



**ST MARGARET'S**  
SCHOOL

First Aid Policy

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St Margaret's School including EYFS First Aid Policy Review:

Review Date	April 2025
Reviewed By	Julie Chatkiewicz - Vice Principal
Next Review Date	April 2027
Approval Date	July 2025
Committee Owner	Pastoral Committee

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## **Introduction**

The H&S at Work Act (HSWA) 1974 places duties on employers for the health and safety of their employees and anyone else on the premises. This covers the Head and teachers, non-teaching staff, children and visitors.

The Education (Independent Schools Standards) (England) Regulations 2003 require that independent schools have and implement a satisfactory policy on first aid and have the appropriate facilities for the pupils in accordance with the Education (School Premises) Regulations 1999. St Margaret's is under a general duty to provide a safe place of work, with suitable arrangements, including welfare. This policy describes the facilities that are in place.

The School also takes into account the DFE guidance on First Aid in Schools and the ISI and EYFS guidance.

St Margaret's must ensure that there is adequate first aid provision for persons who may become ill or are injured, as part of their undertaking for St Margaret's School. First aid is administered in a timely and competent manner. Therefore, it is the responsibility of the Head & Governors within the Health and Safety Committee who must assess the nature of activities within the School and be confident of the number of first aiders to appoint.

Provision of First Aid at St Margaret's School & medical advice is provided by the Lead School Nurse, the School Nurse and supported by school staff who are trained in first aid and Paediatric First Aid.

There is a qualified nurse (Lead Nurse) on duty each day. The Nurse/nurses are also known as first aiders, in this policy and in practice at the school.

In the absence of the School Nurses or to treat minor injuries, there are dedicated first aiders across the School. All first aiders hold a relevant qualification.

Further members of staff hold various first aid qualifications according to their speciality, such as 2-day EYFS compliant Paediatric First Aid, First Aid at Work and sports first aid.

Residential trips across the school have at least one member of staff in attendance with a first aid qualification.

## **Policy Statement**

St Margaret's is committed to providing sufficient numbers of first aid personnel to deal with accidents and injuries occurring at the School. To this end, St Margaret's School will provide information and training on first aid to staff to ensure that they meet the statutory requirements and the needs of the School are met.

Should persons have concerns about the provision of first aid within the organisation, they should inform:

- the Head
- the Health and Safety Committee

These concerns will be investigated and an assessment will conclude if any rectification is required.

## **Arrangements for Securing First Aid Provision**

First aiders are employees who have been chosen by the Head or key staff as being suitable for training and appointment as a nominated first aider. There is always at least one qualified first aider present when children are in the School and always one paediatric first aider for EYFS children. The Nurses are also known as first aiders, in this policy and in practice.

First aiders (including the School Nurse) are qualified personnel who have received training and passed an examination in accordance with H&S Executive requirements. Refresher training courses at regular intervals are in place as required by legislation to ensure that their skills are maintained.

## **Responsibilities of the Principal First Aider (School Nurse)**

It is the responsibility of the principal first aider to assist the Head/ H&S Committee to meet their responsibilities for first aid by:

1. familiarising themselves with this policy
2. regularly carrying out an audit to ensure that first aid cabinets/kits contain the minimum supplies that are required under law
3. regularly checking that the appropriate list and signs showing the location of first aid equipment and personnel are updated and displayed in conspicuous places
4. to liaise with the H&S Committee regarding any advice or training required for the School
5. to ensure that emergency procedures are carried out and accident forms are completed and stored in a safe place
6. ensure that relevant teaching/catering staff are aware of any medical needs of a pupil
7. maintain individual health care plans and/ or records for each pupil at the School
8. maintain parental consent forms for the administration of medicines at the School
9. supervise and administer medicine that has been prescribed for an individual child
10. ensure medicines are stored strictly in accordance with the product instructions (paying particular attention to temperature) and in the original container in which it was dispensed
11. ensure that the container supplied is clearly labelled with the child's name, the name of the medication and frequency of administration
12. ensure each child knows where their medication is stored and who holds the key
13. ensure that emergency medication such as adrenaline devices/inhalers are readily available
14. any medication that needs to be refrigerated should be kept in an airtight container and clearly marked. There should be restricted access to a refrigerator containing medicines
15. ensure that all date-expired medicines are returned to parents
16. sharps boxes should always be used for the disposal of needles. Collection and disposal of boxes should be arranged with the Local Authority's environmental services
17. ensure that disposable gloves are worn when dealing with spillages of blood or other body fluids and disposing of dressings or equipment
18. ensure that contaminated dressings etc are disposed of in accordance with best infection control practice
19. maintain a record of all patients treated, no matter how trivial
20. school minibus drivers should be made aware of any pupils with medical needs. Drivers should be aware of roles, responsibilities and liabilities

## **Responsibilities of First Aiders**

All appointed first aiders at St Margaret's School have the following responsibilities to:

### **First Aid Practice**

- be readily available
- follow the principles and practice as laid down by the first aid courses and manuals
- comply with the aims of first aid
  - to preserve life
  - to prevent the condition worsening
  - to promote recovery
- quickly and accurately assess the situation
- identify the condition from which the casualty is suffering, but not treat any illness or injury which is beyond your capability
- give immediate, appropriate and adequate treatment, bearing in mind that the casualty may have more than one injury and that some casualties may need more urgent attention than others
- arrange, without delay, the transfer of a casualty (should it be required) to their GP, hospital or home, according to the seriousness of their condition
- stay with the casualty until they are handed over to a doctor, paramedic, the hospital A&E department or other appropriate person
- not to ignore accidents or illness under any circumstances, or to refuse to give treatment and assistance if required to do so

- not to undress the patient unnecessarily
- safeguard the patient's possessions and clothing
- respect the patient's confidentiality at all times and not discuss the patient's condition with anyone other than the Head/Emergency Services or a member of staff who is required to know
- maintain the highest practicable level of hygiene and cleanliness whenever treating a patient
- maintain a record of all patients treated, no matter how trivial
- school minibus drivers should be made aware of any pupils with medical needs. Drivers should be aware of roles, responsibilities and liabilities

### **Medical Room**

- keep the Medical Centre clean and adequately stocked, including the Junior School medical room
- ensure locked cupboards have key access arrangements for key staff that need it
- ensure that the first aid cabinets contain the appropriate first aid materials and that any opened or expired materials are disposed of in the appropriate manner
- clean and maintain in a good state of repair all ancillary equipment within your area

### **Personal**

- attend refresher courses as necessary and support HR in maintaining the list of first aiders around the site

### **Medical Room**

The school's Medical Centre is situated on the right when entering the School from the main drive. The Medical Centre has its own external cloakroom with WC and basin and contains:

1. two sofas
2. sick bowls
3. portable first aid kits/travel kits
4. crutches
5. trolley containing first aid equipment
6. aural thermometer
7. otoscope
8. sphygmomanometer
9. prescribed adrenaline auto-injector devices
10. school accident book/ forms/ HSE accident book
11. kettle
12. microwave
13. filing cabinet containing pupils Health Forms
14. computer with access to school database
15. lockable medicine cabinets containing over the counter preparations such as analgesia and antihistamines, and children's own medicines bought in by parents
16. lockable refrigerator for storing certain medicines
17. First Aid manual
18. file containing details of medical conditions in school and individual healthcare plans, including asthma record cards/asthma register

It is the responsibility of the member of staff using the Medical Centre to leave it clean, tidy and well stocked.

### **First Aid Boxes**

Where first aid bags/kits are permanently located in an area a member of staff should be allocated to replenish any stock used and check the kit half termly for expiry and maintenance. New stock can be obtained from the Lead School Nurse.

## **Pupils Who Fall Ill or Sustain an Injury During the School Day**

Pupils who fall ill or sustain an injury during the School day should report to the School Office. The School Office staff will contact the School Nurse (or her deputy in her absence) via a walkie talkie.

There is a **CODE RED** system in place for calls via the walkie talkie to indicate if urgent response is required.

Emergency contact numbers are accessible via the School's iSAMS database and are kept up to date by the School Office staff. If it is deemed necessary, a parent may be contacted to collect their child from school and seek medical advice where appropriate. Parents will be contacted if their child has a fever or significant illness or injury.

Should it be necessary to call an ambulance, parents will be contacted and a member of staff will accompany the child and stay with him/her until the parent arrives.

## **Pupil's General Health**

On admission to the School, parents are required to complete a medical form for their child via a joining pack. The information is collated by the School Nurse and entered into iSAMS. At the start of each term, a list of pupils with medical information, allergies and dietary requirements is distributed to all members of staff. This list is stored on ISAMS and accessible to St Margaret's staff at all times. Parents are encouraged to check MSP (My School Portal (MSP) regularly to see what information the School holds, such as medical, allergies and pastoral updates.

A list of allergies and dietary requirements is given to the Head of Catering.

A child with particular medical needs will be discussed with staff members at the beginning of term during staff Inset. Pupils may also be discussed during staff meetings in term time.

If a child is not well enough to attend school, parents are requested to inform the School via My School Portal (MSP) before 8:30 am to explain absence.

## **School Outings and Sports Fixtures**

A first aid bag containing a travel first aid kit, ice packs, wipes, gloves, sick bags and tissues is given to the member of staff in charge together with any medication that might be required by an individual pupil such as inhalers and adrenaline devices.

## **The Administration of Medicines in School**

All pupils who enter the School are required to complete a consent form, including for the administration of a small range of over the counter medicines. The School stocks a limited range of over the counter preparations such as:

Liquid paracetamol (120mg/5mls) / Calpol 2+months

Liquid paracetamol (250mg/5mls) / Calpol 6+

Paracetamol tablets 500mg

Ibuprofen liquid/ Nurofen for children

Ibuprofen tablets

Antihistamine, Piriton or Cetirizine

Anthisan Cream

Strepsils

Vaseline

Arnica Cream

In the Junior School the parent is always contacted prior to the administration of oral medication. If prior consent has been granted and the child's health does not give rise for concern, then medication may be given at the discretion of the Lead School Nurse or her deputy. If prior consent has not been granted the parent will be contacted before any medication is given.

## **Prescribed Medication**

All prescribed medicines should be handed to either the Lead School Nurse or their deputy at the start of the School day for safekeeping.

A separate consent form must be completed by the parent, clearly stating the child's name, the dosage and time of administration. All medicines should be clearly marked with the child's name.

The child must be well enough to attend school.

## **Inhalers**

All parents of asthmatic children in the School are required to fill in a School Asthma Card. This is sent home on an annual basis for updating. Parents are asked to inform the School of any change in treatment. All children with asthma are required to have a reliever inhaler while in school.

In the Junior School, if able to self-medicate, one inhaler should be kept with the child at all times (at break time, games lessons, sporting fixtures and outings). Inhalers are also kept in the Medical Centre in named baskets.

In the Nursery, the child's reliever inhaler is kept in the Nursery medicine cabinet and will go with staff on outings and trips.

Inhaler use is recorded in the accident/injury log books and parents are kept informed of any change in frequency of usage.

Expiry dates of all inhalers are monitored and parents informed when a replacement is required.

## **Severe Allergy**

Pupils that suffer from a severe allergy that might require the administration of adrenaline must be made known to the School on entry.

Individual Care Plans are drawn up and a consent form, giving emergency contact details, must be signed by the parent. A copy of these documents is given to the parent for their records. These are sent home on an annual basis for updating.

Two adrenaline auto injector devices are required in school for each child and are sent with staff on trips, outings and sports fixtures. A list of adrenaline locations is sent out to staff. The expiry date of the adrenaline auto injector devices is monitored and replacements requested as necessary.

Staff are required to complete annual training on anaphylaxis and adrenaline auto injector devices via TES Educare.

The Lead School Nurse liaises with the Catering Manager on matters concerning diet and allergy.

## **Epilepsy / Diabetes / Other Conditions Requiring Special Attention**

The Lead School Nurse will produce an Individual Care Plan for those children suffering from any of the above conditions. Each plan will be agreed by the child's parents and tailored to the needs of the child, while following the guidelines set down by a Medical Practitioner. It is the duty of the parent to inform the School of any change in treatment. All staff will be made aware of any such conditions and taught how to deal with the complications that might arise.

Any medication required must be clearly labelled with the child's name and given to the School Nurses. A separate consent form must be completed by the parent stating dosage and time of administration.

Any special diets that may be required will be discussed at meetings between parents, School Nurses and the Catering Manager.

## **The Recording of Accidents**

All accidents & treatment of first aid must be recorded. Day-to-day first aid recording books are situated in:

- the Medical Centre
- the Junior School (various locations)

The Head & SMT will be informed of any serious or potentially serious accidents/incidents that occur at St Margaret's School. The Estates Manager will keep a record of incidents, accidents and near-miss incidents, working with the School Nurse to review heat maps of areas of concern and report to governors.

It is the responsibility of the member of staff dealing with an incident to complete the St Margaret's accident form on the intranet and the first aider that gave first aid to complete the first aid record keeping book.

All completed St Margaret's accident/incident form books must be regularly reviewed by the School Nurse and kept for review.

Any first aid carried out or medication given must be recorded and given to the recipient for parental information. Dosage and time of any medication given must be included.

Head injuries, however minor, must be documented and marked clearly as a head injury on the accident form/book. Any concerns will be reported to the parent directly by telephone by the attending first aider or delegated to another member of staff.

Any injury to St Margaret's staff should be recorded as above, using the St Margaret's accident/incident form on the intranet.

Visitors who suffer an injury while on the School premises will have their accident recorded using the St Margaret's accident/incident form and the Head/SMT will be informed.

Any person whilst on duty who suffers an injury as a result of an accident that occurred off the School site should also be reported in accordance with the aforementioned procedure. In addition, accidents occurring on a third party's site should be reported with the arrangements applying to that site.

In addition to these records, Reporting of Injuries, Diseases, and Dangerous Occurrences 2013 (RIDDOR) requires that certain injuries, diseases and dangerous occurrences must be reported to the Local Authority or HSE (telephone: 0845 3009923). A numbered HSE Accident Book is located in the Medical Centre.

## **Hygiene Procedures for Dealing with the Spillage of Bodily Fluids**

1. protective, disposable gloves must be worn when dealing with any bodily fluids (blood, vomit, diarrhoea) or as a precaution when contact with blood or body fluid might be likely. These may be found in all first aid kits, Medical Centre and the cleaner's cupboard. They should be disposed of immediately after use, double bagged if soiled and put in the external dustbins for domestic waste disposal
2. gloves are supplied in different sizes
3. sponges and buckets must never be used for first aid to avoid the risk of contamination
4. any body spillages must be cleaned immediately. Absorbent granules may be dispersed over a spillage and left for a few minutes. The spillage should then be swept, using a designated dustpan and brush (kept in the Caretaker's cupboard), onto newspaper, double bagged and put in the external dustbins for domestic disposal. The affected area should then be cleaned with warm water/ disinfectant and left to dry
5. following contact with any body fluids, hands should be washed thoroughly

## **General Waste**

As agreed with Hertsmere District Council, St Margaret's does not generate enough waste from matters regarding first aid to warrant a separate clinical waste collection by the Council. Any used dressings or soiled items should be double bagged and put in either the external domestic waste containers or the pedal bins in the Medical Centre (which are emptied daily).

## General Hygiene

First aiders should uphold strict hygiene measures at all times. Correct hand washing using antibacterial soap and careful hand drying are of the utmost importance.

The use of protective gloves (nitrile and vinyl), in small/medium/large must be used when dealing with all persons where bodily fluids or the potential for spillage is a risk.

Protective aprons are provided and stored in the Medical Centre.

All soap dispensers throughout the School are fitted with antibacterial soap and Cutan soap dispensers for those with allergies.

Tissues and bins are provided throughout the School and pupils are encouraged to dispose of used tissues safely and follow this by careful hand washing.

## Infectious Conditions

Any child with a suspected infectious condition/illness will be isolated in the Medical Centre until a parent can collect them from school.

After diagnosis by a medical practitioner, a letter will be sent to all parents warning of the case of the illness and the exclusion time necessary from school.

Notifiable diseases must be reported to the Health Protection Agency and Local Authority.

## Accident or Medical Emergency Procedure

In the event of an accident/ medical emergency at St Margaret's School, the member of staff to reach the casualty first will:

- make the area safe and check the status of the casualty, using first aid knowledge. Stay with the casualty
- request the presence of a School Nurse (ext 499 or 409) via the School Office or walkie talkie (using **CODE RED**) or, in the absence of a nurse, a response first aider. Give location, nature of emergency, and urgency using **CODE RED**
- the School Nurse and/or her deputies will assess the casualty and decide whether it is necessary to contact the emergency services. The School Nurse and/ or her deputies will stay with the casualty at all times
- should it be deemed necessary to contact the emergency services, the School Nurse or her deputies will ask the School Office to dial 999 and request the presence of an ambulance, giving as much information about the casualty as possible. The School Nurse will inform the Head of her decision or delegate a member of staff to do so
- the School Nurse, her deputies, the School Office or an appointed staff member will contact the casualty's next of kin
- a member of staff will wait for the ambulance and direct the ambulance crew to the casualty
- the School Nurse (or her deputy) will brief the ambulance crew as to the nature of the incident giving time and dosage of any medication administered
- should the parents/guardians be unable to attend, the School Nurse (or her deputy or appointed staff member will accompany the casualty to the hospital
- on their return, the School Nurse (or her deputy) will document precisely all information relating to the incident and refer to the Head/SMT and to the Health and Safety committee as necessary and arrange a staff debriefing

## **Additional Guidance: Management of Head Injuries and Head Bumps**

**A head injury may involve trauma to the brain (concussion or more severe injuries) or a deep wound that requires immediate medical attention.**

### **Warning Signs of a Serious Head Injury:**

Loss of consciousness, even briefly  
Persistent or worsening headache  
Nausea or repeated vomiting i.e 3 distinct episodes  
Dizziness or balance problems  
Confusion, memory loss, or difficulty concentrating  
Unusual drowsiness or difficulty waking up  
Clear fluid or blood from the nose or ears  
Seizures  
New uneven pupil size  
Significant swelling or an obvious skull deformity

### **How to Respond:**

Stay calm and keep the child still. Avoid moving them unless necessary  
Notify the School Nurse or request medical assistance via **CODE RED**  
Call emergency services (999) immediately for any severe symptoms  
Inform the child's parents or caregivers urgently  
Do not give the child food, drink, or medication unless directed by a healthcare professional  
A head bump is a minor injury, often caused by a fall, a collision during play, or a knock to the head. These are usually not serious and often result in mild symptoms.

### **Common Signs of a Head Bump:**

A small lump or bruise on the head  
Mild headache  
Slight tenderness at the site of the bump  
No loss of consciousness

### **How to Respond:**

Apply a cold pack to reduce swelling.  
Monitor the child for changes in behaviour or worsening symptoms.  
Encourage rest and quiet activities (no computers, laptops, but also not even reading)

Log the time of the incident, and for young children who can not communicate symptoms, changing confidently (2-8 year olds), a review by a nurse or second first aider should take place. This should also be the case with children of any age who may have SEN/D, EAL or who are unlikely to speak up about how they feel, regardless of age.

Notify the child's parents or caregivers about the incident.

### **Main Duties of Lead First Aiders**

- stay calm and take control of situation and treat the casualty with dignity and respect
- give immediate help to casualties with common injuries or illnesses and those arising from specific hazards at school
- acting as first responders to any incidents; accessing the situation where there is an injured or ill person and provide immediate and appropriate treatment
- ensuring the School Nurses are notified of accidents /injuries that may require further medical intervention
- ensuring there is an adequate supply of medical supplies in the Medical Room and in the first aid kits, and replenishing the contents as required
- keeping all pupils' medication up to date and liaising with parents as necessary to provide up to date medication
- reporting to parents
- liaise with Head and the School Nurse in regards to staff training and education to ensure an effective emergency response to any emergency first aid
- when necessary, ensure that an ambulance or other professional medical help is called or sought
- ensure that an Appointed Person is contacted in an emergency, where required.

### **Appointed Person**

#### **Main Duties of the Appointed Person:**

- take charge when someone is injured or unwell
- ensure that an ambulance or professional medical help has been summoned when required

### **First Aid Resources**

There is no mandatory list of items for a first aid container. At St Margaret's School the following items are included in our school First Aid kits:

- disposable gloves
- safety pins
- bandages
- triangular bandages
- antiseptic wipes
- plasters of assorted sizes
- scissors
- medical tape
- CPR pocket mask
- gauze pads

The Lead First Aiders are responsible for examining the contents of first aid containers throughout the School and ensuring they are kept stocked by alerting the Nurses of missing or expired items

Ensure items are correctly disposed of after their expiry date has passed.

### **Off-Site Procedure**

Before undertaking any off-site activities, the EVC will assess what level of first aid provision is needed. If no specific risk is identified, then the trip leader will ensure that sufficient travel first aid kits are taken. A qualified first aider will be taken on all school trips. It is the responsibility of the trip leader/class teacher to ensure that any individual child specific medication, such as inhalers and Epi-pens, are taken on the trip.

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

- the School mobile phone
- a portable first aid kit
- information about the specific medical needs of pupils

- access to parents' contact details
- an emergency inhaler and epi pen will be available for the trip

Risk assessments will be completed by the lead member of staff prior to any educational visit that necessitates taking pupils off school premises.

### **Hygiene / Infection Control**

- all staff must take precautions to avoid infection and must follow basic hygiene procedures
- all staff have access to single-use disposable gloves and hand washing facilities and must take care when dealing with blood or other body fluids and disposing of dressings
- all incidents involving bodily fluids are to be dealt with using gloves available from the Medical Room and Lead First Aiders
- specific incidents of sickness or toilet accidents will need the appliance of the appropriate absorbent powder (available from the Estates Manager or site team, Medical Room or Office)
- all dressings or wipes that have been in contact with blood or bodily fluids must be disposed of in the clinical waste bins provided in the Medical Room

### **Parental Responsibilities**

- providing ongoing and accurate and current medical information in writing to the School
- providing the School with a completed Pupil's Individual Medical Plan i.e. Joining pack (allergy/medical information) and any prescribed medication
- advising the School, should a child develop a condition during the year, or have a change in condition, and clarifying details in accordance with the Pupil's Individual Medical Plan
- providing written advice from the medical authority monitoring their child, which explains the child's illness and any required medication
- monitoring of expiry dates and liaising with the School Nurse in order to update a child's record in school

### **Head**

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

- ensuring that an appropriate number of trained first aid staff 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

### **Record-Keeping and Reporting**

Recording of all incidents on iSAMS as soon as is reasonably practicable stating the following:

- date, time, name and class
- a description of the accident/incident/ issue and the first aid treatment undertaken
- what happened immediately afterwards i.e. went back to class/resumed duties, went home, went to the hospital etc
- if the injury needs only very minor first aid - a wipe, cold compress, plaster or ice pack for a short time
- **in Junior School, a first aid book/slip is also completed**, and an 'I bumped my head today' bracelet is given to any child from Nursery to Y2 who had a head bump or head injury to alert staff of the injury and to keep a close eye on the child over the day
- bruises and swellings, as well as being recorded on ISAMS, must also be followed up with a phone call to parents or in person

**No parent should collect their child at the end of the day without having been notified of an injury or serious illness or first aid given that was orange or red in the triage chart.**

- more serious concerns/injuries must be referred to and/or dealt with by the School Nurse
- accidents or incidents of a more serious nature\* must also be recorded on the Local Authority Accident Report form and on the online H&S portal and dealt with in accordance with Local Authority H&S procedures
- the online reporting is completed by the Estates Manager and monitored and managed by the Head. All reportable accidents are then reported to the Full Governing Body.  
<http://www.hse.gov.uk/riddor/report.htm>
- all accidents/incidents that are reported to H&S are investigated by the Head/SMT as appropriate and, where necessary, risk assessments will be reviewed
- as much detail as possible should be supplied when reporting an accident
- records held in the First Aid and Accident log will be retained by the School for a minimum of 6 years

### **Reporting to Parents**

Concerns after an injury may result in the Staff phoning the parent/carer and the parent/carer being given the opportunity to visit the School to see the child. In certain circumstances, the parent will decide to take the child home or be requested to do so by the School. It may be that the School will advise the parent/carer to seek medical advice.

- serious injuries/severe medical conditions will necessitate a 999 call for an ambulance and this telephone call will take first priority
- in any such event, the priority will be in providing this to the child, with the parent being contacted as soon as a second adult is present to do so
- in this case, office staff will print out the child's details, including home address and doctor's details. The parent/carer will be phoned after the ambulance has been requested and, depending on their availability, will accompany the child in the ambulance if they can get to the School site/school visit location before the ambulance is ready to leave
- where the parent/carer is not able to get to the School site/school visit location before the ambulance needs to leave for the hospital, an Appointed Person will accompany the child in 'loco parentis' and stay with the child until such time as the parent/carer arrives at the hospital to be with them
- where an injury or illness has caused serious concern that requires an ambulance and/or hospital treatment, the staff involved must complete an accident form on the intranet
- in the event of a school evacuation, it will be necessary for a member of the welfare staff to take out a basic First Aid Kit
- in the event of an evacuation, the welfare team will set up a triage point to assess any medical needs
- in the event of an evacuation, the Head and School Business Manager are responsible for coordinating communication between staff and SMT

### **Other Policies**

This policy should be read in conjunction with the Health and Safety Policy.

Specified injuries must be reported to HSE and OFSTED for children in EYFS, which are:

Death

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)

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.

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)

Where an accident leads to someone being taken to the 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.

**Information on how to make a RIDDOR report is available here: [www.hse.gov.uk/riddor/report.htm](http://www.hse.gov.uk/riddor/report.htm)**



[www.stmargarets-school.org.uk](http://www.stmargarets-school.org.uk)

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