



**The Park Federation Academy Trust  
West Drayton Academy  
First Aid Policy  
2024-25**

## Approval History

<b>Signed by Chair</b>	Kevin Guest
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## Section 1: Introduction

West Drayton Academy (WDA) accepts its responsibility under the Health and Safety (First Aid) Regulations 1981 and acknowledges the importance of providing First Aid for employees, children and visitors within the school, so that they can be given immediate help if they are injured or taken ill. Under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR), some accidents must be reported to the Health and Safety Executive (HSE).

WDA's arrangements for carrying out the policy include the following key principles:

- Place individual duties on all employees.
- To report, record and where appropriate investigate all accidents.
- Records all occasions when first aid is administered to employees, pupils and visitors.
- Provide equipment and materials to carry out first aid treatment.
- Make arrangements to provide training to employees, maintain a record of that training and review annually.
- Establish a procedure for managing accidents in school which require First Aid treatment.
- Provide information to employees on the arrangements for First Aid.
- Undertake a risk assessment of the first aid requirements of the school.

## Section 2: Arrangements for First Aid

WDA has a First Aid qualified Welfare Officer employed specifically for administering to all first aid and welfare needs.

WDA currently has 13 designated first-aiders who are responsible for administering First Aid at the academy. A first-aider is someone who has completed training appropriate to the level of need as identified by the academy, namely: First Aid at Work (FAW) and Paediatric First Aid.

A list of all first-aiders is prominently displayed in the Welfare room.

The main duties of a first aider are to:

- give immediate help to casualties with common injuries or illnesses and those arising from specific hazards at school;
- when necessary, ensure that an ambulance is called.

The school will provide materials, equipment and facilities as set out in the DfE's '*Guidance on First Aid for schools*'.

The Education (School Premises) Regulations 1996 require every school to have a suitable room that can be used for medical or dental treatment when required, and for the care of pupils during school hours. The area must contain a washbasin and be reasonably near to a WC. At WDA, this room will be referred to as the **Welfare Room**.

All First Aid kits must be marked with a white cross on a green background.

The person responsible for checking the contents of First Aid boxes and restocking them as soon as possible after use is the Welfare Officer.

The location of First Aid kits at WDA will be:

- Nursery
- Staffroom
- Meeting Room

All staff will be informed of the First Aid arrangements through this policy, and training as appropriate. This should include the location of equipment, facilities and First Aid personnel, and the procedures for monitoring and reviewing the academy's First Aid needs.

### **Section 3: Procedures for First Aid**

A designated First Aider **must be consulted** in the event that a child (or member of staff) should sustain a **major injury** or injury of the following nature:

- Cut to head or serious knock
- Suspect sprain or break
- Stings: bees/wasps/insects (due to the possibility of allergic reaction)

In addition, a designated First Aider must be consulted to treat pupils who are known to have a specific illness e.g diabetics/pupils known to have allergic reactions/pupils with epipens in school - irrespective of the type of illness or injury sustained. On no account must these pupils be left / sent to self-administer their own treatment.

Pupils with specific needs have a health care plan to ensure their safety. This should always be consulted.

**A First Aider does not need to be the person administering an epipen or asthma pump.**

#### **Major Injuries/Serious Illness**

In the event of major injury or where a child has a specific illness, a designated First Aider should be sent for immediately and the child not moved. An informed assessment will be carried out and the appropriate treatment given.

Should the injury/illness require medical assistance (e.g. ambulance, hospital visit), a member of the office staff and the Principal should be contacted immediately. In an emergency, an ambulance should be called without delay.

Some accidents require hospital treatment but do not require an ambulance. It would normally be the parent who accompanies the child to hospital but if we are unable to make contact it is the school's responsibility to take the child, as quickly as possible, to the hospital. A member of the office staff would continue to attempt to contact the family.

Following an accident, the Premises Team is informed as quickly as possible to enable the accident site to be declared safe for other children. Depending on the nature of the accident it may be necessary to section the area off immediately until the Premises Team has declared it safe.

Any child who is sent home or sent to a doctor or hospital, owing to serious injury in school, must be sanctioned by the Principal or, in their absence, by a senior member of staff.

For children in the Nursery, in most instances it would be more appropriate for them to be treated in the Nursery washroom, where a First Aid kit is kept.

### **Bumps to Head**

These will always be reported to the Welfare Officer who will check the child very carefully and observe them for a period of time before sending them back to class. A note will be sent home to the parents detailing the injury (see below) and in some cases parents will also be informed by telephone.

### **Infectious Diseases**

In the event of a suspected or confirmed case of an infectious disease, the Welfare Team will contact Public Health England for advice. Guidance on infection control is displayed in the Welfare room.

### **Minor Injuries/Illness**

Incidents of minor injury or illness during the day should be treated as follows:

- **Lesson times:** children may be sent to the Welfare Room for an assessment of the severity of any illness or injury and appropriate action will be taken.
- **Playtimes:** children may be brought to the Welfare Room for treatment.

### **Sickness**

If a child is feeling unwell the teacher, SMSA or LSA will ensure they go to the Welfare Room where appropriate care will be given. If the child quickly feels better they will be sent back to the classroom but if they are clearly unwell the parent, or named person, will be contacted and asked to take the child home. If we are unable to make contact the child will stay in the Welfare Room until an appropriate adult can come to the school.

When a child is absent from school due to illness the parent is asked to telephone before 10.00am or write to the school to explain the reason for the period of absence.

If a child/member of staff has sustained vomiting and/or diarrhea they should remain off school for 48 hours to ensure they are fully recovered.

Where a child/member of staff may have an isolated instance of vomiting due to a persistent cough for example, they can return to school after **24 hours**.

### **Diabetes**

Each diabetic child will have an individual Healthcare plan detailing their daily care requirements. This is provided by the Diabetic nursing team and is reviewed annually with the Diabetic Nurse, Welfare team, Parents and Class Teacher.

Each diabetic child has an emergency box of supplies provided by the parents including blood glucose testing kit, carbohydrate snacks and fast acting glucose in the classroom and in the Welfare Room. A copy of the Healthcare plan is also held in the box and on display in the Welfare room.

Annual training for members of staff working with the child to provide this care is provided by the Diabetic nursing team.

## **Epilepsy**

All children diagnosed with Epilepsy will have an individual Healthcare plan provided by the Community Children's Nursing Team detailing their condition, any daily care requirements and emergency procedures.

If they have been prescribed medication in the event of a seizure this is clearly labelled and held in the Welfare room. The Community Nurses will discuss the Healthcare plans and give training on emergency procedures with the Welfare team, class teacher and LSA annually.

## **Asthma and Allergies**

Children who require medication for Asthma and allergies will carry it with them, at all times, in a named bag.

Playground Box - The named adult takes responsibility. If possible, this should be a first aider  
Classroom Box - next to the teacher's desk

## **Head Lice**

Head checks are **not** carried out in school on the advice of the Health Authority. If a child has live head lice detected in their hair, their parents are asked to collect them and treat the lice at home. Once treated, the child can return to school. Letters are sent home to all children in that year group for parents to check their own child's hair.

## **Non Accidental Injuries**

Any suspicious bruising or markings should immediately be reported on CPOMS and to the Designated Safeguarding Lead or member of the Safeguarding team. The procedures set out in the Policy for Child Abuse/Protection will be immediately implemented.

## **Teeth**

If a child receives any damage to their teeth they must immediately be sent to the Welfare Room and parents contacted. If a child's second tooth is lost, or broken, the tooth or the piece of tooth should be found, if possible, and kept in milk. When the child is taken to the dentist it may be possible to use this in the repair.

## **Routine Medical Checks**

All parents, when entering their child at the school, fill in a form giving their consent to routine medical checks, e.g. hearing and vision.. The Welfare Team works with the Community Health Authority in organising these checks.

If the school is worried about a child, and feels that a medical would be advisable, the Welfare Team and the Designated Safeguarding Lead will discuss it. Contact is then made to Community Health who will organise a medical. If this is secondary to the child's initial health check parental consent will be required.

Medical checks are not usually carried out at school; this is only height, weight and vision.

## **Hygiene Procedures**

In the event of the spillage of blood or body fluid, the following procedure should be followed:

- Any surface which has had blood splashed on it must be cleaned thoroughly with detergent and water.

- Wash hands.
- Dispose of any blood stained waste in a plastic bag and put in the yellow bin in the welfare room.

Staff must wear PPE when toileting or dealing with blood or body fluids. Wherever a first aid kit is kept, there should also be nearby access to disposable gloves.

### **Class Medical List**

Every class must have a Class Medical List and a list of pupils with specific dietary requirements provided from Arbor from the school office.

It should be made clear whether these pupils have medication in school for their medical needs. The child must be aware that they need to report to their class teacher, adults on duty, Lunchtime Controller or First Aider should they be feeling ill.

Kitchen staff /Lunchtime Supervisors also need to be informed if a child has a food allergy or requires medication.

Children with food allergies should have a green medication bag containing their appropriate treatment plan in the event of a reaction and any necessary medication they should need to be given. Medication is kept in the medical room in clear plastic bags.

## **Section 4: Reporting of Incidents**

All incidents requiring First Aid (whether minor or major) must be recorded in the First Aid book. This is situated in the Welfare Room. An additional First Aid book will be kept in the Nursery Office. A duplicate copy of the record in the First Aid book should be sent home.

If a member of staff accidentally injures a child, the child should report to the Welfare Room for treatment and the injury recorded. The Welfare team must email the details of the incident to the Designated Safeguarding Lead (DSL) who will then contact the member of staff.

Major injuries should also be reported to the Trust Estates Manager Hazel Ryder online via EVERY and logged as an incident.

All incidents of children being sent home through injury or illness are also logged online via EVERY and emailed to the Attendance Officer.

## **Section 5: Reassessment of First Aid provision**

The Principal/Executive Principal, Chief Operating Officer and Academy Council should regularly review the school's first-aid needs (at least annually), and particularly after any changes, to ensure the provision is adequate.



## Appendix A: List of Designated First Aiders

Name	Qualification	Renewal
Amanda Oates	First Aid at Work	October 2026
Amanda Walker	First Aid at Work	October 2026
Natalie Walker	First Aid at work	May 2025
	Paediatric First Aid	May 2025
Kimberley Stroud	Paediatric First Aid	September 2026
Nikki Betts	First Aid at work	October 2026
Jodie Redshaw	Paediatric First Aid	January 2027

## **Appendix B: HSE Recommendation on First Aid boxes**

- a leaflet giving general advice on first aid
- 20 individually wrapped sterile adhesive dressings (assorted sizes);
- two sterile eye pads;
- four individually wrapped triangular bandages (preferably sterile);
- six safety pins;
- six medium sized (approximately 12cm x 12cm) individually wrapped sterile unmedicated wound dressings;
- two large (approximately 18cm x 18cm) sterile individually wrapped unmedicated wound dressings;
- one pair of disposable gloves. Equivalent

or additional items are acceptable.