



Hampton Court House

First Aid Policy & Accident Procedure

Reviewed by NSh

Last Updated: 26 Feb 2024

Next Review: Feb 2025

Contents

First Aid Policy	3
Scope of this Policy	3
Training and Awareness	3
Aim of this Policy	3
Guidance and References	4
Roles and Responsibilities	4
All members of staff must:	4
The Senior Leadership Team will:	5
First Aiders will:	5
Location of First Aid Kits and Emergency Medication	6
Arrangements for pupils with particular medical conditions	7
Visits and events off site	7
Procedure in the event of contact with blood or other bodily fluids	7
Calling Ambulances	7
Reporting Accidents & Medical Emergencies	8
Reporting to the SLT	8
Reporting to Parents	8
The Accident and Near Miss Recording	8
Reporting to HSE (RIDDOR) / OFSTED	9
Minor injuries	9
Eyes	10
Reportable specified injuries for Employees	10
Incidents to pupils and other people who are not at work	11
Reviewing Risk Assessments	11
Accident Procedure	12



Hampton Court House

First Aid Policy

Scope of this Policy

1. This policy applies to Hampton Court House School and Hampton Court House Early Years (hereafter known as Hampton Court House or HCH).
2. This policy covers emergency first aid and outlines the accident procedure. It does not cover the treatment of minor illnesses with medication; for that please see the Administration of Medication Policy.

Training and Awareness

3. All staff at Hampton Court House are expected to read this policy and refresh their memory of it annually.
4. All new staff will receive induction training upon starting work and this will include a copy of this policy and induction on the accident procedure. This can be part of the verbal training carried out via the "shadowing period." This is also covered in the September inset day, the teachers will be informed of what is kept in reception also and the receptionist's function and responsibility.
5. In the event of an accident all members of the school community must be aware of the support available and the procedures that must be followed.
6. The school encourages as many staff as possible to undertake First Aid training, and to refresh that training every three years. For most staff this will mean the one-day Emergency First Aid at Work course, or equivalent, but those working in the Early Years or KS1 will be asked to take the Paediatric First Aid course instead. The receptionist shall carry out both courses.
7. It is emphasised that the team comprises qualified **first aiders** and **not** trained doctors or nurses.
8. The term 'first aider' refers to those members of the school community who are in possession of a valid first aid at work certificate or equivalent. In addition, there are others on site with first aid skills, though their qualified status period has now lapsed.
9. A list of those first aiders with up to date first aid qualifications is posted around the school and updated at least annually.
10. A summary of this policy can be found in the Policies Team and on the School Website.

Aim of this Policy

11. The **accident procedure** seeks to ensure that every pupil, member of staff and visitor will be well looked after in the event of an accident or medical emergency, no matter how minor or major.
12. The purpose of the Policy is therefore:
 - a. to ensure effective and safe first aid cover for pupils, staff, and visitors.
 - b. to ensure preventative measures are in place.

- c. to ensure that all staff and pupils are aware of the system in place.
- d. to promote awareness of health & safety issues within school and on school trips, to prevent, where possible, potential dangers or accidents.
- e. to clarify where children should be sent to if they have been hurt in an accident and that accidents are dealt with appropriately according to the severity of the injury.
- f. to report to parents the nature of the injury and what treatment, if any, has been administered.
- g. to ensure an injury or accident is reported correctly by filling in an accident form which can be found in the All-Staff team.

Guidance and References

13. This policy has been written in line with the requirements of the HCH Health & Safety Policy, and with reference to the HSE's guidance [First aid at work](#), and the DfE's non-statutory [Guidance on First Aid for Schools](#).

Roles and Responsibilities

All members of staff must:

- 14. familiarise themselves with the first aid procedures in operation and ensure that they know who the current First Aiders are.
- 15. be aware of specific medical conditions and allergies for individual pupils as published by the school office. Allergy/medical/dietary list is given to the school catering team and updated on iSams. Students with severe allergies and medical conditions are indicated on class lists in iSams using a red medical flag.
- 16. ensure that their pupils are aware of the procedures in operation. This is the teacher's responsibility to explain the first aid process.
- 17. Teachers to ensure that they have a current medical consent form for every pupil that they take out on a school trip which indicates any specific conditions or medications of which they should be aware. A condition that is life threatening or could cause serious injury must be recorded on the trip risk assessment.
- 18. Send a pupil who feels generally 'unwell' to Reception but not specifically to a first aider, unless his/her deterioration seems uncharacteristic and is causing concern.
- 19. in the event of an accident or medical emergency
 - a. have regard to personal safety.
 - b. always call 999 for an ambulance should you think that one may be required.
 - c. not move a casualty until they have been assessed by a qualified First Aider unless the casualty is in immediate danger.
 - d. call for a nearby first aider to take charge of the situation or send for help to the school Office (0208 614 0865) as soon as possible either by a person (a 'reliable' child is permitted) or telephone, ensuring that the messenger knows the precise location of the casualty. Where possible, confirmation that the message has been received must be obtained.
 - e. provide such support and assistance to the casualty and the first aider as you are reasonably able to.

- f. assist with making the scene safe and the clear up. Please see Procedure in the event of contact with blood or other bodily fluids. There are spill kits available on site.
- g. ensure that the accident is properly reported and documented. Pupils should be recorded in iSams medical centre and Staff/Visitors on the accident forms located in the all staff drive.
- h. review the risk assessments as needed

The Senior Leadership Team will:

- 20. provide adequate first aid cover, as outlined in the Health & Safety (First Aid) Regulations.
- 21. ensure that adequate first aid cover is available whenever children are on site (this may be beyond normal working hours), including ensuring there will always be one paediatric first aid trained person on site when EYFS children are present and on any EYFS outing.
- 22. ensure all new staff are made aware of first aid procedures in school. This should be covered as part of inset training / induction.
- 23. Maintain a record of employees who have undergone first aid training, which can be requested from the HR office
- 24. at the start of each academic year, provide the first aid team with a list of pupils who are known to be asthmatic, anaphylactic, diabetic, epileptic or have any other serious illness. This is available to view by relevant staff via iSam's
- 25. have a file of up-to-date medical consent forms for every pupil in each year and ensure that these are readily available for staff responsible for school trips/outings. This information comes from the admissions team, paper consent forms are in the pupil's paper files, admissions pass the paper consent forms to reception who add them to iSams.
- 26. monitor the implementation of this policy and review the policy documentation annually.
- 27. conduct investigations into incidents as needed

First Aiders will:

- 28. act as a person who can be relied upon to help when the need arises.
- 29. familiarise themselves with the first aid points around the school.
- 30. always attend a casualty when requested to do so and treat the casualty to the best of their ability in the safest way possible. This includes wearing gloves where any loss of blood or body fluid is evident, calling for help from other first aiders or emergency services. Please see Calling Ambulances.
- 31. help fellow first aiders at an incident and provide support during the aftermath.
- 32. insist that **any** casualty who has sustained a significant head injury is seen by professionals at the hospital, either by sending them directly to hospital or by asking parents to pick up a child to take them to hospital; ensure that parents are aware of **all** head injuries promptly.
- 33. ensure that a child who is sent to hospital by ambulance is:
 - a. accompanied in the ambulance at the request of paramedics.
 - b. followed to a hospital by a member of the Safeguarding Team to act *in loco parentis* if a relative cannot be contacted.
 - c. met at hospital by a relative.

The first aider need not be the member of staff to accompany the casualty to hospital, however, an appropriate person should be sent.

Liaison **must** occur with the person responsible for cover, which this year is **Rob Armiger**, to ensure that lessons are covered in the event of an absent teacher. Please ensure the Deputy Head Pastoral or Academic are also informed.

34. ensure that everything is cleared away, using gloves, and every dressing etc. be put in a yellow bag for contaminated/used items and sealed tightly before disposing of the bag in a bin. No contaminated or used items should be left lying around.
35. keep a record of each pupil attended to, the nature of the injury and any treatment given, in the Accident Book, and ensure that those who need to be informed have been.
36. assist with investigations into incidents as needed

Location of First Aid Kits and Emergency Medication

37. In addition to the portable first aid kits, first aid kits are in a cupboard in the school Reception. Also in this cupboard are zip pockets containing individual pupil's medication e.g. EpiPen, inhalers and steps to follow if required.
38. Location of first aid kits. Anyone using the kits or noticing a missing or damaged kit must report this to the School Reception.
 1. Main building TF3
 2. Main building reception
 3. Main building LG1
 4. Main building LG13 (Staff Room)
 5. Main building Kitchen
 6. Main building Conservatory
 7. Front gate security hut
 8. Back gate security hut
 9. Greenhouse
 10. Science Prep Room
 11. The Little Courtyard Staffroom
 12. Art block CY1 (Senior Art)
 13. Art Block CY4 (Junior Art)
 14. Pond – notice board
 15. Sports field
 16. Cottage

39. The members of staff responsible for those areas are responsible for informing the School Caretaker if the kits need restocking. The first aid kits are checked regularly by the estates and operations team.
40. In the Early Years, a first aid kit must be accessible at all times (e.g. whilst on duty, at Forest School or on the bus to swimming).
41. The Caretaker is responsible for ensuring that the portable first aid kits are adequately stocked and always to hand - in the above set locations.

Arrangements for pupils with particular medical conditions

42. Arrangements for pupils with particular medical conditions are covered in the [Medication Policy](#). This includes students with allergies, epilepsy, diabetes, and asthma. The details of these conditions are recorded in the school database and staff are provided with update briefings annually or if conditions change.

Visits and events off site

43. Before undertaking any off-site events, the teacher organising the trip or event will assess the level of first aid provision required by undertaking a risk assessment of the event and people involved. This will be checked and approved by the External Visits Coordinator (EVC).
44. Please see the separate [Trips and Off-site Visits Policy](#) for more information about the school's visit requirements.

Procedure in the event of contact with blood or other bodily fluids

45. First Aiders should take the following precautions to avoid risk of infection:
 - a. cover any cuts and grazes on their own skin with a waterproof dressing;
 - b. wear suitable disposable gloves when dealing with blood or other bodily fluids;
 - c. use suitable eye protection and a disposable apron, when giving mouth to mouth resuscitation;
 - d. wash hands after every procedure.
46. If a First Aider suspects that they or any other person may have been contaminated with blood and/or other bodily fluids which are not their own, the following actions should be taken without delay.

Taking care not to swallow the water:

- a. wash splashes off skin with soap and running water;
- b. wash splashes out of eyes with tap water and/or an eye wash bottle;
- c. wash splashes out of the nose or mouth with tap water.

Calling Ambulances

47. The designated First Aider is to always call an ambulance on the following occasions:
 - a. In the event of a serious injury;
 - b. In the event of any significant head injury;
 - c. Whenever there is the possibility of a fracture or where this is suspected;

- d. Whenever the first aider is unsure of the severity of the injuries;
 - e. Whenever the first aider is unsure of the correct treatment.
48. A period of unconsciousness may be explained by a pre-existing medical condition, but fainting can also indicate more serious conditions, so if in any doubt call an ambulance.
 49. If an ambulance is called, then the First Aider in charge should make arrangements for the ambulance to have access to the injured person and contact the security manager and Reception to let him know.
 50. Arrangements should be made to ensure that any pupil is accompanied in an ambulance, or followed to hospital, by a member of staff until one of the pupil's parents, guardians or their named representative is present. A member of staff will remain with the pupil until one of the pupil's parents, guardians or a named representative appointed by a parent arrives at the hospital.

Reporting Accidents & Medical Emergencies

Reporting to the SLT

51. In the event of a significant incident (serious accident, injury, or medical emergency), always inform a member of the Senior Leadership Team as soon as possible after immediate aid has been given. The relevant Form Tutor and the remainder of the SLT should be informed as soon as is practical. Both the receptionists and the first adult on the scene are responsible for ensuring this occurs.
52. The Senior Leadership Team will be able to offer advice and support with next steps.

Reporting to Parents

53. All accidents which involve a significant injury to a pupil must be reported to the pupil's parents by phone before the end of school day or in person at the end of the school day.
54. Parents must be informed in writing of any injury to the head, minor or major, and be given guidance on action to take if symptoms develop.
55. In the event of serious injury or an incident requiring emergency medical treatment, the pupil's form tutor, in consultation with any member of the Senior Leadership Team, will telephone the pupil's parents as soon as possible.
56. Details of nearby first aiders and the locations of emergency equipment is displayed in each classroom and at Reception.

The Accident and Near Miss Recording

- **Accidents** – an unexpected event which results in serious injury or illness and may also result in property damage.
 - **Near miss** – a narrowly avoided accident.
 - **Incidents** – an instance of something happening, an unexpected event or occurrence that does not result in serious injury or illness but may result in property damage.
57. All significant incidents, regardless of whether they result in injury, must be recorded.
 58. Accidents (incidents which result in injury) must be recorded via the accident / incident / near miss form

59. This should be done by completing the Accident Form, as soon as reasonably practicable after all other steps are complete and returning the form to the school reception (if hard copy).
60. Medical emergencies are also recorded on an Accident form.
61. Incidents which do not result in injury, but are otherwise reportable, must be reported to the Operations Director to be recorded in the Near Miss Book.
62. The Accident record is kept in Reception and a spreadsheet kept. The Deputy Head - Compliance reviews this information

Reporting to HSE (RIDDOR) / OFSTED

63. Under HSE's Incident reporting in schools (accidents, diseases, and dangerous occurrences), there are certain incidents that must be reported. Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR) apply to schools.
64. Most incidents that happen in schools or on school trips do not need to be reported. Only in limited circumstances will an incident need to be notified to the Health and Safety Executive (HSE) under RIDDOR.

You must tell Ofsted about any of the following:

- anything that requires resuscitation
- admittance to hospital for more than 24 hours
- a broken bone or fracture
- dislocation of any major joint, such as the shoulder, knee, hip, or elbow
- any loss of consciousness
- severe breathing difficulties, including asphyxia
- anything leading to hypothermia or heat-induced illness

Minor injuries

- You do not need to tell Ofsted about minor injuries, even if treated at a hospital (for less than 24 hours). These include:
- animal and insect bites, such as a bee sting that does not cause an allergic reaction
- sprains, strains, and bruising, for example if a child sprains their wrist tripping over their shoelaces
- cuts and grazes
- minor burns and scalds
- dislocation of minor joints, such as a finger or toe

- wound infections

Eyes

- You must report to Ofsted if a child suffers any loss of sight, whether it is temporary or permanent. You must also tell us about any:
 - penetrating injury to the child's eye
 - chemical or hot metal burn to the child's eye

Substances and electricity

- If a child in your care suffers any injury from, or requires medical treatment for, any of the following situations you must tell Ofsted:
 - from absorption of any substance:
 - by inhalation
 - by ingestion
 - through the skin
 - from an electric shock or electrical burn
 - where there is reason to believe it resulted from exposure to:
 - a harmful substance
 - a biological agent
 - a toxin
 - an infected material

Reportable specified injuries for Employees

65. These include:

- a. fractures, other than to fingers, thumbs, and toes;
- b. amputations;
- c. any injury likely to lead to permanent loss of sight or reduction in sight;
- d. any crush injury to the head or torso causing damage to the brain or internal organs;
- e. 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;
- f. any scalping requiring hospital treatment;
- g. any loss of consciousness caused by head injury or asphyxia;
- h. 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.

Incidents to pupils and other people who are not at work

66. 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:
 - a. the death of the person, or
 - b. if they result in an injury and the person is taken directly from the scene of the accident to hospital for treatment to that injury. Examinations and diagnostic tests do not constitute 'treatment' in such circumstances.
67. There is no need to report incidents where people are taken to hospital purely as a precaution when no injury is apparent.
68. 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**.
69. It will be the responsibility of the Main First Aider with the support of the Senior Leadership Team to report the incidents accordingly. Reports to HSE can be made here: <http://www.hse.gov.uk/riddor/report.htm>

Reviewing Risk Assessments

70. Following an accident or near miss, the risk assessment covering the activity taking place at the time, or the area in which the accident or near miss took place should be reviewed.
71. In the case of a significant incident a member of the SLT will be appointed to oversee this process.



Hampton Court House

Accident Procedure

In the event of an accident or medical emergency please follow this procedure.

- 1. Make the area safe and free from danger**
- 2. Assess the situation quickly and calmly**
- 3. Give emergency aid**
- 4. Triage the situation – if they require minimal help (plasters/ice pack) then the first aider should administer this. If it is more serious but they are fit to move, take the injured party to reception, otherwise get help, and administer first aid**
- 5. Get others to clear the area of bystanders**
- 6. Reassure the injured party and remain with them until relieved**
- 7. Inform SLT, the school Caretaker and parents**
- 8. Complete an accident / incident / near miss form - send a copy to your line manager / SLT and the school Caretaker**

In the event of administering first aid or emergency medication the details must be recorded on the medical reporting form.

Reception will contact the child's parents and ask them to confirm receipt of the accident form, if appropriate.

In the event of a serious accident always inform a member of the Senior Leadership Team as soon as possible after immediate aid has been given. The relevant Form Tutor and the remainder of the SLT should be informed as soon as is practical. Both reception and the first adult on the scene are responsible for ensuring this occurs.

If a child is absent from school the day after an accident, the form tutor should telephone home to find out how the child is recovering. The form tutor should keep the SLT up to date by email.

Risk assessments will be reviewed following an accident.

