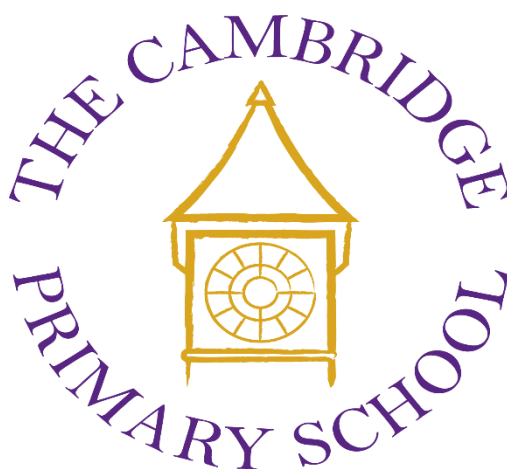


THE CAMBRIDGE PRIMARY SCHOOL

FIRST AID POLICY

2025/2026



Date of Approval:	November 2025
Date of Next Review:	November 2026

The Cambridge Primary School

The Cambridge Primary School
Queens Avenue, Wellesley
Aldershot, Hampshire GU11 4AA
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First Aid Policy

1. What is first aid?

First aid can save lives and prevent minor injuries becoming major ones. Under health and safety legislation employers have to ensure that there are adequate and appropriate equipment and facilities for providing first aid in the workplace.

2. First aid and medication

All staff have received First Aid training. Relevant staff including Early Years staff and some of the office team have received extended Paediatric First Aid training. Both first aid qualifications include first aid training for infants and young children. A record of the training, including the expiry date is recorded and centrally held. Each class has their own first aid kit stored in the classroom.

Our First Aid Kits:

- Comply with the Health and Safety (First Aid) Regulations 1981 and British Standard – BS 8599-1:2019;
- Are regularly checked.
- Are re-stocked as necessary;
- Are easily accessible to adults; and
- Are kept out of the reach of children.

There is no mandatory list of items for a first-aid container. However, the HSE (Health and Safety Executive) recommend that, where there is no special risk identified, a minimum provision of first aid items would be:

- Individually wrapped sterile adhesive dressings (assorted sizes)
- Sterile eye pads
- Individually wrapped triangular bandages (preferably sterile)
- Medium sized (approximately 12cm x 12cm) individually wrapped sterile unmedicated wound dressings;
- Large (approximately 18cm x 18cm) sterile individually wrapped unmedicated wound dressings
- Pair of disposable gloves

The Classroom Teachers together with Office staff are responsible for maintaining the kits in classrooms. Class teachers are expected to take their first aid kit with them when working in other areas of the school, such as the playground/hall for PE and other events. During break and lunch times we have 1 x medical kit on a dedicated bench outside, manned by a member of staff. The medical room, next to the school office hosts a portable First Aid Kit, along with the stock to replenish the classroom and lunchtime supervisor first aid kits. These are checked and restocked at the end of every half term by the office team. The classroom staff should also checked for replenishment of content after each use.

All staff should take precautions to avoid infection and must follow basic hygiene procedures. Staff should have access to single-use disposable gloves and hand washing facilities, and should take care when dealing with blood or other body fluids and disposing of dressings or equipment. Gloves **MUST** be worn when dealing with blood or other body fluids and disposing of dressings or equipment to reduce the risk of staff being exposed to blood borne pathogens.

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3. Record of Accidents.

- Accidents are recorded on the School MIS system Arbor and can be viewed under pupil details. All staff are responsible for recording any accidents from lunchtime in Arbor at the end of the lunch break, on a daily basis. All accidents must be recorded on the system, on the same day.
- All staff and volunteers know how to record on Arbor; and are by the office staff to identify any potential or actual hazards. The caretaker is alerted to hazards and carries out regular checks to identify these. Serious accidents are reviewed at Governors' meetings.
- A full detailed account of how the accident occurred must be recorded on the school MIS system. If connected to behaviour or safeguarding, this should also be recorded on CPOMS.
- When parents are contacted, where possible this should be by the member of staff who took the account or treated the injury so that full details can be shared with parents.

Our MIS system keeps a record of any first-aid treatment given by first aiders and other members of staff. Details of any injury/accidents MUST be recorded and completed on the same day of the incident and include:

- The date, time and place of the incident.
- The name of the injured or ill person.
- Details of the injury or illness and first-aid given.
- What happened to the person immediately afterwards (for example, whether they went home, went back to class, or went to hospital).

The information can:

- Help the school identify accident trends and possible areas for improvement in the control of health and safety risks;
- Be used for reference in future first-aid need assessments;
- Be helpful for insurance and investigative purposes.
- Share with parents, including suggested aftercare

Ofsted requirement to notify parents and the Data Protection Act

Parents must be informed of any serious accidents, injuries sustained and/or first aid treatment given to their child whilst in school. Staff must be aware of the Data Protection Act and not allow parents to view personal information other than that relating to their child and must not allow parents to take notes, photographs or obtain a copy of the accident record.

4. Administration of medication

- Only prescribed medication may be administered. It must be in date and prescribed for the current condition.
- First Aid qualified staff members can administer paracetamol during the school day with parental consent.
- Children taking prescribed medication must be well enough to attend the school.
- Children's prescribed drugs are stored in their original containers, in the school office, are clearly labelled and are inaccessible to the children. Medications that require refrigeration are kept in a locked fridge.
- Parents complete signed form for the administration of medication. This states the name of the child, name/s of parent(s), date, the name of the medication, the dose and time, or how and when the medication is to be administered. Parents

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should administer medication before school so that staff only gives one dosage during the school day.

- If the administration of prescribed medication requires medical knowledge, individual training is provided for the relevant member of staff by a health care professional.

5. Sickness

Our policy for the exclusion of ill or infectious children is discussed with parents. This includes procedures for contacting parents – or other authorised adults – if a child becomes ill while in the school.

- We do not provide care for children, who are unwell, e.g. have a temperature, or sickness and diarrhea, or who have an infectious disease.
- Children with head lice are not excluded, but must be treated to remedy the condition.
- Parents are notified if there is a case of head lice in the school.
- HIV (Human Immunodeficiency Virus) may affect children or families attending the school. Staff may or may not be informed about it.
- Children or families are not excluded because of HIV status.
- Good hygiene practice concerning the clearing of any spilled bodily fluids is carried out at all times by the caretaker and the Emergency First Aiders.

6. Treatment of head injuries to children

Children often fall and bang themselves, and thankfully most bangs to the head are harmless events and can be dealt with by the supervising adult by applying a cold compress (wet tissue or cloth) for the child's own comfort. Parents/Carers are informed if the child has had a bump to the head using a sticker and a bumped head email with details of the accident.. It is the responsibility of the first aider dealing with the head bump to inform the class teacher. Under no circumstances, should ICE PACKS be applied to head bumps. It will reduce swelling but it can actually do more harm if there is a hairline fracture this could result in the child needing additional emergency hospital treatment.

Emergency First Aiders should be sought if the child:

- becomes unconscious;
- is vomiting or shows signs of drowsiness;
- has a persistent headache;
- complains of blurred or double vision;
- is bleeding from the nose or ear; and/or
- has pale yellow fluid from the nose or ear.

If any of the above symptoms occurs in a child who has had a bang to the head, urgent medical attention is needed. Parents should be contacted and the emergency service too. In the event of an accident in which the child cannot stand up unaided, he/she should be left in the position that he/she was found (even if this is in the toilets or playground) so long as it is safe to do so and the emergency first aider must be called immediately to assess the situation.

7. Disposing of blood

Blooded items should be placed in the yellow clinical waste bags and disposed of in the clinical waste bin in the medical room. Gloves MUST be worn when dealing with blood or other body fluids and disposing of dressings or equipment to reduce the risk of staff being exposed to blood borne pathogens.

8. Splinters

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Following advice from the Health and Safety Executive, splinters can be removed if they are small and you can see the angle it went in but not if they are embedded or in a joint. They must be extracted in the same direction they went in. If splinters are deeply embedded then parents should be consulted and professional medical help sought.

9. Ice Packs & Cold Compresses

Instant ice packs are single-use only and for the treatment of sprains, strains and bruises and must be kept out of children's reach. These are stored in ~~the medical room~~ first aid kits.

Cold compresses are used for bumps and bruises.

Guidance on the use of ice packs: Ideally an ice pack should be applied within 5 -10 minutes of the injury occurring. The pack must be wrapped in a cloth to prevent cold burns and applied to the injured area for 20 - 30 minutes and repeated every 2 to 3 hours for the next 24 – 48 hours. Emergency first aiders must check the colour of the skin after 5 minutes of applying the pack. If the skin is bright red or pink, remove the pack. With injuries older than 48 hours, a heat source can be applied to bring more blood to the injured area to stimulate the healing process.

DO NOT USE ICE OR HEAT

- If the casualty is diabetic
- Over areas of skin that are in poor condition
- Over areas of skin with poor sensation to heat or cold
- Areas with known poor circulation
- In the presence of visible or know infection(s)

10. Asthma

All pumps are labelled and kept in the classroom first aid box. All inhalers should accompany children when they are off the school grounds e.g. on a trip, swimming, visiting another school, etc. Children on the asthma register who have parental consent for the use of the emergency inhaler are clearly indicated. An emergency inhaler can be used if the child's prescribed inhaler is not available (for example, because it is broken, or empty). The emergency kits are clearly labelled for use in school, on trips and in the event of an evacuation. This is stored in the medical room. ALWAYS SEEK THE ADVICE/ATTENTION OF A QUALIFIED FIRST AIDER IN THE EVENT OF AN ASTHMA ATTACK.

Please see the asthma policy for further information.

11. Epi-Pens

Epi-Pens are labelled and kept in the classroom first aid box. The school have their own spare Epi-pen that can be used in an emergency situation. The spare is kept in the emergency grab bag. Anyone can administer an Epi-Pen in an emergency if the adult/child is unable to do it themselves. Emergency services must be informed at the same time as the Epi-Pen is administered. Epi-pens do have an expiry date so the emergency one is monitored and swapped out by the office team.

12. Off-site procedures

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

- A mobile phone
- The classroom portable red first aid kit
- Information about the specific medical needs of pupils
- Parents' contact details

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Risk assessments will be completed by the class teacher prior to any educational visit that necessitates taking pupils off school premises.