



FIRST AID | Lawdale Junior School

First Aid Policy

Lawdale Junior School

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Designated lead on First Aid: Annette Rook

Member of staff in charge of First aid boxes: Raani Chawla

Member of staff in charge of Accident forms for pupils and staff: Raani Chawla/Nicola Bishop

Member of staff in charge of updating the First aid CPD list: Raani Chawla

We are a Rights Respecting School and this policy supports the following articles from the United Nations Convention on the Rights of a Child

Article 2 (*without discrimination*)

The Convention applies to every child whatever their ethnicity, gender, religion, abilities, whatever they think or say, no matter what type of family they come from.

Article 6 – *survival and development. Every child has a right to life. Governments must do all they can to ensure that children survive and develop to their full potential.*

Article 23 (*children with disability*)

A child with a disability has the right to live a full and decent life in conditions that promote dignity, independence and an active role in the community. Governments must do all they can to provide free care and assistance to children with disability.

Rationale

Lawdale Junior School places student's safety, health and welfare as its highest priority. LJS recognises that competent administration of First Aid can save lives and prevent minor injuries becoming more serious incidents.

LJS is committed to ensuring that all staff are well-trained and skilled at administering First Aid and follow school policy and procedures at all times.

The School will adhere to current Health and Safety Regulations by ensuring that we have well trained staff and adequate equipment and resources to enable high quality first aid to be administered at the school.

Aims

- *To provide highly qualified and competent staff to administer First Aid.*
- *To ensure the highest levels of safety and care for staff, pupils and visitors*

Legislation

This policy is based on advice from the Department for Education on [first aid in schools](#) and [health and safety in schools](#), and guidance from the Health and Safety Executive (HSE) on [incident reporting in schools](#), and the following legislation:

- [The Health and Safety \(First-Aid\) Regulations 1981](#), which state that employers must provide adequate and appropriate equipment 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 School Premises \(England\) Regulations 2012](#), which require that suitable space is provided to cater for the medical and therapy needs of pupils

The school also receives guidance from the Health and Safety team at Tower Hamlets Local Authority.

Legal indemnity

Administering first aid in the workplace is considered to be an act of taking reasonable care. The Governing Body of LJS will fully indemnify all first aiders, emergency first aid trained and appointed persons staff against claims for alleged negligence in relation to first aid treatment providing they are acting within the remit of their employment and training.

General Guidance

HMSO publish 'Guidance on First-aid in schools' which gives the legislation which will be followed. The regulations require employers to make an assessment of their first-aid needs within the workplace. The recommendations are that there should be a minimum ratio of 1:100 fully qualified first-aiders to people in school (i.e. staff and pupils). Emergency first aid persons then fill the gaps when extra help is required. LJS is a school of approximately 200-210 pupils and up to 65 staff and visitors on the premises daily so the need for qualified first aiders is high.

Designated Member of Staff

The Headteacher is responsible for ensuring adequate numbers of staff and adults are qualified to administer First Aid. The names of the qualified First Aiders will be displayed around the school.

The school will ensure the following;

- One member of staff with a current 3 day First Aid qualification will be on duty on the premises at all times when children and adults are present.
- Training will be given by accredited organisations which have been approved by the Health and Safety Executive or awarding body.
- One member of First Aid trained staff will be present on all off-site trips with pupils and for school events.
- Contractors, visitors, service users, work experience students and others working temporarily on the premises are made familiar with the first aid arrangements through the visitors to school document, that is read and signed when they first enter the building.

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- Any arrangements for letting the school incorporate consideration of first aid arrangements.
- Records of accidents will be collated at least once a year and monitor, where accidents occur, frequency and nature of the injuries and illnesses.
- Monitor accident / incident records of children who are frequently having accidents, as this could be an indication of other issues that need to be addressed.
- Provide additional advice and guidance, on request, to assist with the implementation of this policy, and ensure the school is kept up to date in accordance with any changes in legislation and to reflect current best practice;
- Ensure monitoring of first aid provision and arrangements through health and safety audits.
- Risk assessment of first aid needs will consider the following factors:
 - proximity and accessibility to emergency services;
 - new members of staff (untrained staff);
 - members of the public on site;
 - staffing levels;
 - risk levels and any work place hazards (kitchen, playground);
 - the needs of staff, e.g. lone workers, pupils with special needs and disabilities;
 - unforeseeable absences of first aiders.

At LJS the main duties of the designated First Aider are to:

- Provide immediate support for children and adults with common injuries or illnesses and people with more serious injuries or conditions.
- Ensure emergency services are called immediately in the event of a serious injury or asthma attack, without delay.
- Support the emergency services in the event of a more serious illness or injury requiring the emergency services.
- Ensure that all used first aid material/ soiled dressings etc. are disposed of appropriately. Note that infectious items are to be treated as hazardous waste and placed in appropriate containers (e.g. yellow bags) and disposed of in accordance with local arrangements;
- ensure necessary records are kept of all first aid administered this includes a letter or email home and details recorded on the school safeguarding and well being system (Medical Tracker).
- Refresh first aid knowledge and skills in line with timeframes of training requirements.
- Ensure parents and carers are kept informed of incidents and first aid applications.

Off-site visit leaders

Visit leaders will ensure availability of first aid cover for all visits. An appropriate first aid kit will be carried on all trips and one of the staff will hold a first aid qualification appropriate to the environment and activity. If an activity carries too much risk, the school will not participate in the activity.

The following risks will be taken into consideration:

- location – population, terrain/response and accessibility for emergency services;
- duration of visit;
- weather/ exposure to elements;
- type of activity/ supervision;
- line of communication between group/emergency services;
- numbers of pupils;
- age/challenging behaviour from pupils;
- special needs, illnesses, medical conditions of pupils/ staff;
- history of previous visits to location;
- first aid provision remaining at school to cover school curriculum activities.

First Aid Room

We have a medical room on the ground floor with medical equipment and a bed. The room can be screened for privacy.

The room contains posters of common infections and advice on the medical response, First Aid equipment and blank incident sheets. There is also a medical waste bin, the waste is collected regularly. We also have crutches and a wheelchair in case of a leg, foot or ankle injury.

First Aid Boxes and Resources

First Aid boxes will be regularly checked (at least once a term) to ensure the contents are up to date, in good condition and not out of date. First aid boxes are stored in the office for trips and by the door of each classroom. There are also First Aid boxes in the school house and in the medical room.

Contents of First Aid Box

- Information leaflet outlining basic First Aid procedures;
- Individually wrapped sterile adhesive dressings (assorted sizes);
- Eye wash liquid;
- Eye dressing;
- Individually wrapped triangular bandage (preferably sterile);
- Various sized bandages;
- Disposable gloves;
- Adhesive plasters;
- Alcohol free moist cleansing wipes (Stero wipes);
- Micropore tape;
- Sick bags;
- Low-adherent dressing pads;
- A disposable bag for soiled material;
- Burnfree gel sachets;
- Forehead thermometer;
- Scissors.

Use of Equipment

- Scissors can be used to cut dressings or remove clothing in an emergency to expose a severe or life threatening wound.
- Minor splinters should be washed, and pat dried and a plaster placed over it. It should be removed by parents/carers. Large embedded splinters will not be removed in school and parents should be called immediately.
- A plaster will be used if there are no known allergies to plasters and if the plaster will provide protection for the skin to prevent infection.
- The defibrillator can be used following the instructions on the box. It is located outside the medical room on the wall.

Treatment**Identifying Illnesses/Injuries**

Some children may not give a full description of symptoms so additional care is necessary so that injuries or illnesses are not overlooked. First Aiders, key teaching staff and the leadership team will be consulted as required. If remaining at school, the child will be kept under observation for the rest of the school day. Further advice will be sought from the parent/carer, the child's care plan (if appropriate) or by telephoning NHS 111.

Head Injuries

Any head injury is potentially a very serious condition. A head injury to a pupil however minor will be assessed by a first aider and treated in accordance with current first aid guidance. If a pupil has fully recovered but there has been evidence of impaired consciousness the child must be seen by a doctor. If the injury is assessed as minor and does not require the child to be referred to a doctor, the pupil will be kept under observation for the rest of the school day for signs of deterioration and parents/carers will be informed of the nature of the injury by a phone call home and invited in to additionally assess the condition of the child. The first aider must ensure that the phone call is made and if that they go off duty without making contact a member of the office team takes on responsibility for making contact with home.

Additionally a first aid letter for home must be completed and sent home for any first aid incident and details recorded on the school safeguarding and well being system (Medical Tracker).

Calling an Ambulance/Transporting to Hospital/Moving Injured Children

Where there is any uncertainty about a child's condition or extent of injury then medical assistance will be sought, and where it is required urgently, this will be by ambulance. If a situation warrants an ambulance then this will take priority over informing the parent. The parent will be contacted after calling the ambulance. If parents cannot arrive at the school before the anticipated arrival of the ambulance then we will arrange for the parent to meet their child at the hospital.

When a child is taken to hospital a member of staff will escort the child and take responsibility for them until the parent is present. They will remain with the child until such time.

Moving an Injured/Ill Person

Consideration will be given to the extent of discomfort and pain which can be inflicted when self-transporting a child/person without appropriate pain relief and medical expertise afforded by paramedics/ ambulance. School staff will exercise caution before moving anyone who has an immobilizing injury or illness. Consideration will be given to manual handling risks before first aiders attempt to move children who are injured or ill. We will always wait for paramedic staff who are trained to move casualties if there is any doubt.

Swimming Pool

The school follows the guidance set out by Greenwich Leisure Limited or "GLL/ Better" Company that manages leisure centres across London. Organisation "Guidance for Schools". We are currently awaiting the new guidance set by Be Well, who now run York Hall Baths. This should be available by September 2025

Infection Control and Waste Disposal

The following hygiene precautions are recommended as safe practice for all staff. They are common sense precautions that will protect against blood borne viruses and infections that may be transmitted via blood or body fluids:

- Staff members at the school will be trained on how to avoid and limit the possibility of infections by following basic hygiene procedures.
- Staff must wear disposable gloves every time they administer first aid and these must be disposed of after every use. Staff must avoid direct skin contact with blood or body fluids.
- If blood is splashed onto the skin, eyes or mouth it will be washed off immediately with water.
- Staff must wash their hands before and after every First Aid intervention.
- Cuts or broken skin will be covered with waterproof dressings.
- Medical waste must be disposed of in the clearly labeled Medical Waste Bins which will be disposed in accordance with current legislation.
- Spillages of blood, vomit, urine and excreta will be cleaned up immediately.

The following general actions will be taken by the person dealing with the spill:

- clear the immediate area of people. Hazard signs and cordoning off will be necessary.
- use disposable personal protective equipment (PPE).
- for small spills or splashes on hard surfaces: clean with disinfectant detergent and hot water.
- for large spill: remove spillage as much as possible using absorbent paper towels, dispose carefully in waste bags, cover remaining with paper towels soaked in bleach alternative solution, soak, wipe clean and dispose of waste.

Disposal of waste:

- Used paper towels, together with gloves and aprons will be put into a plastic waste sack/ bag, top tied and placed in the outside waste collection bin or in the medical bin.

- Vomit, urine and faeces will be flushed down the toilet. All first aid kits will contain hazard (yellow) disposable bags. These can be used when treating a blood injury within a first aid context and disposed of in accordance with local procedures, into a sanitary bin or the medical waste bin.

Recording and Reporting Incidents

- LJS complies with the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR) which states that some accidents must be reported to the HSE.
- LJS will keep detailed and thorough records of injuries, incidents and First Aid which has been administered on Medical Tracker for children and on AIR forms for adults.
- Staff members must record on the Accident Incident Report form the date, time and place in the event of an accident. A brief description of the incident must be recorded and any action taken by management which has been taken.
- Incident Report forms and the Accident Book will be retained by the school office.

Disability Equality Impact Assessment

This policy has been written with reference to and in consideration of the school's Disability Equality Scheme. Assessment will include consideration of issues identified by the involvement of disabled children, staff and parents and any information the school holds on disabled children, staff and parents.

Related policies

- Child protection
- Educational Visits
- Medical and Asthma
- Allergy Policy

The following are workplace hazards, especially for the Premises Manager.

Hazard	Causes of accidents	Examples of injury requiring first aid
Manual handling	Repetitive and/or heavy lifting, bending and twisting, exerting too much force, handling bulky or unstable loads, handling in uncomfortable working positions	fractures, lacerations, sprains and strains
Work at height	Overreaching or overbalancing when using ladders, falling off or through a roof	Head injury, loss of consciousness, spinal injury, fractures, sprains and strains, lacerations

Slips and trips are the most frequent cause of accidental injury for pupils and staff.

Slip and trip hazards	Uneven floors, staircases, trailing cables, obstructions, slippery surfaces due to spillages, worn carpets and mats	Fractures, lacerations, sprains and strains
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First Aiders

Emergency Procedure- Annual training

The school has assessed the need for the majority of support staff to be First Aid trained as we need First Aid trained staff on the premises at a variety of different times.

We need at least:

- One cleaner or premises manager to be first aid trained to support provision early in the morning and early evening, when mainly cleaners are working in the building.
- All TAs to be First Aid trained so there is one First Aider per class during lesson times and at least one First Aider when out on trips with classes.
- All of MDMS to be First Aid trained, so during lunchtime they can work on a rota and all be able to deal with injuries from slips and falls, as this is when the majority of accidents occur.

The school's trained First aiders are therefore:

- all the TAs,
- all MDMS

We also have the following senior First Aiders who have completed the three days First Aid course

		Expiry
Raani Chawla- (admin)	June 2024	11/6/27
Hafsana Begum (learning mentor/parent support worker)	July 2024	2/7/27

An up to date list is available in the medical room and on the central CPD record.

Appendix 1 – Course content

HSE one-day Emergency First Aid at Work (EFAW) course valid for three years.

- understand the role of the first aider including reference to the importance of preventing cross infection, the need for recording incidents and actions, use of available equipment.
- assess the situation and circumstances in order to act safely, promptly and effectively in an emergency.
- administer first aid to a casualty who is unconscious (including seizure).
- administer cardiopulmonary resuscitation.

- administer first aid to a casualty who is choking.
- administer first aid to a casualty who is wounded and bleeding.
- administer first aid to a casualty who is suffering from shock.
- provide appropriate first aid for minor injuries (including small cuts, grazes and bruises, minor burns and scalds, small splinters).
-

HSE Three day First Aid at Work (FAW) course: (3 days), valid for three years followed by; a first aid at work refresher course (2 days), also valid for three years.

- provide emergency first aid as above

Administer first aid to a casualty with:

- injuries to bones, muscles and joints, including suspected spinal injuries;
- chest injuries;
- burns and scalds;
- eye injuries;
- sudden poisoning;
- anaphylactic shock;
- recognise the presence of major illness and provide appropriate first aid (including heart attack, stroke, epilepsy, asthma, diabetes).

Basic Skills Refresher Training

Although not mandatory, the HSE strongly recommends first aiders (FAW and EFAW) to undertake annual refresher training. First aiders attending an annual refresher course should demonstrate their competence to:

- assess the situation in an emergency;
- administer first aid to a casualty who is unconscious (including seizure);
- administer cardiopulmonary resuscitation;
- administer first aid to a casualty who is wounded and bleeding;
- administer first aid to a casualty who is suffering from shock.