



## CALDEW SCHOOL

### FIRST AID POLICY

*Reviewed under Resources and Finance Committee*

*Reviewed annually*

*Adopted: November 2025*

*Next review: October 2026*

NOTE: Caldew School is an Academy and where reference is made to school(s) this should be taken to refer to 'academy' in so far as the reference specifically applies to Caldew School.

This first aid policy is linked to the

- Health and Safety Policy
- Medical Needs Policy

#### **General Statement**

Caldew School is committed to providing emergency first aid provision in order to deal with accidents and incidents affecting employees, students and visitors.

The arrangements within this policy are based on the results of a suitable and sufficient first aid needs assessment carried out by the School with regard to all staff, students and visitors.

The Headteacher has overall responsibility for ensuring that the School has adequate and appropriate first aid equipment, facilities and first-aid personnel, and for ensuring that the correct first-aid procedures are followed.

This policy aims to comply with paragraph 3(6) of the *Schedule to the Education (Independent School Standards) (England) Regulations 2003* (SI 2003/1910), the *Health and Safety at Work etc. Act 1974* and subsequent regulations and guidance including the *Health and Safety (First Aid) Regulations 1981* (SI 1981/917) and the *First Aid at Work*:

Health and Safety (First Aid) Regulations 1981, approved code of practice and guidance (current version 1/10/2015).

All staff should read and be aware of this policy, know who to contact in the event of any illness, accident or injury and ensure this policy is followed in relation to the administration of first aid. All staff will use their best endeavours, at all times, to secure the welfare of the students.

Anyone on the School premises is expected to take reasonable care for their own and others' safety.

This policy is part of a number of school policies aimed at safeguarding students in all circumstances.

#### **Aims of this Policy**

- To ensure that the School has adequate, safe and effective first aid provision in order for every student, member of staff and visitor to be well looked after in the event of any illness, accident or injury, no matter how major or minor
- To ensure that all staff and students are aware of the procedures in the event of any illness, accident or injury
- To ensure that medicines are administered at the School only when express permission has been granted for this and in accordance with their approved usage
- To ensure that all medicines are appropriately stored
- To promote effective infection control

Nothing in this policy should 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 for the emergency services 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 site.

To achieve the Policy Aims, the School will:

- Have suitably stocked first-aid boxes, with items all in date
- Carry out a suitable and sufficient assessment of the risks posed to persons in the event that they suffer an accident, injury or ill health
- Appoint sufficient trained first-aiders to take charge of first aid
- Provide information to employees, students and parents on the arrangements for first aid
- Have a procedure for managing accidents, including immediate liaison with emergency services, medical staff and parents
- Review and monitor arrangements for first aid as appropriate on a regular basis (and at the very least on an annual basis)

### **First-aid boxes and first-aid travel bags**

The first aid needs assessment has identified the requirement for first aid kits to be available in the following locations:

- First Aid room and supporting mobile bag– Student Services
- Learning Centre office
- PE office off changing rooms x 2
- Reception
- Mobile trip bags (Kept in admin office x 10)
- One mobile sports bag (Kept in First Aid room)

At least one first-aid kit should be taken on all off-site activities along with individual student medication such as inhalers and epipens. Contact details, including medical information, should be taken on all school trips.

The School's minibus also has a prominently marked first-aid box, which is stocked in accordance with *Part 2 Schedule 7 of the Road Vehicles (Construction and Use) Regulations 1986*.

First-aid kits will be stocked with a minimum of:

- Waterproof Plasters
- Wrapped sterile adhesive dressings
- Sterile eye pads
- Individually wrapped triangular bandages
- Safety pins
- Individually wrapped sterile un medicated wound dressings of various sizes
- Disposable gloves
- Burn relief dressings
- Moist cleansing wipes
- Scissors
- Foil blankets
- Sterile water pods
- Micropore tape

It is the responsibility of the Administration Supervisor to check the contents of all First Aid Kits on a termly basis and record the findings on 1<sup>st</sup> Aid Kits Checks. Completed checklists are to be stored on the shared drive in the Central File > First Aid.

It is acceptable for bandages and dressings to be used where the packaging is still intact, ***up to a year out of date***. Plasters and any items which will touch an open wound must be in-date. In between the termly checks, the qualified first aiders are to monitor the stock levels within their local first aid kit and request replacement stock from the Administration Supervisor as required.

### **First Aiders**

The main duties of first-aiders are to give immediate first aid to students, staff or visitors when needed and to ensure that an ambulance or other professional medical help is called when necessary.

First-aiders are to ensure that their First Aid certificates are kept up to date through liaison with the Headteacher. They will meet on a regular basis to ensure any new information on students is circulated.

The following members of designated staff have completed a HSE-approved first aid course and hold a valid certificate of competence in First Aid at Work (FAW) or Emergency First Aid at Work (EFAW):

Abi Little  
Brendan McArdle  
Carrig Suleman  
Catherine Armstrong  
Joanne Atkinson  
Karen Cavanagh  
Kim Wallace  
Lisa Benson  
Lorraine Graham  
Mathew Marston  
Pauline Steenbergen  
Paul Hammond  
Paul Harrison

Sara Taylor  
Sheila Tylor  
Steph Sansom  
Thomas Carrick

The following have certificates in Outdoor Emergency First Aid:

Carrig Suleman  
Paul Hammond  
Paul Sharpe  
Paul Thomas

The Headteacher will ensure that there are appropriate numbers of first-aiders and/or Appointed Persons at all times and will ensure that they have undergone appropriate training, refreshed at three-yearly intervals.

The School will maintain a record of employees who have undergone first-aid training, which can be requested from the School office.

First-aiders will complete an approved training course; they should give immediate help to casualties with common injuries or illnesses and those arising from specific hazards at school; when necessary, they should ensure that appropriate medical assistance is called, e.g. ambulance. Risk assessments will be completed by relevant teachers, not necessarily a first aider, including the science lab and PE equipment. First-aiders will be kept informed of any changes.

All visits offsite have a person who has undertaken a basic first aid awareness course or a risk assessment that has checked the first aid facilities available at the destination.

## **Arrangements for after school extra-curricular activities and staff working during the holidays**

Staff leading after school extra-curricular activities should contact the First Aider via the Radio located at Student Services. If a serious injury occurs an ambulance should be called immediately. Administration and site staff members have first aid certificates and are available at various times during the holidays.

## **First Aid Information**

Notices are posted in the School indicating the location of the first aid boxes and the names of the School's first-aiders in reception and the first aid room.

## **Emergency Procedure in the event of an accident, illness or injury**

If an accident, illness or injury occurs, the member of staff in charge will assess the situation and decide on the appropriate next course of action, which may involve calling immediately for an ambulance or calling for a first aider. If summoned, a first aider will assess the situation and take charge of first aid administration. First-aiders should be contacted according to Availability.

If the first-aider does not consider that he/she can adequately deal with the presenting condition by the administration of first aid, he/she should arrange for the injured person to access appropriate medical treatment without delay. A member of SLT should also be informed.

If a student or member of staff suffers from illness, then the following guidelines must be followed:

- Anyone who suffers from vomiting and diarrhoea is required to stay absent from School until at least 48 hours after their symptoms have gone.
- Anyone who suffers from vomiting alone is required to stay absent from School until at least 24 hours after their symptoms have gone.

## **Ambulances**

The first-aider/appointed person must always call an ambulance on the following occasions:

- In the event of a serious injury
- In the event of any significant head injury
- In the event of a period of unconsciousness
- Whenever the first aider is unsure of the severity of the injuries
- Whenever the first aider is unsure of the correct treatment

If an ambulance is called the first-aider in charge should plan for the ambulance to have access to the injured person. A member of SLT should also be alerted.

Arrangements should be made to ensure that any student is accompanied in an ambulance, or followed to hospital, by a member of staff until one of the student's parents/carers or their named representative is present.

A member of staff will remain with the student until one of the student's parents/carers or a named representative appointed by a parent arrives at the hospital.

## **Procedure in the event of contact with blood or other bodily fluids**

First-aiders should take the following precautions to avoid risk of infection:

- cover any cuts and grazes on their own skin with a waterproof dressing
- wear suitable disposable gloves
- use suitable eye protection and a disposable apron where splashing may occur
- use devices such as face shields, where appropriate, when giving mouth-to-mouth resuscitation
- wash hands after every procedure
- dispose of any equipment used in a hazard bag.

If a first-aider suspects that they or any other person may have been contaminated with blood and/or other bodily fluids which are not their own, the following actions should be taken without delay:

- wash splashes off skin with soap and running water
- wash splashes out of eyes with tap water and/or an eye wash bottle
- wash splashes out of nose or mouth with tap water, taking care not to swallow the water
- record details of the contamination
- take medical advice as appropriate

## **Accident Reporting**

All accidents, administration of first aid and/or medicine will be recorded in the Accident Report Book which is located in Student Services. There are separate books for staff, students and trips.

The record shall include:

- Date, time and place of accident
- Name and form of the person involved (if a student)
- Details of injury and treatment and any medication given
- Outcome of accident
- Name and signature of the person or first-aider dealing with incident

## **Reporting to Parents/carers**

In the event of an accident involving a student, where appropriate, it is our policy to always notify parents/carers of their student's accident if it: -

- Is considered to be a serious (or more than minor) injury
- Requires attendance at hospital

Our procedure for notifying parents/carers will be to use all telephone numbers available to contact them and leave a message should the parents/carers not be available. In the event that the parents/carers cannot be contacted and a message has been left, our policy will be to continue to attempt to contact the parents/carers every hour.

Parents/carers must also be informed in writing via the school's 'head injury' letter of any injury to the head, minor or major. In addition, a text will be sent to the parent to notify them of the incident. If further medical treatment is required a follow up call should also be made to the parent/carer within 24 hours of the incident (or notification of the further treatment by parent/carer).

A copy of the School's accident and first aid book is available for inspection by parents.

## **Reporting to HSE**

The School is legally required under the *Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995* (SI 1995/3163) (RIDDOR) to report the following to the HSE (most easily done by calling the Incident Contact Centre (ICC) on 0845 300 99 23). The Cumberland Council form should also be completed.

Accidents involving students or visitors

- where a person is killed or is taken from the site of an accident to hospital and where the accident arises out of or in connection with:
  - any School activity (on or off the premises)
  - the way a School activity has been organised or managed (e.g. the supervision of a field trip)
  - equipment, machinery or substances
  - the design or condition of the premises

#### Accidents involving Staff

- work-related accidents resulting in death or major injury (including as a result of physical violence) must be reported to the HSE immediately (major injury examples: dislocation of hip, knee or shoulder; amputation; loss of sight; fracture other than to fingers, toes or thumbs)
- work-related accidents which prevent the injured person from continuing with his/her normal work for more than three days must be reported within 10 days
- cases of work-related disease that a doctor notifies the School of (for example: certain poisonings; lung diseases; infections such as tuberculosis or hepatitis; occupational cancer)
- certain dangerous occurrences (e.g. near misses - reportable examples of these include bursting of closed pipes; electrical short circuit causing fire; accidental release of any substance that may cause injury to health)

For more information on how and what to report to the HSE, please see <http://www.hse.gov.uk/riddor/index.htm>. It is also possible to report online via this link.

#### Visits and Events off Site

Before undertaking any off-site events, the teacher in charge of the excursion will assess level of first-aid provision required by undertaking a suitable and sufficient risk assessment of the event and persons involved. A portable first-aid kit will be taken on all off site visits.

Administration of medicine (and procedures for students with medical conditions such as asthma, epilepsy, diabetes etc.) must be carefully checked and prepared for before the excursion takes place. The School will obtain parental consent before administering any medicines to students.

A central list of all students' medical conditions and any particular requirements are kept at the School Office. A further copy is held by each form teacher.

Parents of students required to carry or use an inhaler or EpiPen are required to notify the School of this.

The information held by the School will include a record of students who need to have access to asthma inhalers, EpiPens, injections or similar; also, information regarding relevant parental consent, as well as a record of dispensation of medication in year group files in pastoral services area. (name of student, name of medicine, date, time, dosage, signature of person who supervised).

As a general rule, first-aiders must not administer any medication that has not been prescribed for that particular student by a doctor, dentist, nurse or pharmacist.

#### Storage of Medication (also covered in the medical needs policy)

Medicines are always securely stored in accordance with individual product instructions save where individual students have been given responsibility for keeping such equipment with them.

All medicines shall 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.

Where appropriate, individual students will be given responsibility for keeping equipment such as asthma inhalers and EpiPens, or equipment associated with diabetes management.

The first-aiders will have access to, and administer where necessary, an inhaler or EpiPen for all students deemed not to be sufficiently competent to carry this themselves.

In other cases, such equipment and medicines will be securely kept, suitably labelled, in the First Aid Room.

All medicines will be returned to the parent when no longer required to arrange for safe disposal.

### **Short-term medication needs**

Some students may need to take medication at school, for example antibiotics, creams, pain relief for migraines, etc. If this is necessary the school must have written consent from parents/carers and members of staff administering the medication should check:

- the student's date of birth
- written instructions provided by the parents/carers/prescription
- that the student has not already received medication
- the prescribed dose
- the expiry date
- how the medication should be administered

A record should be kept of what medication has been administered in year group files in the pastoral services area.

### **Bumped-head protocol**

- All head injuries will be first seen and assessed by a qualified first-aider
- Students suffering from a head injury will not be left unattended until the first-aiders are confident that a serious injury has not been sustained

The school has a detailed bumped-head protocol (appendix 1 attached)

If a student or member of staff suffers from a concussion, then the following guidelines must be followed:

- They cannot participate in any physical activity for 19 days.
- They may only return to physical activity after 19 days when signed off by a doctor or a parent

## Appendix 1 BUMPED HEAD/HEAD INJURY FLOW CHART

Does the student have one or more of the following?

Unconsciousness briefly or longer : Difficulty in staying awake :  
Seizure : Slurred speech : Visual problems including blurred or double vision : Confusion ( Rule out by asking date, where they are what tutor group they are in) Balance problems : Loss of power in arms, legs or feet : Pins and needles : Amnesia : Leakage of clear fluid from nose or ears : Bruising around eyes/behind ears : Vomiting repeatedly : Neck pain

Has the child had brain surgery in the past?

Has the child got a clotting disorder?

YES

### SEVERE HEAD INJURY

If unconscious, suspect neck injury and do not move the student.

**CALL 999 FOR AMBULANCE**

Notify parent/carers asap (call all telephone numbers and leave a message) Repeat every hour

**INFORM MEMBER OF SLT**

- Arrangements should be made to ensure that the student is accompanied in an ambulance or followed to hospital by a member of staff until a parent/carer is present
- If the ambulance service assesses the student over the phone and no ambulance is required, student to be sent home.
- Bumped head letter to be provided to the parent/carer when collected
- First aider to record episode in accident book and inform admin team for H&S records

**UPDATE SLT**

If student is taken to hospital or further medical treatment is confirmed the admin team should make a welfare call within 24 hours. Graduated return to play requirements to be discussed and followed up as required.

NO

Has the student got bruising, a mark, swelling, abrasion, dizziness, headache, confusion, nausea or vomiting?

YES

NO

### BUMP TO THE HEAD

- First Aider to observe for a minimum of 15mins, if no change pupil can return to class.
- Bumped Head letter provided to be shown to class teacher & parents. **Student should not be relied upon to inform teachers of their injury**
- First aider to record episode in the accident book and inform admin team before 3pm to text parent/carer
- If further medical treatment is confirmed the HOY/pastoral team should make a welfare call within 24 hours.
- Graduated return to play requirements to be discussed and followed up as required- see severe head injury information

Deterioration

### MINOR HEAD INJURY

- Contact parent/carer to notify of head injury and communicate a plan of action
- If the students condition deteriorates and shows any of the symptoms of a severe head injury, follow protocol in severe head injury section
- Complete observation checklist and repeat every 15 minutes until the student feels better and returns to class or is collected by parent/carer
- Bumped head letter to be provided to take to next class/home **First Aider to advise class teacher of the incident as they return to class. Student should not be relied upon to inform teachers of their injury.**
- First aider to record episode in the Accident book including details of how the injury occurred. Inform admin team.
- If further medical treatment is confirmed admin team should make a welfare call within 24 hours. Graduated return to play requirements discussed and followed up as required- see severe head injury information.

Deterioration