

FIRST AID POLICY

FOREWORD

Freedom Foundation Alternative Provision is a site for KS1 & KS2 Alternative Provision. They are referred to as Freedom Foundation AP/AP for the benefit of students and this document.

01 AIMS

This policy aims to:

- Ensure the health and safety of all staff, students, and visitors
- Ensure that staff and advisory board members 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

02 LEGISLATION AND GUIDANCE

This policy is based on advice from the Department for Education (DfE) 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 1999](#), which require employers to carry out risk assessments of the risks to the health and safety of their employees, 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 pupils

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

03 DEFINITIONS

First Aid – The treatment of minor injuries which do not need treatment by a medical practitioner or nurse as well as treatment of more serious injuries prior to assistance from a medical practitioner or nurse for the purpose of preserving life and minimising the consequences of injury or illness. For the avoidance of doubt, First Aid does not include giving any tablets or medicines, the only exception being the giving of Aspirin in accordance with accepted First Aid practice to treat a suspected heart attack.

Trained First Aiders – Members of staff who have completed an approved First Aid course and hold a valid certificate of competence in 'First Aid at Work (FAW)' or 'Emergency First Aid at Work (EFAW)' or an approved alternative qualification which has been identified in place of FAW or EFAW which meets the requirements of the First Aid Guidance.

Appointed Persons – Members of staff who are not qualified First Aiders but who are responsible for looking after the First Aid equipment and facilities and calling the emergency services if required.

Accident – Anything which results in harm or damage.

Near Miss – Anything which did not result in harm or damage but had the potential to.

04 ROLES AND RESPONSIBILITIES

04.1 APPOINTED PERSON(S) AND FIRST AIDERS

The APs appointed person is Simon Green, Anna Malik, Danielle Brown, Athena Morley. They are responsible for:

- Taking charge when someone is injured or becomes ill (all first aiders)
- Ensuring there is an adequate supply of medical materials in first aid kits, and replenishing the contents of these kits (Simon Green – Head of Provision)
- Ensuring that an ambulance or other professional medical help is summoned when appropriate (all first aiders).

First aiders are trained and qualified to carry out the role (see section 7) and are responsible for:

- 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
- Sending pupils home to recover, where necessary
- Filling in an accident report on the same day as, or as soon as is reasonably practicable, after an incident (see the template in appendix 2)
- Keeping their contact details up to date

Our first aiders are listed in appendix 1. Their names will also be displayed prominently around the alternative provision site.

04.2 THE ADVISORY BOARD

The advisory board has ultimate responsibility for health and safety matters in the alternative provision, but delegates operational matters and day-to-day tasks to the Head of Provision and staff members.

04.3 THE HEAD OF PROVISION

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

- Ensuring that an appropriate number of trained first aid staff present on site 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/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

- Reporting specified incidents to the Health and Safety Executive (HSE) when necessary (see section 6)

04.4 STAFF

Alternative provision staff are responsible for:

- Ensuring they follow first aid procedures
- Ensuring they know who the first aiders and appointed person on site are
- Completing accident reports (see appendix 2) for all incidents they attend to where a first aider is not called
- Informing the Head of Provision or their manager of any specific health conditions or first aid needs

04.5 STUDENTS

All learners must:

- Report all accidents; incidents and near misses to an appropriate member of staff.
- Not intentionally or recklessly interfere with anything provided in the interests of health and safety e.g., first aid equipment.

05 ROLES AND RESPONSIBILITIES

05.1 ON SITE PROCEDURES

In the event of an accident resulting in injury:

- The closest member of staff present will assess the seriousness of the injury and seek the assistance of a qualified first aider, if appropriate, who will provide the required first aid treatment. **If those first on scene ascertain that professional emergency assistance is required, then they must dial 999 without delay i.e. prior to awaiting the arrival of a trained first aider.**
- The first aider, if called, will assess the injury and decide if further assistance is needed from a colleague or the emergency services. They will remain on the scene until help arrives.
- The first aider will also decide whether the injured person should be moved or placed in a recovery position
- If the first aider judges that a pupil is too unwell to remain on site, parents/carers will be contacted and asked to collect their child. On their arrival, the first aider will recommend next steps to the parents/carers.
- If emergency services are called, the Head of Provision will contact parents/carers immediately
- The first aider will complete an accident report form on the same day or as soon as is reasonably practical after an incident resulting in an injury
- In the event of any staff, contractor, visitor, member of the public) sustaining harm, an online Accident/Near Miss form must be completed (see section 7) on the same day or as soon as is reasonably practicable after the incident
- All students related injury/harm must be reported via the Health and Safety Accident/Incident folder on site and uploaded to the Freedom Foundation AP Team on the same day or as soon as is reasonably practicable after the incident

05.2 OFF-SITE PROCEDURES

Prior to any off-site activities, e.g., educational visits, a risk assessment must be undertaken by a competent member of staff and approval sought from the relevant manager.

When taking students off the alternative provision premises, staff will ensure they always have the following:

- A facility mobile phone
- Emergency contact details for students
- A portable first aid kit including (appropriate to the group size and risks), at minimum:
 - A leaflet giving general advice on first aid
 - 6 individually wrapped sterile adhesive dressings
 - 1 large sterile unmedicated dressing
 - 2 triangular bandages – individually wrapped and preferably sterile
 - 2 safety pins
 - Individually wrapped moist cleansing wipes
 - 2 pairs of disposable gloves
 - Information about the specific medical needs of pupil's parents/carers' contact details

When transporting pupils using a minibus or other large vehicles, the alternative provision will make sure the vehicle is equipped with a clearly marked first aid box containing, at minimum:

- 10 antiseptic wipes, foil packed
- 1 conforming disposable bandage (not less than 7.5cm wide)
- 2 triangular bandages
- 1 packet of 24 assorted adhesive dressings
- 3 large sterile unmedicated ambulance dressings (not less than 15cm × 20 cm)
- 2 sterile eye pads, with attachments
- 12 assorted safety pins
- 1 pair of rustproof blunt-ended scissors

Risk assessments will be completed by the Head of Provision prior to any educational visit that necessitates taking pupils off the premises.

There will always be at least one first aider on any trips and visits off site.

06 FIRST AID AND EQUIPMENT

All registered settings must provide accommodation for the short-term care of sick and injured students, staff, and visitors, which includes a washing facility, bed and is near to a toilet facility.

The accommodation must be readily available for use at all times and may be used for other purposes apart from teaching.

First aid boxes will be located in conveniently accessible positions in workplaces and these locations will be clearly marked. First aid kits are stored: In the Kitchen via room 1 on the worktop at the Dunkirk Primary School Site.

All first aid boxes will be stocked in accordance with the outcomes of the first aid assessment. Where no significant risks or other factors are revealed by the first aid assessment, boxes must contain a minimum stock of the items below and checked by an appointed person each month:

A typical first aid kit in our alternative provision will include the following:

- A leaflet giving general advice on first aid
- 6 x Medium First Aid Dressings
- 2 x Large First Aid Dressings
- 2 x Eye Pad with Bandage
- 4 x Triangular Bandages
- 10 x Non Alcohol Wipes
- 20 x Assorted Waterproof Plasters
- 3 x Pair of Medium Vinyl Gloves
- 6 x Safety Pins
- 1 x First Aid Guidance Leaflet
- 5 x Low Adherent Dressing Pads 5 × 5cm
- 1 x Revive Aid Personal Resuscitator
- 1 x Sterile Swabs 5 × 5cm (Pack of 5)
- 1 x Pair of Scissors
- 1 x Microporous Tape 2.5cm x 5m

A fire blanket is also available on the wall in the Kitchen area of the Dunkirk Primary School site.

No medication is kept in first aid kits.

First aid kits are stored: In the Kitchen via room 1 on the worktop at the Dunkirk Primary School Site.

07 RECORD-KEEPING AND REPORTING

07.1 FIRST AID AND ACCIDENT RECORD BOOK

- An accident form will be completed by the first aider on the same day or as soon as possible after an incident resulting in an injury occurs
- As much detail as possible should be supplied when reporting an accident, including all of the information detailed in the accident form (appendix 2)
- For accidents involving students, a copy of the accident report form will also be added to the student's educational record by the Head of Provision
- Records held in the first aid and accident book will be retained by the alternative provision 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

07.2 REPORTING TO THE HEALTH AND SAFETY EXECUTIVE - STAFF

The Head of Provision will keep a record of any accident that results in a reportable injury, disease, or dangerous occurrence as defined in the RIDDOR 2013 legislation (regulations 4, 5, 6 and 7).

The Head of Provision will report these to the HSE as soon as is reasonably practicable and in any event within 10 days of the incident – except where indicated below. Fatal and major injuries and dangerous occurrences will be reported without delay (i.e. by telephone) and followed up in writing within 10 days.

Staff reportable injuries, diseases, or dangerous occurrences include:

- Death

- Specified injuries, which are:
 - 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:
 - Covers more than 10% of the whole body's total surface area; or
 - Causes 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
 - Work-related injuries that lead to an employee being away from work or unable to perform their normal work duties for more than 7 consecutive days (not including the day of the incident). In this case, the Head of Provision will report these to the HSE as soon as reasonably practicable and in any event within 15 days of the accident.

Occupational diseases where a doctor has made a written diagnosis that the disease is linked to occupational exposure. These include:

- Carpal tunnel syndrome
- Severe cramp of the hand or forearm
- Occupational dermatitis, e.g., from exposure to strong acids or alkalis, including domestic bleach
- Hand-arm vibration syndrome
- Occupational asthma, e.g., from wood dust
- Tendonitis or tenosynovitis of the hand or forearm
- Any occupational cancer
- Any disease attributed to an occupational exposure to a biological agent

Dangerous occurrences are certain, specified 'near-miss' events (incidents with the potential to cause harm). Not all such events require reporting. There are 27 categories of dangerous occurrences that are relevant to most workplaces, examples include:

- The collapse, overturning, or failure of load-bearing parts of lifts and lifting equipment
- The accidental release of a biological agent likely to cause severe human illness
- An electrical short circuit or overload causing a fire or explosion
- Explosions or fires causing work to be stopped for more than 24 hours

07.3 REPORTING TO THE HEALTH AND SAFETY EXECUTIVE – STUDENTS AND VISITORS

This section refers to students and other people who are on site but are not at work (e.g., visitors).

Reportable injuries, diseases, or dangerous occurrences include:

- Death of a person that arose from, or was in connection with, a work activity*

- An injury that arose from, or was in connection with, a work activity* and where the person is taken directly from the scene of the accident to hospital for treatment

*An accident 'arises out of' or is 'connected with a work activity' if it was caused by:

- A failure in the way a work activity was organised (e.g., inadequate supervision of a field trip)
- The way equipment or substances were used (e.g., lifts, experiments)
- The condition of the premises (e.g., poorly maintained or slippery floors)

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

[How to make a RIDDOR report, HSE](http://www.hse.gov.uk/riddor/report.htm) - <http://www.hse.gov.uk/riddor/report.htm>

07.4 NOTIFYING PARENTS/CARERS AND NEXT OF KIN

If emergency services are called, arrangements must be made to contact parents/carers or next of kin immediately or as soon as reasonably practicable.

07.5 REPORTING TO OFSTED AND CHILD PROTECTION AGENCIES

A member of Freedom Foundation Leadership Team will notify Ofsted and any relevant child protection agency of any serious accident, illness or injury to, or death of, a learner whilst in the care of the company. This will happen as soon as is reasonably practicable, and no later than 14 days after the incident.

08 INTIMATE CARE

Intimate care refers to any care that involves toileting, washing, changing, touching, or carrying out an invasive procedure to children's intimate personal areas.

It is the responsibility of the Home-School to inform Freedom Foundation AP if/when learners have an intimate care plan and to share this information with us. If learners require additional assistance with intimate care, the Home-School will provide support staff who can fulfil these requirements.

Freedom Foundation AP will provide feedback to the Home-School and parents/carers about whether any intimate care has taken place and what level of support has taken place.

09 MANAGEMENT OF MEDICAL CONDITIONS

Freedom Foundation AP recognises and understands the importance of supporting learners with medical needs; we do not discriminate against those with medical needs. It is the responsibility of the Home-School to create and manage learner's Individual Healthcare Plans and to share these documents with Freedom Foundation AP; this ensures that we can provide the appropriate support to learner's who require medical assistance / support / medication.

If / when AP staff require additional medical training to be able to support learners with specific medical conditions (e.g., asthma, epilepsy, Cystic Fibrosis) the training will be provided to them and logged in the First Aid Training Log (Appendix 3).

Please see the Medical Policy which explains the storage of medication, the application of medication, record keeping and who is responsible to manage medication.

10 TRAINING

All staff will undertake first aid training.

All first aiders must have completed a training course and must hold a valid certificate of competence to show this. The AP will keep a register of all trained first aiders, what training they have received and when this is valid until.

The AP will arrange for first aiders to retrain before their first aid certificates expire. In cases where a certificate expires, the alternative provision will arrange for staff to retake the full first aid course before being reinstated as a first aider.

11 MONITORING ARRANGEMENTS

All new members of staff will be made aware of the policy and procedures during the formal staff induction process.

Updated and amended procedures will be disseminated and reinforced in training sessions, team meetings, and via email communications.

12 LINKS WITH OTHER POLICIES

This policy links to the following documents:

- Health and safety policy
- Medical policy
- Medical Emergency policy

13 REVIEW

We keep this policy under regular review

Review of this Policy: April 2025

Next Review Date: April 2026

Reviewed By: Laura Grant

Position/Role: Director of Freedom Foundation

APPENDIX 1: LIST OF APPOINTED PERSONS FOR FIRST AID AND/OR TRAINED FIRST AIDERS (CORE AND FACILITATORS)

STAFF MEMBER'S NAME	ROLE	CONTACT DETAILS

APPENDIX 2: ACCIDENT REPORT FORM

Details of individual who had the accident			
Name of injured person:			
Role / class:			
About you, the person filling in this record			
Name:			
Staff role:			
Incident details			
Date and time of incident:			
Location of incident:			
<u>Describe in detail what happened, how it happened, and what injuries the person incurred:</u>			
Action taken			
<u>Describe the steps taken in response to the incident; including any first aid treatment and what happened to the injured person immediately afterwards:</u>			
Follow-up action required			
Outline what steps the alternative provision will take to check on the injured individual, and what it will do to reduce the risk of the incident happening again:			
Signature:		Date:	
For the employee only			
By ticking this box, I give my consent to my employer to disclose my personal information and details of the accident which appear on this form to safety representatives and representatives of employee safety for them to carry out the health and safety functions given to them by law.			
Signature:		Date:	
For the employer only			
Complete this box if the accident is reportable under the Reporting of Injuries, Diseases, and Dangerous Occurrences Regulations (RIDDOR). To report, go to https://www.hse.gov.uk/riddor/			
How was it reported?			

Date reported:		Signature:	
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APPENDIX 3: FIRST AID TRAINING LOG

Name / Type of Training	Who Attended (Individual Staff Members or Groups)	Date Attended	Date for Training to be Renewed (where applicable)
E.g. First Aid			
E.g. Safeguarding			
E.g. Anaphylaxis			

APPENDIX 4: TEMPLATE INTIMATE CARE PLAN

PARENTS/CARERS	
Name of child	
Type of intimate care needed	
How often care will be given?	
What training staff will be given?	
Where care will take place?	
What resources and equipment will be used, and who will provide them?	
How procedures will differ if taking place on a trip or outing?	
Name of senior member of staff responsible for ensuring care is carried out according to the intimate care plan	
Name of parent/carer	
Relationship to child	
Signature of parent/carer	
Date	
CHILD	
How many members of staff would you like to help you?	
Do you mind having a chat when you are being changed or washed?	
Signature of child	
Date	

APPENDIX 5: TEMPLATE PARENT/CARER CONSENT FORM

PERMISSION FOR AP TO PROVIDE INTIMATE CARE	
Name of child	
Date of birth	
Name of parent/carer	
Address	
I give permission for the AP to provide appropriate intimate care to my child (e.g., changing soiled clothing, washing, and toileting)	<input type="checkbox"/>
I will advise the school of anything that may affect my child's personal care (e.g., if medication changes or if my child has an infection)	<input type="checkbox"/>
I understand the procedures that will be carried out and will contact the AP immediately if I have any concerns	<input type="checkbox"/>
<p>I do not give consent for my child to be given intimate care (e.g., to be washed and changed if they have a toileting accident).</p> <p>Instead, the school will contact me, or my emergency contact and I will organise for my child to be given intimate care (e.g., be washed and changed).</p> <p>I understand that if the school cannot reach me or my emergency contact, if my child needs urgent intimate care, staff will need to provide this for my child, following the school's intimate care policy, to make them comfortable and remove barriers to learning.</p>	<input type="checkbox"/>
Parent/carer signature	
Name of parent/carer	
Relationship to child	
Date	