



COLESHILL *C of E*
PRIMARY SCHOOL
AND **NURSERY**

COLESHILL C of E Primary School

First Aid Policy

With God's love, we grow and flourish together

Policy developed by: Mrs Becky Holt
Committee: Local Academy Board
Date of adoption: March 2026
Chair of Governors signature: Rev Barrie Scott
Frequency of reviews: Every three years

Date of review	Chair of Governors

Our Vision

Our school's purpose is built upon the fundamental principle that every child matters to God and has the right to be treated with dignity, learn about their innate worth and understand their unique value and place in God's world. We provide opportunities for all children to experience a community living out Christian values and making choices which lead to hope, aspiration and fulfilment.

We believe our school should be a place where we all want to be, a place where children feel safe and secure, where God's love is reflected in our care for every individual. We nurture our community, ensuring children flourish physically, mentally, emotionally and spiritual thereby achieving their potential. As a church school we find inspiration in the life and teachings of Jesus Christ, celebrating the diversity around and amongst us and applying our understanding of tolerance and respect.

Our curriculum is about bringing engagement, fun and enthusiasm to learning. We aspire to provide outstanding educational experiences which will inspire children to develop into lifelong independent learners. Our high expectations develop character and pride in our identity as Coleshill Church of England Primary School, preparing every child for their future.

Our Values

Our policies are based on Christian values. Pupils will be taught and encouraged to lead by example guided by the values of honesty, respect, kindness, perseverance, self-control and forgiveness.



Honesty

With God's love, we are truthful so we can be trusted and grow in wisdom.

"Speaking the truth in love" (Ephesians 4: 15)



Kindness

With God's love, our words and actions are thoughtful and friendly, so everyone in our community feels welcome.

"Clothe yourselves with kindness, humility, gentleness and patience" (Colossians 3: 12)



Respect

With God's love, we care for others, ourselves and our school, so we listen and use good manners.

"In humility, value others above yourselves" (Philippians 2: 3)



Perseverance

With God's love, we have the highest expectations of ourselves, so we keep trying even when we find things hard.

"Perseverance (produces) character and character, hope" (Romans 5: 4)



Self-Control

With God's love, we stop and think about our feelings and actions, so we keep ourselves and others learning and safe.

"The Holy Spirit produces this kind of fruit in our lives: love, joy, peace, patience, kindness, goodness, faithfulness, gentleness and self-control" (Galatians 5: 22)



Forgiveness

With God's love, we choose to forgive and let things go, accepting when someone is sorry so we can build bridges and form trusting relationships

"Forgive us our sins as we forgive those who sin against us" (Luke 11:4)

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1. Aims

The aims of our first aid policy are to:

- Ensure the health and safety of all staff, pupils 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

2. Legislation and guidance

This policy is based on the [statutory framework for the Early Years Foundation Stage](#), advice from the Department for Education (DfE) on [first aid in schools](#) and [health and safety in schools](#), 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

- [The 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.

3. Roles and responsibilities

As our school has Early Years Foundation Stage (EYFS) provision, we must have at least one person who has a current paediatric first aide (PFA) certificate on the premises at all times when children are present, and who must accompany children on outings.

In school, the number of trained first aiders we need is based on our assessment of:

- The number of employees and the nature of their work
- Any specific needs of pupils and staff
- Any specific hazards or risks on site
- The layout and location of the school

From our First Aid Needs Assessment in September 2025, our minimum requirements are:

- 12 first aiders trained in Pediatric First Aid, providing coverage across the different zones of school.
- 1 first aider trained in Emergency First Aid at Work.

The majority of support staff are PFA trained to ensure we can care for employees in case they are injured at work as well as provide first aid for children, with sufficient cover for absences and trips out of school.

3.1 Appointed person and first aiders

The school's appointed person is Becky Holt (Office Manager). They are responsible for:

- Taking charge when someone is injured or becomes ill
- Making sure there is an adequate supply of medical materials in first aid kits, and replenishing the contents of these kits
- Making sure that an ambulance or other professional medical help is summoned when appropriate

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
- Keeping their contact details up to date

Our school's appointed person and first aiders are listed in Appendix 1. Their names will also be displayed around the school site.

3.2 The governing board

The governing board has ultimate responsibility for health and safety matters in the school, but 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:

- Making sure that an appropriate number of trained first aid personnel are present in the school at all times
- Making sure that first aiders have an appropriate qualification, keep training up to date and remain competent to perform their role
- Making sure all staff are aware of first aid procedures
- Making sure appropriate risk assessments are completed and appropriate measures are put in place
- Undertaking, or making sure that managers undertake, risk assessments, as appropriate, and that appropriate measures are put in place
- Making sure that adequate space is available for catering to the medical needs of pupils
- Reporting specified incidents to the HSE when necessary (see section 6)

3.4 Staff

School staff are responsible for:

- Making sure they follow first aid procedures
- Making sure they know who the first aiders in school are
- Contributing to accident reports for all incidents they witness
- Informing the headteacher or their manager of any specific health conditions or first aid needs

4. First aid principles and procedures

Accidents happen - as children learn to handle risks for themselves they are likely to have bumps, bruises and grazes as they play and explore. Most of these incidents can be dealt with by a few kind words and a cold compress.

Any child who is hurt is dealt with in a calm and caring way - children are treated appropriately and comforted in the moment, as a parent would treat them. There may be a difference in how this looks between older children and younger children and how distressed the child presents, e.g. an older child who isn't in pain may be asked to go and wash their hands/fetch their own cold compress before or after being checked over.

Where a child has been checked and no injury/mark has been observed and the child is well, a first aid form is not necessarily completed. Staff should ask advice at the office if required. Staff are trusted to use their best judgement when dealing with first aid incidents in the moment, and advised to err on the side of caution.

In the case of a more serious injury, the Office Manager will escalate to an incident/accident investigation report where necessary (see Appendix X).

Parents are always informed via phone if an injury is significant or visible, e.g. a black eye, swollen lip, burn, deep cut, or if the child needs collecting for further treatment.

If a child has bumped their head in a way that could be classified as a head injury, staff follow the Bumped Head Protocol (See Appendix 2), which includes giving the child a yellow wristband and making a phone call home so parents/carers are aware to look out for signs of more serious head injury developing over the next 24 hours. However, not all head bumps are head injuries - not all bumps to the head require a wristband and a call home.

We aim to get verbal consent before giving first aid where reasonably practicable, e.g. first aiders will ask children if they can look/touch an injury.

Parents/carers are asked to give consent via Arbor when pupils join the school: "In case of accident or illness I give permission for school staff to seek emergency medical treatment or advice if I, or my representative, cannot be contacted."

In an emergency situation where a child is unconscious or choking, consent can be implied.

If there are any issues with consent, e.g. a child will not allow a first aider to help, we must balance right to refuse consent whilst also upholding our duty of care. We will call the parent/carer to explain the situation and call emergency services as appropriate.

4.1 In-school 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
- 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
- If the injured person (or their parents/carers, in the case of pupils) has not provided their consent to the school to receive first aid, the first aider will act in accordance with the alternative arrangements (for example, contacting a medical professional to deliver the treatment)
- 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 in school, the office staff will contact parents/carers and ask them to collect their child. On the parents/carers' arrival, the first aider will recommend next steps to them
- If emergency services are called, the office staff will contact parents/carers immediately
- The first aider will complete an accident report form on the same day or as soon as is reasonably practicable after an incident resulting in an injury

There will be at least one person who has a current paediatric first aid (PFA) certificate on the premises at all times.

4.2 Off-site procedures

When taking pupils off the school premises, staff will make sure that they always have the following:

- A school mobile phone
- A portable first aid kit including, 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 pupils
- Parents/carers' contact details

When transporting pupils using a minibus or other large vehicle, the school 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 teacher organising the trip using the Evolve portal prior to any educational visit that necessitates taking pupils off school premises.

The procedure in 4.1 will be followed as closely as possible for any off-site accidents (though whether the parents/carers can collect their child will depend on the location and duration of the trip).

There will always be at least 1 first aider with a current paediatric first aid (PFA) certificate on school trips and visits, as required by the statutory framework for the Early Years Foundation Stage (EYFS).

5. First aid equipment

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

- A leaflet giving general advice on first aid
- 20 individually wrapped sterile adhesive dressings (assorted sizes)
- 2 sterile eye pads

- 2 individually wrapped triangular bandages (preferably sterile)
- 6 safety pins
- 6 medium-sized individually wrapped sterile unmedicated wound dressings
- 2 large sterile individually wrapped unmedicated wound dressings
- 3 pairs of disposable gloves

No medication is kept in first aid kits.

First aid kits are stored in the following locations:

- By the main office
- In the Nursery kitchen
- In the Reception classroom
- In Kids' Club

See section 4.2 for first aid equipment off the school site.

6. Record-keeping and reporting

6.1 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. This may either be a paper form in an accident book or an electronic form on the Evolve Accident Book system.
- As much detail as possible will be supplied when reporting an accident.
- In the case of a more serious injury, the Office Manager will escalate to an incident/accident investigation report where necessary (see Appendix 3).
- For accidents involving pupils, a copy of any incident report form will also be added to the pupil's educational record by the office staff.
- Records held in the first aid and accident book 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 Office Manager 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 Office Manager 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.

School staff: reportable injuries, diseases or dangerous occurrences

These 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 office manager 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
- Near-miss events that do not result in an injury, but could have done. Examples of near-miss events relevant to schools include, but are not limited to:
 - 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

Pupils and other people who are not at work (e.g. visitors): reportable injuries, diseases or dangerous occurrences

These 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, machinery, experiments etc); and/or
- 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>

6.3 Notifying parents/carers (early years only)

Only early years providers are required to notify parents/carers of an accident or injury to their child. However, our practice is to contact the parents/carers of any child by phone where the injury is significant or visible, e.g. a black eye, swollen lip, burn.

In this case office staff will inform parents/carers of the accident or injury sustained by a pupil, and any first aid treatment given, on the same day, or as soon as reasonably practicable. Parents/carers will also be informed if emergency services are called.

6.4 Reporting to Ofsted and child protection agencies (registered early years providers ONLY)

Since the Unique Reference Number (URN) of our early years provision is registered under the same URN as the school, we are not required to report incidents to Ofsted.

The Office Manager will notify Warwickshire Safeguarding Children Partnership of any serious accident or injury to, or the death of, a pupil while in the school's care.

7. Training

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

All first aiders must have completed an appropriate training course with a competent first aid training provider, 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 when this is valid until (see Appendix 1).

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

At all times, at least one staff member will have a current paediatric first aid (PFA) certificate that meets the requirements set out in the Early Years Foundation Stage statutory framework. The PFA certificate will be renewed every 3 years.

8. Monitoring arrangements

This policy will be monitored by the Office Manager and reviewed every three years.

At every review, the policy will be approved by the full governing board.

The first aid provision will be reviewed by the appointment person at least annually.

9. Links with other policies

This first aid policy is linked to the:

- Health and safety policy
- Risk assessment policy
- Policy on supporting pupils with medical conditions

Appendix 2: Bumped Head Protocol

A minor head injury can be a frequent occurrence in the school playground and on the sports field. Fortunately, the majority of head injuries are mild and do not lead to complications or require hospital admission. However, a small number of children do suffer from a severe injury to the brain, and concussion, (in particular repeated concussions), can be very serious.

Complications such as swelling, bruising or bleeding can happen inside the skull or inside the brain up to 24 hours after the bump to the head. The presence or absence of a lump at the site of the bump is not an indication of the severity of the head injury.

If a child has a bump to their head at school, they will be given first aid which will include a cold compress, and the parent/carer will be contacted by phone.

The child will be given a yellow wristband to wear to alert school staff and the parent/carer to the fact the child has had a bump to the head.

The child should avoid any activities such as PE which could lead to another bump.

If any of the following symptoms are noticed over the following 24 hours, further medical advice should be sought urgently, either by calling 999 for an ambulance or going directly to A&E:

- Unconsciousness or lack of consciousness (for example problems keeping eyes open or increasing sleepiness).
- Increasingly severe headache that won't go away.
- Problems with understanding, speaking, reading or writing, or any problems with memory.
- A change in behaviour, like being more irritable.
- Numbness or loss of feeling in any part of the body.
- Problems with balance or walking, or general weakness or clumsiness.
- Dizziness.
- Any changes in eyesight – blurred or double vision.
- Any change to the appearance of the pupils – one pupil larger than the other.
- A black eye with no associated damage around the eye.
- Any vomiting or sickness.
- Any clear fluid running from the ears or nose.
- Bleeding from the ears.
- New deafness.
- Any convulsions or having a fit.

Please visit the [NHS website](#) for more information.

Appendix 3: Accident/Incident investigation report



Accident/incident investigation report

<p>Accident – <i>an unplanned, unwanted event which leads to injury, damage or loss.</i> Including work related ill health (<i>diseases or medical conditions caused by a person’s work</i>), violent incident, road traffic incident.</p>	<p>Complete an “Accident/incident investigation report”</p>
<p>Near miss – <i>an unplanned, unwanted event that had the potential to lead to injury, damage or loss.</i> Including a dangerous occurrence (<i>a specified event that has to be reported to the relevant authority by law, e.g. asbestos disturbance</i>), outbreak of fire, environmental incident, security incident, vandalism, property/equipment damage.</p>	<p>Complete a “Near miss/safety suggestion form”</p>
<p>Personal details of injured person:</p>	
<p>Name:</p>	
<p>Pupil+class/Staff+job title/Work experience/Volunteer/Agency staff/ Visitor/Member of public/Other:</p>	
<p>Male/Female:</p>	
<p>Date of birth:</p>	
<p>Age:</p>	
<p>Incident details:</p>	
<p>Date of incident:</p>	
<p>Time of incident:</p>	
<p>Location of incident:</p>	
<p>Describe the circumstances of what exactly happened: Provide as much information as possible, including relevant factors such as:</p> <ul style="list-style-type: none"> • Internal/external floor conditions • Weather • Other people involved • Use of equipment/chemicals/machinery • Doing something out of the ordinary or something not trained to do • Damage 	
<p>Witnesses: Please take their initial statements as soon as possible in a separate document.</p>	
<p>Supporting information:</p>	

<p>Describe the immediate actions taken following the incident: Provide as much information as possible, including relevant factors such as:</p> <ul style="list-style-type: none"> • Who was notified • Who made the area safe 	
<p>Details of any injury:</p>	
<p>Injury outcome: No injury/Fatal injury/Sent or taken home/Sent or taken to medical practitioner/Sent or taken to hospital/Prevented from working/Returned to normal activity</p>	
<p>Was the injured person taken directly to hospital for treatment? Diagnostic tests and examinations do not constitute treatment.</p>	
<p>If yes, what treatment was given at the hospital?</p>	
<p>Reportable under RIDDOR? * Please visit https://www.hse.gov.uk/riddor/ for more information, including reportable incidents relating to adults at school.</p>	
<p>Absence from school:</p>	
<p>Was there anything defective in the workplace that may have contributed to the accident? Provide as much information as possible, including relevant factors such as:</p> <ul style="list-style-type: none"> • Lack of supervision • Faulty equipment • Improper use of equipment • Condition of the premises 	
<p>Initial findings and action to prevent recurrence:</p>	
<p>Investigation findings:</p>	
<p>Immediate causes - that lead directly to the accident: Unsafe acts <i>An activity conducted in a manner that may threaten health and safety.</i> Unsafe conditions <i>Unsatisfactory physical conditions existing immediately before the accident and significant in initiating the event.</i></p>	

Root causes - the underlying reasons why the immediate cause existed: Failure to adequately supervise Failure to provide appropriate PPE Failure to provide adequate training Lack of maintenance Inadequate checking or inspection Failure to carry out proper risk assessment	
Action to prevent recurrence:	
Name of person reporting:	
Signature:	
Job title:	
Date:	

*** Reporting under RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations)**

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, e.g. 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.

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, due to a failure of systems of building conditions. This includes incidents arising because:

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

Record keeping and data retention

The General Data Protection Regulation (GDPR) requires that all schools do not keep records for 'longer than necessary,' though legislation requires specific retention periods for certain records as detailed here.

Accident reports and investigation records for 'major' incidents involving a pupil must be kept until the child reaches the age of 21. These should be therefore filed in the child's pupil record, to be transferred when the pupil moves school.

HSE guidance says first aid records should be kept in accordance with Data Protection law (i.e. kept no longer than necessary). Minor first aid slips relating to pupils can therefore be destroyed after 3 years.

Employers with 10 or more employees must keep readily accessible accident records, either in written or electronic form ("accident book"). These records must be kept for a minimum of 3 years.