

Staines Preparatory School



Welfare and First Aid Policy (including EYFS)

September 2025

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1. 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

2. 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, guidance from the Health and Safety Executive (HSE) on incident reporting in schools, and the following legislation:

- The Health and Safety (First-Aid) Regulations 1981, which state that employers must provide adequate and appropriate equipment and facilities to enable first aid to be administered to employees, and qualified first aid personnel
- The Management of Health and Safety at Work Regulations 1992, which require employers to make an assessment of the risks to the health and safety of their employees
- The Management of Health and Safety at Work Regulations 1999, which require employers to carry out risk assessments, make arrangements to implement necessary measures, and arrange for appropriate information and training
- The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013, which state that some accidents must be reported to the Health and Safety Executive (HSE), and set out the timeframe for this and how long records of such accidents must be kept
- Social Security (Claims and Payments) Regulations 1979, which set out rules on the retention of accident records
- The Education (Independent School Standards) Regulations 2014, which require that suitable space is provided to cater for the medical and therapy needs of pupils

3. Roles and responsibilities

In our Early Years Foundation Stage provision, at least 1 person who has a current full paediatric first aid (FPFA) certificate must be on the premises at all times.

For school trips off site, appropriately trained staff for the age range will be on the excursion.

Beyond this, SPS has a sufficient number of suitably trained first aiders to care for pupils and employees in case they are injured at school. (Appendix 1). Further, the school ensures that First Aid is administered in a timely and competent manner by reference to this policy.

Section 3.1 below sets out the expectations of appointed persons and first aiders as set out in the 1981 first aid regulations and the DfE guidance listed in section 2.

Appointed person(s) and first aiders

The school's appointed persons are responsible for First Aid, work within a well-equipped welfare room which is manned throughout the school day. All have an up to date First Aid at work and/or full paediatric first aid and are listed below:

	First Aid At Work	Full Paediatric First Aid
Mrs C Foster (Welfare Officer)	Sept 25 – Aug 28	Sept 25 – Aug 28
Ms N Nayak		Feb 25 – Jan 28
Mrs T Clarke		Feb 25 – Jan 28

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 (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 or to send the child to Welfare for treatment
- Sending pupils home to recover, where necessary
- Completing all required information on the School's intranet iSAMS Medical Module database
- Keeping their contact details up to date

The Governing Body

The governing body 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.

The Headteacher

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

- Ensuring that an appropriate number of appointed persons and 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)

Staff

School staff are responsible for:

- Ensuring they follow first aid procedures
- Ensuring they know who the first aiders and/or appointed person(s) in school are
- Ensuring they know to report for incidents they attend to where a first aider/appointed person is not called
- Informing the Headteacher or their line manager of any specific health concerns or first aid needs

4. First Aid Equipment

Eleven first aid kits are located throughout the school: (See Appendix 2)

A defibrillator is located in the Founders Building adjacent to all sports facilities including playing fields. (Highlighted red on Appendix 2)

Our first aid boxes are based on the HSE's recommendations. See Appendix 3 for list

Parents are asked to complete a medical declaration when registering with the school and at any time there is a change in circumstances. Parents are also given a form annually to complete at the end of each summer term.

Information is held on the iSAMS database, for access by staff at any time. Extra-Curricular Club registers have emergency medication requirements marked (e.g. Adrenaline Auto Injector (AAI) users and Asthma sufferers).

5. First Aid Procedures in School

Procedures for dealing with more common conditions and occurrences are set out in this policy.

The procedure for administering medicine is clearly set out in the Section 7 of this policy and strictly adhered to. Parents/carers are advised of medication administered and treatment given either in person or by phone call to facilitate continuity of care.

In the Event of a Major Accident, Incident or Illness

On admission to the school, parents give permission for Emergency Medical Treatment to be sought from appropriate staff i.e. First Aiders or at hospital. In such an event, the following procedures will apply:

- In the first instance, the Welfare Officer will be notified and take responsibility for deciding upon the appropriate action. In the absence of the dedicated Welfare Officer another suitably trained member of staff will take responsibility
- The First Aider will assess the situation and decide whether the child needs to go straight to hospital or whether they can safely wait for their parent/carer to arrive. First aid will be administered, if necessary.
- If the child needs to go straight to hospital, an ambulance will be called. At the same time the parent will also be contacted. A member of staff will accompany the child to the hospital if the parent has not arrived at the school to accompany their child. The member of staff will consent to medical treatment being given, as long as the school acceptance form has been signed, and every effort has been made to contact the parent first.
- If the child does not need to go straight to hospital, but their condition requires medical attention, the parent will be contacted and asked to collect their child, in order that they may seek advice from their GP, walk in clinic or A&E department. In the meantime, the child will be made as comfortable as possible and be kept under close supervision.
- It is the parents' responsibility to ensure the school is kept informed of accurate up-to-date contact numbers at all times.
- All such accidents or incidents will be recorded in detail and logged in the iSAMS Medical Module for pupils and the Accident Record Book for adults in accordance with 'Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013' (RIDDOR) guidelines, which state which types of incidents are reportable to them. The report is then made online. More information regarding what kind of incidents would occur in a school under RIDDOR can be found <http://www.hse.gov.uk/pubns/edis1.pdf> (Incident reporting in Schools – Education Information Sheet No1)
- The Welfare Officer will inform the Headteacher/Bursar who will consider whether the accident or incident highlights any actual or potential weaknesses in the School's policies, procedures, facilities or equipment and act accordingly, making suitable adjustments where necessary. The Bursar will report regularly to the Headteacher and governing body to advise them about the School's record on accidents and incidents.

6. Reporting to the HSE

The Headteacher 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 Headteacher will report these to the HSE as soon as is reasonably practicable and in any event within 10 days of the incident – except where indicated below. Fatal and major injuries and dangerous occurrences will be reported without delay (i.e. by telephone) and followed up in writing within 10 days.

School staff: reportable injuries, diseases or dangerous occurrences

These 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 scalping 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
- Work-related injuries that lead to an employee being 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 Headteacher 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
- 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 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>

Notifying parents (early years only)

The Nursery / Reception team or Welfare will inform parents of any accident or injury sustained by a pupil, and any first aid treatment given, on the same day, or as soon as reasonably practicable. Parents will also be informed if emergency services are called.

Reporting to Ofsted and child protection agencies (early years only)

The Headteacher will notify Ofsted of any serious accident, illness or injury to, or death of, a pupil while in the school's care. This will happen as soon as is reasonably practicable, and no later than 14 days after the incident.

The Headteacher will also notify Surrey Children's Services of any serious accident or injury to, or the death of, a pupil while in the school's care.

In the Event of a Minor Accident, Incident or illness

Parents are advised that children suffering from sickness and diarrhoea are excluded from school for at least 48 hours after symptoms have ceased. Parents are advised to notify the school of this and other notifiable conditions. Public Health England guidelines are followed.

Calpol (paracetamol) can be given before school for minor symptoms as long as a fever has not been presented. The parent must inform the child's class teacher/ Welfare officer to ensure staff can monitor the child throughout the day in line with the school's medical policy.

Fever: If the child has a high temperature (typically 38°C or above), they should be kept at home until they are fever-free for 24 hours without the use of medication.

Mandatory Notification: Parents must inform the school's welfare officer or class teacher. This prevents the risk of double-dosing and allows staff to monitor if the child's condition worsens.

In School:

- In the first instance, the Welfare Officer will be notified and take responsibility for deciding upon appropriate action. In the absence of the dedicated Welfare Officer another suitably trained member of staff will take responsibility.
- If the child is judged to be able to safely remain at the school, the First Aider will treat the injury/ illness themselves.
- If and when the child is feeling sufficiently better, they will be resettled back into class/play.
- If the 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 first aider will recommend next steps to the parents.
- In the Nursery minor accidents, incidents or illnesses are recorded in a book which the parent/ carer signs to acknowledge receipt of information. In the Reception classes, an e-mail is sent to parents/ carers detailing the type of injury or illness and any treatment given. All accident, incidents and illnesses are also recorded on iSAMS medical module.
- If the child has been sent to Welfare from the playground by the teacher on duty, in the Lower School, that duty teacher will inform the class teacher of the incident, at the end of the play. If necessary, the class teacher will be asked by Welfare to keep the child under supervision and return the child to the Welfare Office if they feel it is necessary. The teacher will advise the parent/carer on collection of the child at the end of the school day.
- In the Upper School, if the child has been sent to Welfare from the playground by the teacher on duty, on the child's return to class, he/she should inform the subject teacher, who will keep the child under supervision and if appropriate will return the child to welfare. The Welfare Officer will ask the pupil to inform their parents unless it is a head bump in which case the Welfare Officer will email the parents.
- If the injury or illness incurred is such that treatment by the First Aider is deemed inappropriate, but does not warrant hospitalisation, the parent will be contacted immediately and asked to collect their child. Until the parent/carer arrives, the child will be kept under close supervision and made as comfortable as possible. For example; diarrhoea or vomiting, or unexplained rash (needing care at home or GP appointment).
- All such accidents and incidents will be recorded in detail and logged in the iSAMS medical module or the Accident Record Book (in accordance with RIDDOR guidelines).

Trips:

Risk assessments will be completed by the trip leader and finalised by the Headteacher prior to any educational visit that necessitates taking pupils off school premises.

There will always be at least 1 first aider with a current paediatric first aid (PFA) certificate on school trips and visits, as required by the statutory framework for the Early Years Foundation Stage.

7 The Procedure for Administering Medication

A member of staff will be responsible for ensuring that:

- Prior consent from the parent is arranged. This requires completion of a 'Request to administer medication' form. Occasionally, an e-mail may be sent to welfare@stainesprep.co.uk or a verbal message may be taken and the form completed later that day, when the parent is at the school. A signed letter from the parent with date, name of medication, dosage and time to be given (this should fit into break or lunch times wherever possible), will be accepted if a form cannot be completed at the start of the school day. The decision will be made by the welfare person in charge as to whether the medicine is appropriate to be given in school.
- The medication is properly labelled with the child's name and safely stored during the school day, in the Welfare office. All medicine must be given to Welfare in its original packaging. Prescription medication should have the pharmacy label clearly showing the child's name with a valid expiry date.
- A check is made to identify the child and ensure they correspond to medicine instructions given by the parent/carer before medicine is administered.
- Medication that has been given, time and to whom is recorded in the iSAMS medical module.
- If medicine is given on an optional basis, an e-mail will be sent to parents/ carers with time details.
- The parent must complete a new form if changes need to be made regarding the administration of the medicine i.e., dosage or times given or when a medication expires/ is replaced. A separate form must be completed for each medicine held in school.
- Calpol and Children's Nurofen is kept as 'stock' and may be given as necessary once permission has been received from parent.

Should antibiotics be prescribed, to assist the recovery of the child, the Welfare Officer may suggest that the child remains away from school until the first three doses have been taken.

A talk on the importance of medicines and the need for safety is given to the children in Year 2.

If for any reason a child refuses to take their medication, staff will not attempt to force them to do so against their wishes. If and when such a situation occurs, the Bursar and the parent will be notified, and the incident recorded in iSAMS medical module.

Allergies, Auto Injectors and Anaphylaxis

- An individual treatment plan (Care plan), agreed with the School and parents, is completed for each child prone to anaphylaxis.
- A photograph of each child and details of their individual allergies, is displayed in the Staff room, a copy of the child's details is kept in Welfare, in the red folder. This is locked away at the end of the day. This is agreed by the parents and replaced as necessary. This information is shared with our catering contractors.
- First Aid Courses contain instruction on administering Auto Injectors, therefore all staff trained in first aid have the appropriate knowledge.
- The Auto Injector, care plan and other appropriate medicine, is included in the individual's care pack, this accompanies each child when not on the school premises. At risk children will be placed in a group with a member of staff who is trained to administer the medication. It is the parents responsibility to ensure the school is supplied with medicines which are in date.
- Children with particularly severe allergies have their medication in class as well as in the Welfare office. Children in Year 4-6 with severe allergies should carry their AAI with them in a safe container (e.g. a bum bag). These are collected from welfare in the morning, handed to each teacher, kept on the labelled hooks in the classroom for the duration of the lesson and collected before moving to the next lesson. These are then returned to welfare at the end of the day.
- The school holds a 'stock' auto injector for emergency use only or should 111 / 999 advise the school to administer this.

Asthma

- Inhalers are kept on site for all pupils diagnosed with asthma.
- Parents are asked to complete a form giving staff permission to administer medication.
- If the child appears to be wheezing or requiring the use of their inhaler frequently throughout the School day, parents are called to collect them and an Asthma Nurse Clinic appointment advised.
- If a child has an asthma attack on site an ambulance is called, and the child is escorted by a member of staff to the hospital and parents contacted to meet them.
- The school holds a 'stock' salbutamol inhaler for children who have asthma but do not have their inhaler available or should 111 / 999 advise the school to administer this.

Diabetes

- If a child is diabetic, staff work closely with parents and the child's Doctor to adhere to the treatment the child is receiving, and an individual care plan would be created.
- Welfare staff will be trained in the administering of injections should this be deemed necessary.
- A photograph of each child is displayed in both the Staff Room and the red care plan folder held in Welfare, to enable staff to identify them easily. This is agreed by the parents and replaced as necessary.
- The child's dietary specifications would be adhered to following the Dietary Requirements section of this policy.

Epilepsy

- An individual treatment plan, agreed with the child's Doctor, School and parents, is completed for a child with Epilepsy at the School.
A photograph of each child is displayed in both the Staff Room and the red care plan folder held in Welfare, to enable staff to identify them easily. This is agreed by the parents and replaced as necessary.
- A talk is given by Welfare Staff or other appropriate adult to the other children in the class of the child who is prone to an epileptic fit.

Other Conditions and Welfare Needs

- When a child has any other conditions or welfare needs involving an individual care plan this can be provided to and kept in welfare. This plan will be communicated to staff and updated as necessary.
- Individual accommodations will be put in place according to the care plan.
- Welfare needs without an individual care plan should be discussed between parents/ carers and the school and put into place as required.
- In exceptional circumstances the school may ask you to provide a GP letter, detailing your child's illness and the likely duration your child will be absent from school or are unable to take part in certain lessons within the curriculum.

Fractures

When a child with a fracture or similar injury, returns to school, the parents will advise the school, in writing, what guidance the Doctor/Nurse have given for after care i.e. what care should be taken at break times etc. Any child who has a hard plaster of paris or fibre glass cast protecting their injury is not allowed to take part in any sporting activity or swimming lessons. A risk assessment and a Personal Emergency Evacuation Procedure (PEEP) will be completed as soon as reasonably practicable but no later than day 1 by the Facilities Manager, in conjunction with key staff.

Biting

There are, unfortunately some instances of biting in the EYFS due to the young age of the children. Whilst this is distressing for parents, staff are trained to handle these situations. The School monitors this by:

- Observing the children at all times
- Exchanging information with parents and staff e.g. Useful information such as teething
- If a child bites another child, the child who has been bitten will be comforted and appropriate first aid will be carried out.
- After a period of time the School may need to take further action, which could include seeking extra information or advice from other professionals e.g. health visitors.
- If a bite breaks skin, the School advises parents to seek medical advice. The child who bit will be removed from the situation and explained that biting is unacceptable behaviour, and the School will then act in accordance with the behaviour policy.

Sun Protection

The Headteacher and staff understand the dangers posed to children and themselves by over exposure to the sun.

- Sunscreen should be applied at home before the start of the school day.
- Parents are advised that children are encouraged to bring their own, named, sunscreen. Factor 30 or above is recommended. Children are also made aware of the importance of not sharing sunscreen (in case of allergies).
- Staff will be available to assist younger children who are unable to apply their own cream.

- As part of the curriculum, children are informed of the importance of sun protection and sun safety will be discussed during the summer term. This will include advice on appropriate clothing to cover sensitive areas, for example, shoulders.
- Shaded areas are provided for use at break times, particularly lunch breaks.
- Sun hats are advised, preferably legionnaire style.
- Parents are encouraged to supply filled water bottles that may be drunk during class time. Water fountains are provided for break times. Children are made aware of the importance of drinking plenty during hot weather and are encouraged to refill their water bottles throughout the day.

Dietary Requirements

- Dietary details are requested on entry to the school and on the annual medical form. Parents are responsible for updating the Welfare office of any change in details. Records are updated so that all staff are aware of needs. Staff check details regularly, particularly for trips away from school.
- Medical or religious diets are catered for. Welfare will liaise with the Class Teacher, Bursar, parents and kitchen staff to agree how to meet the specific needs of the child. Lunch boxes will only be permitted on Doctor's instructions. Most intolerance and allergen diets can be catered for by our catering contractors
- Children from Reception to Year 4 inclusive are issued with lunch badges and or lanyards, identifying special dietary requirements. Breakfast club and after school club hold a list of dietary requirements which is updated with any changes.
- Nursery Children – Nursery and kitchen staff work together using an allergy and dietary requirements list.
- For children with food allergies a allergy lanyard is provided with a photo of the child and the details of the allergy and if an AAI is required

Head Lice Prevention

- Welfare should be notified of cases of head lice. They will then inform other class members' parents to be extra vigilant, whilst protecting the identity of the informant.
- The school advise that all pupils with long hair should have it tied up to help prevent spread of head lice. If necessary, hair ties will be given out and children asked to tie their hair up. Parents and pupils are reminded to carry out regular and effective checks.
- A talk on headlice is given by Welfare Staff when required.

Health Promotion

- Health promotion/well woman talks are regularly undertaken within PSHE lessons to advise children of various health issues. Welfare staff are available for discussions or to give talks on individual subjects, when requested.
- Year 6 girls receive additional lessons covering the onset of menstruation, its management and personal hygiene.

Children Sustaining a Bump to the Head

- All children who have reported an injury where a bump to the head has occurred are seen intreated and assessed.
- First Aid will be administered if necessary and a head bump letter will be sent by e-mail from Welfare.
- If the child is considered fit to return to class, the teacher(s) is made aware of the injury. In the lower school the teacher ensures the head bump is bought to the attention of parents. In the upper school, the child is advised to make their teachers and the collecting adult aware at the end of the school day.
- If the child needs to leave school, the First Aider gives a verbal handover to the next carer (i.e.. Parent, guardian or hospital worker)

Procedure on Spillage of Bodily fluids

Staff wear PPE at all times when dealing with the spillage of bodily fluids. Careful attention is paid to ensure these fluids are disposed of hygienically and without coming into contact with others.

In cases of diarrhoea, soiled clothes are double bagged, sealed and undergarments disposed of in a clinical bin. Sickness is covered in dry granules, swept and also disposed of in sealed double bag and all areas are disinfected. Wet clothes are bagged, named and sent home.

After any bleed, used cleaning materials and PPE are placed in a clinical bin in the Welfare Office, which is disposed of by a specialist contractor on a regular basis.

Pupil Mental Health and Well Being

Please see our Pupil Mental Health and Well Being Policy

Bereavement Arrangements

Please see our Bereavement Policy

Health and Welfare of Staff

All members of the school community are required, having regard to their age, maturity and level of understanding, to act at all times in accordance with school welfare procedures. All members will not behave in any way that would put themselves or others at risk.

The School undertakes to ensure the health and welfare of all staff. This includes the assessment and prevention of work-related stress through the School's Stress Management and Wellbeing at Work Policy and in compliance with Health and Safety law.

If a member of staff is unfortunate enough to be one of the very small minority subject to serious physical and/or verbal abuse, there are a variety of sources of potential support available to them. Staff should immediately inform their Line Manager or a member of the Senior Leadership Team for help and support.

The school is committed to the wellbeing of its staff. Staff are members of Health Assured, Employee Assistance Programme: www.healthassuredeap.com with a free 24-hour personal support service: 0800 030 5182. Should you require more details of this service please contact the Bursar E13 or Ext 206 The School will not tolerate violence, threatening behaviour or abuse directed against staff.

Pregnant Workers and New Mothers

It is the responsibility of staff to inform their line manager as soon as they know they are pregnant. In line with the School's Health and Safety policy, a risk assessment is carried out, in consultation with the worker, to ensure that there are no risks to the expectant mother or baby from the employee's duties or environment.

When a nursing mother returns to work, a further risk assessment is carried out, and duties are adjusted accordingly if necessary. The Welfare Staff would assist to ensure care plans are in place if appropriate.

9. Links with other policies

This first aid policy is linked to the:

- Health and safety policy
- EYFS policy
- Risk assessment policy
- Pupil wellbeing policy
- Allergens and intolerance policy
- Bereavement policy
- Pupil Mental Health and Wellbeing policy
- Stress Management and Wellbeing at Work Policy



APPENDIX 1 - Staff Trained in First Aid dates need to be amended

Surname	First Name	Staff Category	Full Paediatric First Aid Expiry Date as at Sep25	Emergency First Aid at work as at Sep25
Bathurst	Charlotte	LSA	9/1/2028	9/1/2028
Batsford	Rachel	LSA	8/29/2027	
Cade	Jane	Teacher	9/1/2028	9/1/2028
Cavell	Rebecca	Support	8/29/2027	
Cheesman	Tracey	LSA	9/1/2028	9/1/2028
Clarke	Trudi	Support	1/15/2028	1/15/2028
Cleary	Hollie	Teacher	8/29/2026	
Coombes	Michelle	LSA	9/1/2028	9/1/2028
du Toit	Kerry-Anne	Teacher	9/1/2028	9/1/2028
Falleiro	Roxanna	LSA	9/1/2028	9/1/2028
Foster	Cally	LS	9/1/2028	9/1/2028
Fowler	Elizabeth Jane	Support	9/1/2028	9/1/2028
Joll	Gregory	Teacher	8/30/2027	
Lyden	Alex	LSA	9/1/2028	9/1/2028
McCoig	Tracey	Support	9/1/2028	9/1/2028
Miles	Hannah	SLT	9/1/2028	9/1/2028
Morgan	Gareth	Teacher	8/30/2027	
Nayak	Nandini	Support	1/13/2028	1/13/2028
Povey	Emily	Teacher	9/1/2028	9/1/2028
Quinn	Laura	Teacher	8/30/2027	
Rakowski	Dawid	Support	8/30/2027	
Rapley	Lorraine	LSA	9/1/2028	9/1/2028
Reader	Andrea	SLT	8/30/2027	
Record	Frances	Teacher	9/1/2028	9/1/2028
Roberts	Kelly	Teacher	9/1/2028	9/1/2028
Roberts	Maria	Support	8/30/2027	
Sewell	Denise	Teacher	8/30/2027	
Shokar	Inderpal	LSA	9/1/2028	9/1/2028
Stait	Italia	Teacher	6/13/2026	
Upjohn	Leeanne	LSA	9/1/2028	9/1/2028
Waddington	Carrita	Teacher	8/29/2026	
Walgate	Jane	LSA	9/1/2028	9/1/2028
Walsh	Sarah	Teacher	6/6/2026	
Williams	Louisa	Teacher	8/29/2026	



Appendix 3

First aid equipment

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

The following is based on the HSE's recommendation for a minimum first aid kit

A leaflet giving general advice on first aid

- 20 individually wrapped sterile adhesive dressings (assorted sizes)
- 2 sterile eye pads
- 2 individually wrapped triangular bandages (preferably sterile)
- 6 safety pins
- 6 medium-sized individually wrapped sterile unmedicated wound dressings
- 2 large sterile individually wrapped unmedicated wound dressings
- 3 pairs of disposable gloves

No medication is kept in first aid kits.

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 leaflet giving general advice on first aid
 - 6 individually wrapped sterile adhesive dressings
 - 1 large sterile unmedicated dressing
 - 2 triangular bandages – individually wrapped and preferably sterile
 - 2 safety pins
 - individually wrapped moist cleansing wipes
 - 2 pairs of disposable gloves
- Information about the specific medical needs of pupils
- Parents' contact details

When transporting pupils using a minibus or other large vehicle, the school will make sure the vehicle is equipped with a clearly marked first aid box containing, at minimum:

- 10 antiseptic wipes, foil packed
- 1 conforming disposable bandage (not less than 7.5cm wide)
- 2 triangular bandages
- 1 packet of 24 assorted adhesive dressings
- 3 large sterile unmedicated ambulance dressings (not less than 15cm × 20 cm)
- 2 sterile eye pads, with attachments
- 12 assorted safety pins
- 1 pair of rustproof blunt-ended scissors