

TKS First Aid and Accident and Incident Policy and Procedure



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NB. For further information regarding pupils with existing medical conditions, also refer to the *TKS Supporting pupils with Medical Conditions and Health Needs Policy*

1. Organisation

Health and Safety Responsibilities:

Principal	Mrs Lynne Weber
Head of Secondary Department	Mr Giles Beck
Head of Primary Department	Mrs Kate McKenzie
Head of Early Years	Mrs Adrienne Blakey
Health & Safety Coordinator	Mr Jonathan Smith / Mrs Kate McKenzie
H&S Trustee/Governance	Mr Peter Allen
First Aiders	Comprehensive list appears below and is also displayed outside the staff room

Contacts

Windrush Health Centre	01993 702911
Minor Injuries Unit in Witney Community Hospital, (opens at 10am)	01993 209400

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Qualified First Aiders:



Most of our full and part time staff are first aid trained, so as a school we are well equipped to deal with any accidents that may happen during school hours.

Name		Qualification	Date of expiry
Giles	Beck	Emergency Paediatric First Aid	27/6/25
Tammi	Beegoo	Emergency Paediatric First Aid	27/6/25
Ruth	Cadywould	Emergency Paediatric First Aid	28/02/27
Theresa	Clark	Emergency Paediatric First Aid	27/6/25
Olivia	Enticknap	Emergency Paediatric First Aid	28/02/27
Rebecca	Gray	Emergency Paediatric First Aid	27/6/25
Alastair	Hobbs	Emergency Paediatric First Aid	28/02/27
Alison	Hoxhallari	Emergency Paediatric First Aid	27/6/25
Jenny	Kane	Emergency Paediatric First Aid	27/6/25
Kim	Marshall	Emergency Paediatric First Aid	28/02/27
Kate	McKenzie	First Aid at Work (3-day course)	24/11/27
Julia	Newman	Emergency Paediatric First Aid	27/6/25
Matt	Pearson	Emergency Paediatric First Aid	27/6/25
John	Reeve	Emergency Paediatric First Aid	28/02/27
Amy	Scott	Emergency Paediatric First Aid	28/02/27
Jo	Self	Emergency Paediatric First Aid	28/02/27
Kathryn	Smith	Emergency Paediatric First Aid	27/6/25
Jonathan	Smith	First Aid at Work (3 day course)	25/08/25
Charlotte	Thomas	Emergency Paediatric First Aid	28/02/27
Anna	Woodward	First Aid for Schools	13/06/26
EYFU			
Adrienne	Blakey	Paediatric First Aid Level 3	03/11/26
Sara	Cadywould	Paediatric First Aid	14/9/25
Heather	Cooper	Paediatric Infant and Child First Aid Level 3	03/11/26
Ruth	Pearson	Paediatric First Aid	02/06/25
Rachael	Wagstaffe	Paediatric First Aid	12/06/26
		Forest School First Aid	12/6/26
Rachel	Watson	Paediatric Infant and Child First Aid Level 3	18/04/27
MENTAL HEALTH FIRST AID			
Kate	McKenzie	Mental Health First Aid 1 day course	7/6/27

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Lynn	Moxham	Mental Health First Aid 1 day course	6/11/27
Az	Hobbs	Mental Health First Aid 1 day course	6/11/27

All staff receive annual training on the use of Adrenaline Auto Injector pens (Epipens) and how to treat an asthma attack.

2. First Aid Arrangements:

Records

1. Parents fill in a detailed medical form and give permission for administering creams and Paracetamol on entry of their children to the school and in Early Years for administering Piriton in the case of an allergic reaction.
2. A list of medical details is accessible by the First Aiders, class teachers and Games teachers. These are updated regularly on SchoolBase.

Action for all Accidents

1. All accidents must be referred to a School First Aider.
2. Accidents are reported in the Accident Book on SchoolBase™ by the staff member who first dealt with the casualty. If treatment is administered by a first- aider, this should be recorded in the 'Treatments' menu on SchoolBase and a notification should be sent to parents.
3. Details are given to class teachers who are responsible for ensuring that parents are notified, the office will normally contact parents. In the event of serious injury, the office will contact parents immediately.
4. More serious accidents are referred to the Minor Injuries Unit in Witney Community Hospital, (opens at 10am), telephone 01993 209400 or directly to the John Radcliffe Hospital, Oxford using the emergency service (999) call centre.
5. If necessary, arrange transport home.
6. In Early Years, parents and/or carers are informed of any accident or injury sustained by the child, and any first aid treatment given, via a first aid form. This form is filled out by the person dealing with the accident, and is signed by the parent/carer at the end of the session, or as soon as reasonably practical afterwards.

Sickness in School

If a pupil is suffering from an illness (eg headache, cold or flu symptoms) this is not a first aid issue, and a decision should be made by the class teachers as to whether the pupil goes home or rests on the bed in the first aid room. The parent is informed through the office, or generally in the case of Early Years, directly with the setting. A pupil suffering from vomiting or diarrhoea must be collected from school and return home as soon as possible.

On-site First Aid Facilities

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- The dedicated First Aid treatment facility is Room 26b within the Windrush building. This contains a bed with blankets, a sink and the major stock of first aid consumables.
- If a toilet is needed (e.g. a sickness incident - repeated diarrhoea and vomiting), the casualty should be transferred to the disabled (staff) toilet, in the Newland building.
- Children in the EY are cared for within the EY classrooms, separated from other children in a quiet area (usually the smaller classroom) until collected by parents/carers. Where necessary, one of the toilets in the EY toilet area will be designated for the child's sole use.
- Additional First Aid kits are located in the kitchens and foyers, laboratory office, staff office and in the cupboard above the sink in Early Years.
- First aiders have personal emergency kits of plasters and dressings.

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Body Fluids

Because of the risk of infection, incidents involving loss of bodily fluids (including, but not limited to blood, vomit, urine, faeces/ diarrhoea) *must* be dealt with using the following procedure:

- The First-Aider must wear protective (vinyl) gloves throughout the response
- All contaminated material (gloves, dressings, swabs etc) must be collected in a yellow Clinical Waste bag.
- Clinical waste bags should be disposed of in a sanitary waste bin in the female toilets. These are emptied regularly by external contractors.
- For significant spillage of fluids onto surfaces (e.g. floors) a Body Fluid Disposal Kit (*HypaClean*) should be used.
- All potentially contaminated surfaces and reusable equipment must be sterilised with appropriate disinfectant solution immediately after the incident if a disposal kit is not used.
- Ongoing incidents involving bodily fluids (e.g. repeated vomiting or diarrhoea) should be managed in one of the disabled (staff) toilets in the Newland Building.

Gloves, Clinical Waste Bags and Body Fluid Disposal Kits are available in Rooms 26b (First Aid Room) and 86 (Disabled Toilet/Shower).

The office should notify cleaning staff and request deep cleaning in any affected areas.

Medicines and Tablets

1. All medication must be clearly marked with the pupil's name. Early Years and Primary pupils must leave all medication with Class Teachers unless previously arranged with the school. Parents must also advise (in writing) the school of the appropriate dosage, using the **Medication in School** form (available from the office, or class teacher in Primary, or separate Early Years form). The Medication in School form must be retained until the full course of treatment is complete. Medicines (including Adrenalin auto-injectors eg Epipens) are stored securely: in Early Years these are kept in a lockable cupboard (except for medicines such as asthma inhalers and Epipens which are kept out of reach of children in the cupboard above the main sink for ease of access); in the Primary school these are kept by teaching staff in a lockable cupboard; in Secondary, medicines are not routinely stored for pupils, with the exception of adrenalin auto-injectors and antihistamines for specific pupils. When requested, medicines that require refrigeration can be stored either in the office fridge or in the fridge in the Early Years setting (which has a child lock) as appropriate. Only medicines in their original packaging may be stored in school. It is the responsibility of the parents to inform the school of any changes to dosage by completing a new form.

Staff will not routinely administer paracetamol or other non-prescribed medicines to pupils unless it is in specific circumstances (eg pain relief following a broken limb) and written instructions have been given by a parent.

All staff medication must be stored securely and out of reach of pupils. If staff are taking medication that may impair their ability to work safely with children they must seek medical advice and inform line managers of the outcome. Staff must not be under the influence of alcohol or any other substance at any time.

2. Asthma pumps and inhalers are kept by the class teacher or First Aider in primary. Secondary pupils must carry their own inhalers, and should ensure they are kept securely in their bags unless in use. Pupils must take their inhalers to PE or Games lessons. In

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secondary, pupils who require an Epipen should carry at least one device, as well as an antihistamine tablet if this forms part of their treatment plan, in addition to the one stored by the school office.

3. Paracetamol and non-prescribed medication

Pupils should not bring in non-prescription medication to school. The school will keep a small quantity of paracetamol (tablets) for Secondary pupils, and a supply of paracetamol in suspension (Calpol) in Early Years. Written consent will be obtained from parents for administering these if needed. A secondary pupil may come to the office for a paracetamol tablet. Early Years staff may administer paracetamol to children following a telephone consultation with parents. Early Years and secondary staff will follow the procedure as outlined in the appendix.

4. In Early Years and Primary, medicines are administered by class teachers, after receiving clear instruction from the parents, and according to instructions given on the 'Medication in School' form. Unless in an emergency, the school does not administer medication to secondary pupils; the exception to this is where a specific request has been made by a parent whose child needs support in taking medication. In Early Years we also keep Piriton in school, and parents are asked to give permission to administer this if needed – ie in the case of an allergic reaction. If a child is unwell and requires non-prescription medicine, we may telephone the parents and ask them to come to collect their child, as they may be too unwell to be in school. Parents are informed when their child has received medication during the school day. In Early Years, details of any medicine administered is written on the administration of medicine form, which is signed by parents/carers at the end of the day. In Primary and Secondary school, any medication given is also recorded on SchoolBase using the 'Treatments' menu, at which point parents must be sent an email outlining the treatment given. We are unable to give any medication containing aspirin to pupils unless it has been prescribed by a doctor.

Staff will not give doses of any medicine that exceeds the recommended dose unless specific instruction has been given by a doctor.

In the case of pupils with Health Care Plans, these are completed alongside parents where there is a particular condition that might involve us providing some sort of medical intervention.

Off-site Matches and School Trips

1. For all off-site activities there must be at least two adults. One of them should have a mobile phone.
2. Those who lead PE or Games sessions on a regular basis, should be first aid trained or in easy access to a first aider.
3. There will always be a paediatric first aider present when EYFS children are on trips.
4. A portable First Aid kit must be taken on all such trips. It will include:-
 - a leaflet giving general advice on first aid – [HSE information is available](#)
 - 6 individually wrapped sterile adhesive dressings
 - 1 large sterile unmedicated dressing

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- 2 triangular bandages individually wrapped and preferably sterile
- 2 safety pins
- individually wrapped moist cleansing wipes
- 2 pairs of disposable gloves

The first aid kit in the minibus should contain

- 10 antiseptic wipes, foil packed
- 1 conforming disposable bandage (not less than 7.5 cm wide)
- 2 triangular bandages
- 1 packet of 24 assorted adhesive dressings
- 3 large sterile unmedicated ambulance dressings (not less than 15.0 cm x 20.0 cm)
- 2 sterile eye pads, with attachments
- 12 assorted safety pins
- 1 pair of rustless blunt-ended scissors

5. Pupils requiring medicines (including Epipens and inhalers) must report to the member of staff at the start of the trip for guidelines in case they should need them. Pupils may not be allowed to go on a school trip if they do not have the correct medicines with them.

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3. Accident and Incident Policy

Objectives

To minimise the risk of accidents to users of The King's School

To safeguard the users of The King's School in the case of accident or a near miss¹

Application

This policy applies to all users of The King's School

**Users = staff, visitors, contractors and personnel of associated activities at
The King's School (unless otherwise specified)**

Policy

The King's School will comply with The Health and Safety (First-Aid) Regulations 1981 and RIDDOR regulations 1995. Where unknowingly The King's School is not complying, the appropriate amendments to policy/procedure/practice will be made

- Appropriate staff are trained in First Aid and an up to date list is kept in the office, as well as on the information noticeboard next to the Staff Room. Copies of first aid certificates for staff in Early Years are displayed in the Early Years foyer area.
- Good housekeeping will be adhered to in order to prevent accidents or injury from striking objects.
- First Aid boxes are kept in appropriate places within the school. The locations of the First Aid boxes are listed in the Accident and Incident Procedure. A Travel First Aid kit is taken on any off-site activity.
- Where applicable, accident and incidents will be reported according to RIDDOR 1995 in the event of:
 - Death or major injury
 - A member of the public being killed or taken to hospital
 - An employee being absent from work over three days as a result of injury
 - Disease (see appendix for details)
 - Dangerous occurrence
- Risk assessments are undertaken for every new activity. Risk assessments are reviewed annually and updated where appropriate.
- An Accident and Incident report are reported to the Site Manager, the Health and Safety Governor and the Principal three times a year. The Site Manager is responsible for forwarding this to the Estates Committee.
- 'Near misses' (non-casualty incidents/NCI) are recorded as potential first aid incidents in the first aid 'book' on SchoolBase™.
- All significant Health and Safety incidents are handled using the Incident Management Plan

¹ A near miss would be defined as something that could have resulted in accident or injury – i.e. falling objects, protruding objects etc.

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Responsibilities:

- All members of The King's School community will comply with the Accident and Incident Policy
The Trustee for Health and Safety is responsible for the occupational health of Oxfordshire Community Churches employees and for investigating work-related health and safety issues
- The Health and Safety Officers are responsible for the following:
 - Investigating accidents, incidents and related issues
 - Ensuring that all users of The King's School are aware of the Accident and Incident Procedures
 - Ensuring that risk assessments are kept up to date
 - Ensuring that First Aid cover is adequate for the event and First Aid boxes are stocked and available for use (direct responsibility of First Aider)
 - Monitoring and auditing the Accident and Incident Policy
 - Reporting accidents/incidents where appropriate to the Health and Safety Executive under the RIDDOR Regulations 1995
- Staff of The King's School are responsible for correcting and/or reporting any potential accident and incident hazards that they identify to the Site Manager or Principal.

Contractors working at The King's School are made aware of the Accident and Incident Policy.

ALL accidents and incidents are to be recorded in the School Accident Book (kept on SchoolBase) and in Early Years the **accident** procedure should be followed as outlined below.

SERIOUS injuries (those that require referral to hospital for treatment) are also to be recorded in the same way.

ALL First Aid treatment is to be recorded in the Accident Book on School Base (where it relates to any incident in school, however minor)

Early Years Accident Procedure

In the event of an accident indoors or outdoors the following steps should be taken:

- i. Make sure the remaining children are supervised within the correct ratios and that the injured child is given appropriate care and medical attention by a trained first aider.
- ii. Make sure details of the accident are recorded on an accident form (see First Aid file), including the date and time. If the accident was not witnessed by the first aider, try to get as clear a picture of what happened from the child or any other witnesses (eg other adults or children playing nearby).
- iii. Inform the child's key person if they were not the person witnessing and dealing with the incident.

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- iv. Make sure parents/carers are informed, either at the end of the session for less serious accidents or immediately by phone for serious accidents, and sign the accident form as soon as possible after the event. If the parent/carer does not pick up the child at the end of the session, the carer picking the child up can be informed; the parent can also be phoned at the end of the session, depending on the severity of the accident. All forms are to be kept in First Aid file or the relevant administration file for the current year's children and should be logged on to Schoolbase.
- v. Accidents involving staff should also be recorded on SchoolBase in the accident book.
- vi. Splinters will only be removed if protruding and easily removable with single use tweezers. Parents to be informed for monitoring purposes using the accident form.

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4. Accident and Incident Procedures

The procedure set out herewith is to be followed in the event of any of the incidents listed below:

- ★ Accident requiring First Aid treatment
- ★ Accident requiring Hospital treatment
- ★ Altercation between pupils leading to injury
- ★ Anyone receiving a blow /injury to the head.

Qualified First Aiders are listed in the main body of the policy

All requests for ambulance should where possible go through the School Office.

Location of First Aid Boxes

Secondary Department

Windrush foyer
First aid room
Reception office
Individual First aiders
Supply of 'blue' plasters in Kitchen

Primary Department

Newland Foyer
Room 26
Secondary boxes are kept in the Kitchen.
Each classroom has a supply of basic equipment to deal with minor injuries

Early Years

Cupboard above sink in main classroom

A portable kit, available from the office, is taken on all off-site activities

Action for Accidents involving Injury

1. All accidents involving injury must be referred to the nearest qualified First Aider
The First Aider will decide and lead on appropriate treatment and further action.
2. If the first aider requires an ambulance/further medical help, action is taken through the School Office preferably using the school mobile phone. If the ambulance is no longer required, the school office should be instructed to cancel the call.
3. If the child needs to go to hospital in an ambulance then either a parent must go with the child or permission must be sought from the parent for an alternative adult to accompany them.
4. If the accident requires hospital treatment but is not an emergency then the parents should be contacted to take the patient to hospital by car rather than calling an ambulance.

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5. The nearest hospital facilities to the school for accidents and emergencies are:
 - A Minor Injuries Unit located at the Witney Community Hospital. The unit opens at 10.00am and can be contacted on 01993 209400
 - A full Accident and Emergency service at the John Radcliffe Hospital in Oxford.
6. Following treatment, the First Aider ensures that parents are notified and as appropriate Tutors and Class Teachers are informed.
Parents are contacted by telephone, or for minor injuries (eg small bruises and minor grazes) by email through SchoolBase.
7. **All** head injuries should be reported to parents by telephone, regardless of the severity. In the event of a head injury, parents of the child must always be given the fullest account of the injury to enable them to make a decision as to whether to come to collect their child. If a child exhibits any symptoms of concussion they must be collected by parents or, in a significant case, an ambulance should be called.
All casualties with head injuries must receive a letter outlining symptoms of concussion as well as a risk band giving date and time of the injury.
8. The First Aider enters the details of the accident into the Accident Book on SchoolBase, including a record of treatments given by them. This information should then be emailed to parents. In Early Years, the information is recorded on the form signed by parents/carers at the end of the session.
9. Injuries which required referral to hospital for treatment are also recorded in the accident record.
10. The First Aider who first deals with the incident is to check the above actions have all been completed, delegating this to the Health and Safety Officer if necessary.
11. Serious injuries and accidents must be reported to the Health and Safety Officer as they may need to be reported to RIDDOR.
12. For incidents involving children in Early Years, staff must make sure parents/carers are informed, either verbally at the end of the session for less serious incidents or immediately by phone for serious incidents, and note this when recording the incident on Schoolbase. If the parent does not pick up the child, talk to the parents at the next session the child attends with their parents or phone the parent at the end of the session, depending on the severity of the incident. Conversations with parents/carers should not reveal other children involved specifically by name. If the incident is one where a child has hurt or injured an adult in the setting, this should also be recorded on Schoolbase in Secure Notes and parents must be informed.
13. If a child is in danger of causing personal injury to themselves or another child or adult, or likely to damage property, physical intervention (ie using reasonable force) is permitted.
Records must be kept of any occasion where physical intervention is used (on Schoolbase) and parents and carers must be informed on the same day or as soon as reasonably possible.

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Off-Site Activities

For all off-site activities, the number of adults present is to follow that set out in the Educational Visits Policy. EYFS children will always be accompanied by a member of staff trained in paediatric first aid.

All adults involved in PE/Games receive instruction from the First Aider on the procedures to follow in the case of injury.

A portable First Aid kit is taken on all off-site trips. In the event of an accident off-site, the Action for Accidents Involving Injury procedure noted above is followed, by the First Aider.

NOTE: -

1. Accidents where no injury was involved, and any other incident that might in slightly different circumstances have caused an injury ("near misses") are also entered into the Accident Book on SchoolBase as 'No Casualty Incidents' or 'NCI'
2. Where necessary, accidents, incidents and near misses will be investigated by the Principal or Health and Safety Officer and where appropriate, reported to the Health and Safety Executive.

5. Pupil Illness and Medication

Pupil Records

1. Parents fill in a detailed medical form and a permission slip for administering creams on entry of their children to the School. In the summer term or as required, parents are responsible for ensuring sun cream is applied before the start of the school day and for providing sun cream for use in school. Staff will support children in re-applying this at the start of the afternoon where necessary. Parents do not need to provide consent for this. Children will be required to wear a hat in hot weather.
2. If medication is administered during the school day, the staff member responsible should complete an entry in the 'Treatments' menu on SchoolBase and notify the parents that they have done so. Medication administered in Early Years is noted on the relevant form, which parents are asked to sign at the end of the session.
3. A list of medical details is available to the First Aiders, class teachers and Games teachers. These are updated if and when new information is received from parents and can be found on SchoolBase.

Pupil Becoming Ill During School

The pupil is referred to: -

- In Early Years, the manager or deputy
- In the Primary School, the class teacher
- In the Secondary School, their tutor

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It is then determined whether:

a) The pupil needs to go home

In this case, parents are contacted immediately and arrangements made for the pupil to be collected. If parents are not available and no alternative arrangement can be made with a responsible adult, the pupil is kept in the sick bay at School until such time as a parent can be reached. Responsibility at this point may pass to the School Office. In Early Years, the child will be monitored within the setting and kept separate from other children as far as is possible.

OR

b) The pupil needs to rest quietly

A bed is available in the sick bay for this purpose.

The Sick bay is in the Secondary School so for Primary Children they will be kept in the classroom under supervision where possible. In Early Years, children will be monitored within the setting similarly.

OR

c) The pupil should return to lessons

With outcomes b or c the staff member then takes responsibility for monitoring the pupil's progress during the day.

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Appendix

Guidelines for administering paracetamol to Secondary pupils

