whom written parental consent for use of the paracetamol has been given

## **6. Medication (including epi-pens and inhalers)**

Medicines MUST be in date, labelled, and provided in the original container (except in the case of insulin which may come in a pen or pump) with dosage instructions. Medicines which do not meet these criteria will not be administered.

Where possible, students will be allowed to carry their own medicines and devices (e.g. epi-pens). Where this is not possible, their medicines will be located in the Welfare Office and Main Reception.

All medicines will be stored safely. Medicines needing refrigeration will be stored in the fridge in the Welfare Office.

Some medicines (epi-pens, inhalers, etc) will be carried by the student, for ease of access during outside activities. Back up inhalers and epi-pens will be kept in either the Welfare Office or in the Main Reception.

The School can administer their "generic" adrenaline auto-injector (AAI), obtained, without prescription, for use in emergencies, if available, but only to a student at risk of

anaphylaxis, where both medical authorisation and written parental consent for use of the spare AAI has been provided as part of a student's individual healthcare plan. The school's spare AAI can be administered to a student whose own prescribed AAI cannot be administered correctly without delay.

## **7. School Trips**

Parents are responsible, in our trip paperwork, for updating the Trip Leader on any medical condition (physical or mental) that the student has which could lead to a potential problem for the student's well-being, safety, physical condition whilst on the trip.

Parents are also responsible for informing the school at any point of any changes in circumstances (medical including mental health concerns). This should be done at the earliest possible date.

All students with an inhaler and /or epi-pen must take them on educational visits, however short in duration. Not having the correct medications could prevent a student from taking part in the trip. The student will carry their own medication on the trip.

In addition to the student carrying their own medication on the trip, the trip leader will be given an Individual Health Care Plan (IHCP) for every student on the trip who has ongoing medical needs. The IHCP will include information regarding the student's medical condition, signs, symptoms and treatments; the student's resulting needs (including medication); the level of support needed and the student's medication (including inhalers and/or epi-pens).

Staff who accompany any student on a residential trip will need to have ensured that they have been trained adequately to deal with emergencies arising from diabetes, asthma as well as how to use an epi-pen. Students should never be prevented from accessing their medication.

The Latymer School cannot be held responsible for side effects that occur even when medication is taken correctly.

## **8. Epi-pen – trained members of staff**

Any trained member of staff can administer an epi-pen in an emergency.

- The pen (cap off) should be pushed against the student's thigh, through clothing if necessary.
- The pen should be held for a count of 10 seconds before being withdrawn.
- An ambulance must be called immediately for a student who may require an epi-pen.
- Cetrizine may be given if slight tingling of the lips occurs following ingestion of possible irritants for
- nut allergy sufferers. This is a liquid medicine stored with the epi-pen.
- If symptoms are more severe, the epi-pen should be given immediately.
- Parents should be contacted after this call has been made.

Staff who are responsible for supporting students with medical needs will receive suitable and sufficient training to do so.

## **9. First aid equipment**

A typical first aid kit in our school will include the following:

- A leaflet with general first aid advice
- Regular and large bandages
- Eye pad bandages
- Triangular bandages
- Adhesive tape
- Safety pins
- Disposable gloves
- Non-alcoholic wipes
- Plasters of assorted sizes
- Scissors
- Burns dressings
- Face shield
- Tweezers
- Cold compresses (for sporting fixtures only)

No medication is kept in first aid kits.

First aid kits are stored in:

- The medical room
- Reception (at the desk)
- The Small Hall
- Sixth Form Common Room
- Art Department
- All science labs
- All design and technology classrooms
- The Sports Hall
- The Mills Building
- The school kitchens
- School vehicles



## **10. Record-keeping and reporting**

### **10.1 First aid and accident record book**

- All accidents and injuries will be recorded in a written or electronic form
- Records held in the first aid and accident book will be retained by the school for a minimum of 3 years, in accordance with regulation 25 of the Social Security (Claims and Payments) Regulations 1979, and then securely disposed of
- An accident form will be completed by the Welfare Assistant on the same day or as soon as possible after an incident resulting in an injury
- If the Welfare Assistant did not attend the accident, or was not involved in the first aid treatment, the qualified first aider who provided first aid will complete an accident form after an incident resulting in an injury

### **10.2 The record of any first-aid treatment given by first aiders and other appointed persons 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
- what happened to the pupil or member of staff immediately afterwards (eg went home, resumed normal duties, went back to class or went to hospital)
- the name and signature of the first aider or person dealing with the incident

### **10.3 Reporting / contacting parents**

Serious or significant incidents will be reported to parents either by sending a note home with the pupil or by direct contact with the parent or carer. A serious or significant incident can be defined as an acute medical problem that requires immediate assessment by a healthcare professional or needing hospital admission.

In an emergency involving outside medical professionals or services the Head or the appointed person will follow the school's established procedures for contacting a parent or carer.

### **10.4 Reporting to the HSE**

The Welfare Assistant will keep a record of any accident which results in a reportable injury, disease, or dangerous occurrence as defined in the RIDDOR 2013 legislation (regulations 4, 5, 6 and 7).

The Welfare Assistant will report these to the Health and Safety Executive as soon as is reasonably practicable and in any event within 10 days of the incident.

Reportable injuries, diseases or dangerous occurrences include:

- Death
- Specified injuries, which are:
  - Fractures, other than to fingers, thumbs and toes
  - Amputations
  - Any injury likely to lead to permanent loss of sight or reduction in sight
  - Any crush injury to the head or torso causing damage to the brain or internal organs
  - Serious burns (including scalding) which:
    - Covers more than 10% of the whole body's total surface area; or
    - Causes significant damage to the eyes, respiratory system or other vital organs
  - Any scalding requiring hospital treatment
  - Any loss of consciousness caused by head injury or asphyxia
  - Any other injury arising from working in an enclosed space which leads to hypothermia or heat-induced illness, or requires resuscitation or admittance to hospital for more than 24 hours
- Injuries where an employee is away from work or unable to perform their normal work duties for more than 7 consecutive days (not including the day of the incident)
- In this case, the Welfare Officer will report these to the HSE as soon as reasonably practicable and in any event within 15 days of the accident
- Occupational diseases where a doctor has made a written diagnosis that the disease is linked to occupational exposure. These include:
  - Carpal tunnel syndrome
  - Severe cramp of the hand or forearm
  - Occupational dermatitis, e.g. from exposure to strong acids or alkalis, including domestic bleach
  - Hand-arm vibration syndrome
  - Occupational asthma, e.g from wood dust
  - Tendonitis or tenosynovitis of the hand or forearm
  - Any occupational cancer
  - Any disease attributed to an occupational exposure to a biological agent
- Where an accident leads to someone being taken to hospital
- Near-miss events that do not result in an injury, but could have done. Examples of near-miss events relevant to schools include, but are not limited to:
  - The collapse or failure of load-bearing parts of lifts and lifting equipment

- The accidental release of a biological agent likely to cause severe human illness
- The accidental release or escape of any substance that may cause a serious injury or damage to health
- An electrical short circuit or overload causing a fire or explosion

### **Pupils and other people who are not at work (e.g. visitors): reportable injuries, diseases or dangerous occurrences**

These include:

- Death of a person that arose from, or was in connection with, a work activity\*
- An injury that arose from, or was in connection with, a work activity\* and where the person is taken directly from the scene of the accident to hospital for treatment
- \*An accident “arises out of” or is “connected with a work activity” if it was caused by:
- A failure in the way a work activity was organised (e.g. inadequate supervision of a field trip)
- The way equipment or substances were used (e.g. lifts, machinery, experiments etc); and/or
- The condition of the premises (e.g. poorly maintained or slippery floors)

Information on how to make a RIDDOR report is available here:

[How to make a RIDDOR report, HSE](http://www.hse.gov.uk/riddor/report.htm)

<http://www.hse.gov.uk/riddor/report.htm>

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#### **11. Training**

The Welfare Assistant is responsible for identifying the need for new first aiders and Emergency First Aid qualified members of staff to be trained or renew their training.

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 (see appendix 3).

Staff are encouraged to renew their first aid training when it is no longer valid.

#### **12. Monitoring arrangements**

This policy will be reviewed by the Senior Assistant Headteacher - Care, Guidance and Support on an annual basis.

At every review, the policy will be approved by the full governing board.

### **13. Links with other policies**

This first aid policy is linked to the

- Supporting a student with medical conditions
- Health and safety policy
- Risk assessment policy
- Policy on supporting pupils with medical conditions
- Policy and Procedures: Journeys and Visits

## Appendix 1: list of trained first aiders & EpiPen trained

SURNAME	FORENAME	Expiry Date
Sam	Campaine	07/10/2025
Conway	Yvonne	02/04/2025
Lalji	Gulzar	02/04/2025
Fran	Brown	07/10/2025
Kalaora	Sigal	20/05/2024
Soday	Jackie	02/10/2025
Barok	Sofia	19/04/2025
Hussneara (Ivy)	Began	21/05/2024

## Appendix 2: list of emergency first aiders at work & EpiPen trained

Name	Surname	FIRST AID COMPANY	Expiry Date
Ambreen	Safdar	STS Complete Health & Safety	07/10/2025
Ronny	Jaehne	STS Complete Health & Safety	07/10/2025
Carolyn	Byrne	STS Complete Health & Safety	07/10/2025
Debbie	Barlow	STS Complete Health & Safety	07/10/2025
Sophie	Neudert	STS Complete Health & Safety	07/10/2025
Kristina	Greally	STS Complete Health & Safety	07/10/2025
Lewis	Billington	STS Complete Health & Safety	07/10/2025
Aurele	Bourin	STS Complete Health & Safety	07/10/2025
Fethi	Berkkun	STS Complete Health & Safety	20/05/2024
Louise	Cook	STS Complete Health & Safety	20/05/2024
Henriette	Fritsch	STS Complete Health & Safety	20/05/2024
Beth	Fenner	STS Complete Health & Safety	20/05/2024
Alyona	Altseva	STS Complete Health & Safety	19/04/2025
Kerem	Ali	STS Complete Health & Safety	19/04/2025
Micahel	Adu	STS Complete Health & Safety	19/04/2025
Sue	Hassan	STS Complete Health & Safety	19/04/2025
Tamara	king	STS Complete Health & Safety	19/04/2025
Yen	Tran	STS Complete Health & Safety	19/04/2025