

First Aid Policy

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Aims

The aims of our first aid policy are to:

- Ensure the health and safety of all staff, students 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

Legislation and guidance

This policy is based on advice from the Department for Education on [first aid in schools](#) and [health and safety 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 students

This policy complies with our funding agreement and articles of association.

Roles and responsibilities

3.1 Appointed person(s) and first aiders

The school's appointed persons and primary first aiders are the Medical Team; comprising of one school nurse and two school nurse assistants. They are responsible for:

- Taking charge when someone is injured or becomes ill.
- 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.
- Ensuring that parents and carers are contacted and an ambulance is summoned when appropriate.
- Sending students home to recover, where necessary.
- Completing appropriate documentation dependent on severity of injury (see section 6).
- Ensuring there is an adequate supply of medical materials in first aid kits and the medical room, and ordering stock for replenishing the contents of these kits.

First aiders will defer to the Medical Team and, where the Medical Team is not available, are trained and qualified to carry out the role (see section 7).

Our school's appointed persons and first aiders are listed in Appendix 1. Their names will also be circulated to all staff regularly and displayed prominently around the school.

3.2 The Academy Committee

The Academy Committee has delegated responsibility for health and safety matters in the school, but further delegates operational matters and day-to-day tasks to the Headteacher and staff members.

3.3 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 (see Appendix 1).
- 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 students.
- Reporting specified incidents to the HSE when necessary (see section 6).

3.4 Staff

School staff are responsible for:

- Ensuring they follow first aid procedures.
- Ensuring they know who the first aiders in school are.
- Completing Smartlog/CPOMS accident reports for all incidents they attend when directed to do so by the Medical Team.

First aid procedures

4.1 In-school procedures

In the event of an accident resulting in injury:

- The closest member of staff present will seek the assistance of the Medical Team or, if not available, a qualified first aider.
- The Medical Team or first aider, will do a primary assessment and provide appropriate first aid. They will decide if further assistance is needed from a colleague or the emergency services and will remain on scene until help arrives.
- If the Medical Team or first aider judges that a student is too unwell or injured to remain in school, parents/carers will be contacted and asked to collect their child. Upon their arrival, the first aider will recommend next steps to the parents/carers.
- If emergency services are called, the Medical Team or Reception staff (first aiders) will contact parents immediately.
- The Medical Team/first aider/other identified members of staff will enter the incident on CPOMS and complete any other appropriate documentation (section 6) on the same day or as soon as is reasonably practical after an incident resulting in an injury.

4.2 Off-site procedures

When taking students off the school premises, staff will ensure they always have the following available:

- A mobile phone
- A portable first aid kit
- Information about the specific medical needs of students
- Parents' / carers' contact details

Risk assessments will be completed by the trip leaders prior to any educational visit that necessitates taking students off school premises.

We aim to include a first aider on all school trips.

All trip leaders will liaise with the Medical Team to discuss the medical needs of participating students and to ensure that they have any specific medication and/or supplies required for the trip.

First aid equipment

All school first aid kits are HSE compliant.

No medication is kept in first aid kits.

First aid kits are stored in:

- Reception
- Medical Room
- PE Office
- Tech Block office
- Art Block office
- Performance Arts staff room
- Food Tech
- Geography office
- History office
- Science work room
- Science prep room
- Maths office
- Site Staff office
- Minibus x 2
- HISP office
- Gym
- Sports Hall
- Astro container
- Site team workroom

Record-keeping and reporting

6.1 CPOMS and Smartlog

Any incident/accident which requires first aid will be noted on CPOMS and recorded elsewhere as appropriate, depending on severity. This will occur on the same day or as soon as possible after the incident:

- All student injuries will be documented on CPOMS.
- A note will be made advising parents/carers of the student's visit to the Medical Room, preferably on the student's Tracker otherwise on a green card.
- For anything other than a very minor injury, an Injury Note will be completed and given to the student to give to parents/carers to advise of the injury.
- In the case of a minor head injury the 'Minor Head Injury Assessment' guidance will be followed, a 'Head Injury Today' note will be completed and given to the student to show to all teachers for the rest of the day and the Head Injury Template on Arbor completed and emailed to Primary guardians.
- For significant injuries, parents/carers will be contacted.
- If the injury occurs outside school hours, the parent/guardian will be contacted directly for anything other than a very minor injury.
- As much detail as possible should be supplied when reporting any injury, to parents/carers.
- Staff accidents will be recorded on Smartlog and a copy will be given to the nominated member of SLT for appropriate further action and the injured staff member themselves.

Records held on CPOMS or on Smartlog will be retained by the school for a minimum of 3 years, in accordance with regulation 25 of the Social Security (Claims and Payments) Regulations 1979, and then securely disposed of.

6.2 Reporting to the HSE

The school 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 school will report these to the Health and Safety Executive as soon as is reasonably practicable and in any event within 10 days of the incident. However, there are significant differences in RIDDOR reporting procedures for employees and students. HSE guidance is in the appendices. (see appendix 3)

Information on how to make a RIDDOR report is available here:

[How to make a RIDDOR report, HSE](#)

Training

All school staff are able to undertake first aid training if they would like to.

All first aiders must have completed a training course and must hold a valid certificate of competence to show this. The school will keep a register of all trained first aiders, what training they have received and the dates this is valid (see appendix 1).

Staff are encouraged to renew their first aid training before it is no longer valid. Annual general awareness training takes place for all staff to update on current students' medical conditions.

Monitoring arrangements

This policy will be reviewed by the Headteacher annually.

At every review, the policy will be approved by the Academy Committee.

Links with other policies and guidance notes

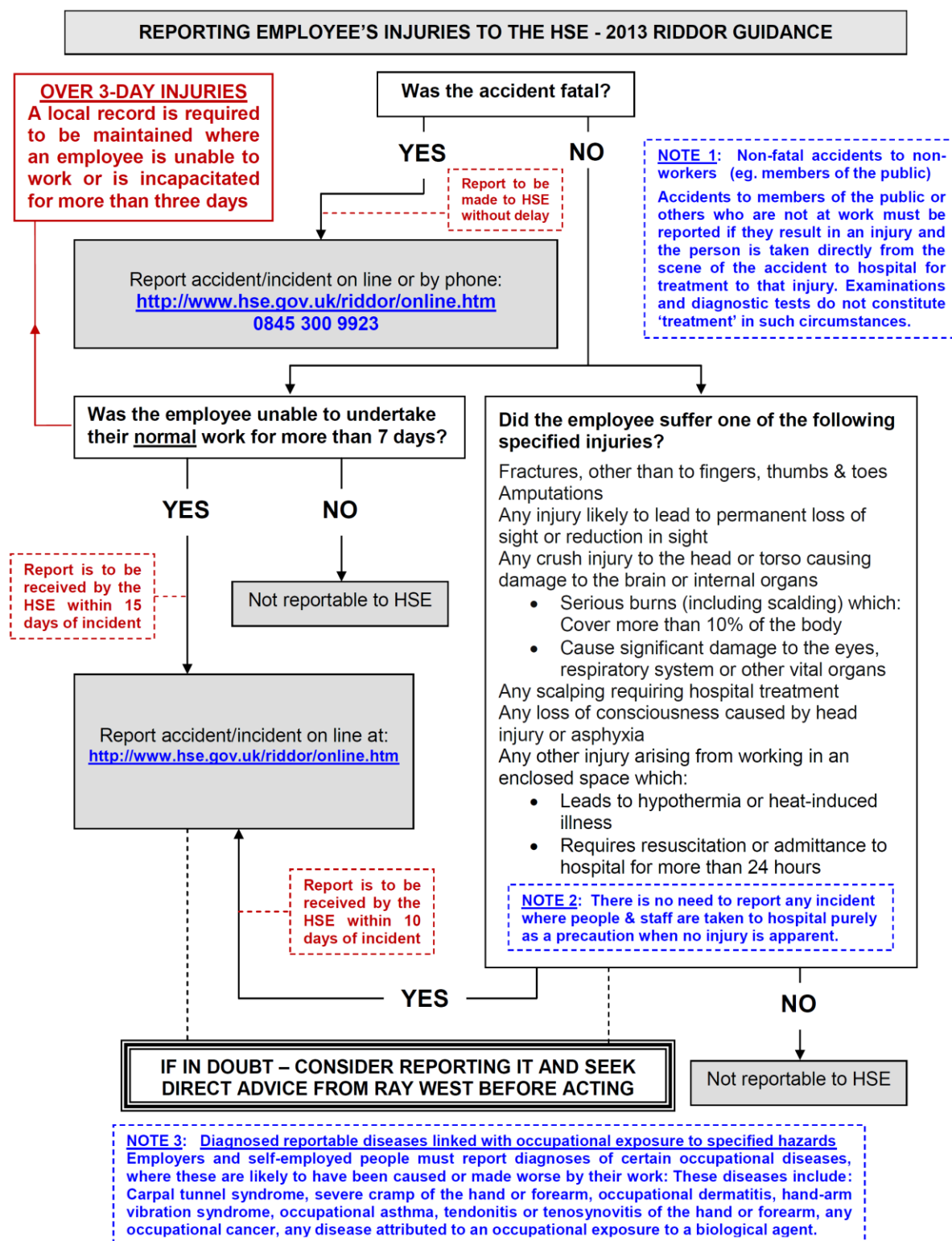
This first aid policy is linked to the:

- Health and safety policy
- Risk assessments
- Policy on supporting students with medical conditions
- Management of Medicines in School policy
- Form A: Parental-School Agreement for the administration of medicines in school
- Guidance on Anaphylaxis, Asthma, Diabetes, Epilepsy and Use of Crutches
- Automated External Defibrillator (AED) Policy

Appendix 1: First aid list

The school holds a list of first aiders.

Appendix 2: RIDDOR Flow Chart and Incident Reporting



Incident reporting in schools (accidents, diseases and dangerous occurrences)

Guidance for employers

HSE information sheet

Education Information Sheet No1 (Revision 3)

Introduction

This information sheet gives guidance on how the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR) apply to schools. Most incidents that happen in schools or on school trips do not need to be reported. Only in limited circumstances will an incident need notifying to the Health and Safety Executive (HSE) under RIDDOR. The information sheet gives practical guidance to schools about what they need to report and how to do it.

What needs to be reported?

RIDDOR requires employers and others in control of premises to report certain accidents, diseases and dangerous occurrences **arising out of or in connection with work**.

The information sheet includes examples of the incidents that sometimes result from schools' activities and are reportable under RIDDOR. The sheet contains three sections, which cover:

- injuries and ill health involving employees (Section 1);
- injuries involving pupils and other people not at work (Section 2);
- dangerous occurrences (Section 3).

Who should report?

The duty to notify and report rests with the 'responsible person'. For incidents involving pupils and school staff, this is normally the main employer at the school. The education pages on HSE's website at www.hse.gov.uk/services/education provide information about who the employer is in different types of schools.

Some school employers may have centrally co-ordinated reporting procedures. In others, reporting

may be delegated to the school management team. The health and safety policy should set out the responsibilities and arrangements for reporting in each school.

Incidents involving contractors working on school premises are normally reportable by their employers. Contractors could be, eg builders, maintenance staff, cleaners or catering staff.

If a self-employed contractor is working in school premises and they suffer a specified injury or an over-seven-day injury, the person in control of the premises will be the responsible person. (See HSE's RIDDOR web pages at www.hse.gov.uk/riddor for more detail on the reporting arrangements for self-employed people.)

Who do I report to?

For general advice about how to report, see HSE's RIDDOR web pages. You can report all incidents online and there is a telephone service for reporting **fatal and specified injuries only**. Reporting details for out of hours incidents are available from HSE's out of hours web page at www.hse.gov.uk/contact/contact.htm.

For incidents on school premises involving members of staff, pupils or visitors, HSE is the enforcing authority and you should submit your reports to them. HSE is also the enforcing authority for nursery provision provided and operated by local authorities. For privately run nursery schools, the local authority is the enforcing authority.

What records must I keep?

You must keep records of:

- any reportable death, specified injury, disease or dangerous occurrence that requires reporting under RIDDOR;

- all occupational injuries where a worker is away from work or incapacitated for more than three consecutive days. **From 6 April 2012 you don't have to report over-three-day injuries, but you must keep a record of them.** Employers can record these injuries in their accident book.

You must keep records for at least three years after the incident.

Section 1: Injuries and ill health to people at work

Under RIDDOR, the responsible person must report the following work-related accidents, including those caused by physical violence, if an employee is injured, wherever they are working:

- accidents which result in death or a specified injury must be reported without delay (see 'Reportable specified injuries');
- accidents which prevent the injured person from continuing their normal work for more than seven days (not counting the day of the accident, but including weekends and other rest days) must be reported within 15 days of the accident.

The responsible person must also report any case of a work-related disease, specified under RIDDOR, that affects an employee and that a doctor confirms in writing (see 'Reportable diseases'). You can find detailed guidance about RIDDOR reporting and online reporting procedures at www.hse.gov.uk/riddor/report.htm.

If you are in control of premises, you are also required to report any work-related deaths and certain injuries to self-employed people that take place while they are working at the premises.

Reportable specified injuries

These include:

- 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:
 - cover more than 10% of the body; or
 - cause 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.

Physical violence

Some acts of non-consensual physical violence to a person at work, which result in death, a specified injury or a person being incapacitated for over seven days, are reportable. In the case of an over-seven-day injury, the incapacity must arise from a physical injury, not a psychological reaction to the act of violence.

Examples of reportable injuries from violence include an incident where a teacher sustains a specified injury because a pupil, colleague or member of the public assaults them while on school premises. This is reportable, because it arises out of or in connection with work.

Reportable occupational diseases

Employers must report occupational diseases when they receive a written diagnosis from a doctor that their employee has a reportable disease linked to occupational exposure. (See www.hse.gov.uk/riddor for details of the reporting arrangements for self-employed people.)

These include:

- carpal tunnel syndrome;
- severe cramp of the hand or forearm;
- occupational dermatitis, eg from work involving strong acids or alkalis, including domestic bleach;
- hand-arm vibration syndrome;
- occupational asthma, eg from wood dust and soldering using rosin flux;
- tendonitis or tenosynovitis of the hand or forearm;
- any occupational cancer;
- any disease attributed to an occupational exposure to a biological agent.

Stress

Work-related stress and stress-related illnesses (including post-traumatic stress disorder) are not reportable under RIDDOR. To be reportable, an injury must have resulted from an 'accident' arising out of or in connection with work.

In relation to RIDDOR, an accident is a discrete, identifiable, unintended incident which causes physical injury. Stress-related conditions usually result from a prolonged period of pressure, often from many factors, not just one distinct event.

Section 2: Incidents to pupils and other people who are not at work

Injuries to pupils and visitors who are involved in an accident at school or on an activity organised by the school are only reportable under RIDDOR if the accident results in:

- the death of the person, and arose out of or in connection with a work activity; or
- an injury that arose out of or in connection with a work activity **and** the person is taken directly from the scene of the accident to hospital for treatment (examinations and diagnostic tests do not constitute treatment).

The lists of specified injuries and diseases described in Section 1 only apply to employees. If a pupil injured in an incident remains at school, is taken home or is simply absent from school for a number of days, the incident is **not reportable**.

How do I decide whether an accident to a pupil 'arises out of or is in connection with work'?

The responsible person at the school should consider whether the incident was caused by:

- a failure in the way a work activity was organised (eg inadequate supervision of a field trip);
- the way equipment or substances were used (eg lifts, machinery, experiments etc); and/or
- the condition of the premises (eg poorly maintained or slippery floors).

So, if a pupil is taken to hospital after breaking an arm during an ICT class, following a fall over a trailing cable, the incident would be reportable. If a pupil is taken to hospital because of a medical condition (eg an asthma attack or epileptic seizure) this would not be reportable, as it did not result from the work activity.

This means that many of the common incidents that cause injuries to pupils at school tend not to be reportable under RIDDOR, as they do not arise directly from the way the school undertakes a work activity. Remember, in all these cases, you only need to consider reporting **where an accident results in a pupil's death or they are taken directly from the scene of the accident to hospital for treatment. There is no need to report incidents where people are taken to hospital purely as a precaution, when no injury is apparent.**

What about accidents to pupils during sports activities?

Not all sports injuries to pupils are reportable under RIDDOR, as organised sports activities can lead to sports injuries that are not connected with how schools manage the risks from the activity.

The essential test is whether the accident was caused by the condition, design or maintenance of the premises or equipment, or because of inadequate arrangements for supervision of an activity. If an accident that results in an injury arises because of the normal rough and tumble of a game, the accident and resulting injury would not be reportable. Examples of reportable incidents include where:

- the condition of the premises or sports equipment was a factor in the incident, eg where a pupil slips and fractures an arm because a member of staff had polished the sports hall floor and left it too slippery for sports; or
- there was inadequate supervision to prevent an incident, or failings in the organisation and management of an event.

What about accidents to pupils in a playground?

Most playground accidents due to collisions, slips, trips and falls are not normally reportable. Incidents are only reportable where the injury results in a pupil either being killed or taken directly to a hospital for treatment. Either is only reportable if they were caused by an accident that happened from or in connection with a work activity.

This includes incidents arising because:

- the condition of the premises or equipment was poor, eg badly maintained play equipment; or
- the school had not provided adequate supervision, eg where particular risks were identified, but no action was taken to provide suitable supervision.

Physical violence

Violence between pupils is a school discipline matter and not reportable under RIDDOR, as it does not arise out of or in connection with a work activity.

Other scenarios

Injuries to pupils while travelling on a school bus
If another vehicle strikes the school bus while pupils are getting on or off and pupils are injured and taken to hospital, this is normally reportable under RIDDOR.

However, you do not have to report deaths and injuries resulting from a road traffic accident involving a school vehicle travelling on the public highway under RIDDOR. These are classed as road traffic incidents and are investigated by the police.

Incidents involving pupils on overseas trips

RIDDOR only applies to activities which take place in Great Britain. So, any incident overseas is not reportable to HSE.

Incidents to pupils on work experience placements

If pupils are on a training scheme or work placement, they are deemed to be employees for the period of the placement. In these circumstances, the employer, as the responsible person, should report a death, injury or disease to a pupil, which arises out of or in connection with work. This means the wider range of reporting categories for employees is applicable.

Section 3: Dangerous occurrences

These are specified near-miss events, which are only reportable if listed under RIDDOR.

Reportable dangerous occurrences in schools typically include:

- 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.

Supplementary information

Consultation

Under the Safety Representatives and Safety Committees Regulations 1977 and the Health and Safety (Consultation with Employees) Regulations 1996, employers must make relevant health and safety documents available to safety representatives.

This includes records kept under RIDDOR, except where they reveal personal health information about individuals. Further information is available in *Consulting employees on health and safety: A brief guide to the law* Leaflet INDG232(rev2) HSE Books 2013 www.hse.gov.uk/pubns/indg232.htm.

Reporting requirements of other regulators

There may be other reporting requirements placed on schools by other regulators in the education sector. The requirements of these other regulators are separate to, and distinct from, the legal duty to report incidents under RIDDOR.

Further information

For information about health and safety, or to report inconsistencies or inaccuracies in this guidance, visit www.hse.gov.uk/. You can view HSE guidance online and order priced publications from the website. HSE priced publications are also available from bookshops.

This guidance is issued by the Health and Safety Executive. Following the guidance is not compulsory, unless specifically stated, and you are free to take other action. But if you do follow the guidance you will normally be doing enough to comply with the law. Health and safety inspectors seek to secure compliance with the law and may refer to this guidance.

This information sheet is available at:
www.hse.gov.uk/pubns/edis1.htm.

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Appendix 3: Automated External Defibrillator (AED) Policy

Location and access

Thornden has three AEDs strategically placed to ensure that they can be accessed quickly in an emergency. All AEDs are registered with the local ambulance service. One is behind Reception in a locked cabinet; keys are located in a break-glass box beside it and in Reception. The second is in Thornden Hall foyer in a locked cabinet; keys are located in a break-glass box beside it and in the Box office. A third AED has been provided by and is the responsibility of the Tennis Club and is located outside on the wall of the Tennis Pavillion with access via a code know by appropriate staff and available by calling 999. Cabinets are clearly marked with a standard sign for AEDs and access is kept clear.

Additional equipment and maintenance

Spare electrode pads, protective gloves, safety razors, pocket mask and dry wipes are also stored in each locked cabinet. The School's AEDs self-test warning light will be checked and recorded daily when the school is open and at least weekly during school holidays. The general condition of the AED, housing and expiry dates of consumables will be checked and recorded monthly. The user manual will be consulted in the event of a fault being identified.

Training

All staff will be given a brief general awareness session regarding the use of the AEDs in school on an annual basis. First Aiders are trained in the use of AEDs. However, it should be noted that AEDs are designed to be used by someone without any specific training, therefore in an emergency if a First Aider is not immediately available, untrained staff should phone 999; the call handler will assist with instructions for confirming cardiac arrest, starting compression-only CPR, and using an AED which gives automated step-by-step instructions.

Key message from Resuscitation Council UK; Basic Life Support Guidelines 2021

- Ensure it is safe to approach the casualty
- Shout for help
- Promptly assess the unresponsive casualty to determine if they are breathing normally.
 - A short period of seizure-like movements can occur at the start of cardiac arrest. Assess the person after the seizure has stopped.
 - If a casualty is unresponsive with absent or abnormal breathing a lone rescuer with a mobile phone should dial 999, activate the loudspeaker and immediately start CPR assisted by the ambulance dispatcher.
 - If you are a lone rescuer and you must leave a casualty to dial 999, phone the ambulance service first and then start CPR.
 - Send for the AED as soon as possible.
 - If trained and able, combine chest compressions and rescue breaths, otherwise provide chest compression-only CPR.
 - When the AED arrives, switch it on and follow the instructions assisted by the ambulance call handler.
 - Minimise interruptions to CPR when attaching the AED pads to the casualty.
 - Continue giving CPR until:
 - the AED asks you to pause while it reanalyses and gives another shock if needed
 - a paramedic arrives and tells you what to do

- the person shows signs of life.

For a victim who is responsive but a heart attack is suspected

- Dial 999 and state that you suspect a heart attack.
- Sit the casualty down comfortably on the floor with head and shoulders supported, knees bent.
- Send for the AED, to be on standby, as well as the Aspirin 300mg medication (for those over 15), stored with the AED, in a plastic box labelled 'Heart Attack'.
- Follow the instructions inside the 'Heart Attack' box on the St John Ambulance Heart Attack: First aid advice sheet, 2024.
- If unsure or you are attending a student, advise ambulance call handler that you have a box of Aspirin 300mg and await their instructions.