



MANCHESTER
MUSLIM
PREPARATORY
SCHOOL

FAITH • LEARNING • LIFE

First Aid Policy

Last reviewed on: September 2026

Next review due by: September 2027

1. Aim and Scope

The aim of this policy is to ensure that first aid is administered in a timely and competent manner and that appropriate first aid arrangements are available for pupils, staff, visitors and others participating in School activities.

MMPS will:

- provide sufficient appropriately trained first aid personnel, informed by the School's first aid needs assessment
- provide appropriate first aid equipment, facilities and medical accommodation
- ensure that first aid assistance can be obtained without unnecessary delay
- ensure appropriate first aid provision is available during the school day, during School activities outside normal hours and during educational visits and other off-site activities
- ensure staff are aware of the School's first aid arrangements and know how to summon assistance
- maintain appropriate records of accidents, injuries and first aid treatment
- meet the specific paediatric first aid requirements applicable to the School's EYFS provision.

2. Legislation, statutory requirements and guidance

This policy is informed by and operated in accordance with:

- the Health and Safety at Work etc. Act 1974
- the Health and Safety (First-Aid) Regulations 1981
- the Management of Health and Safety at Work Regulations 1999
- the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR)
- the Education (Independent School Standards) Regulations 2014, including:
- Part 3, paragraph 13, relating to the timely and competent administration of first aid through the effective implementation of a written first aid policy
- Part 5, paragraph 24, relating to suitable accommodation for the medical examination and treatment of pupils and the short-term care of sick or injured pupils
- the Statutory Framework for the Early Years Foundation Stage (EYFS) for group and school-based providers, effective from 1 September 2026, insofar as it applies to the School's EYFS provision
- Department for Education guidance, First Aid in Schools, Early Years and Further Education
- relevant Health and Safety Executive (HSE) guidance on first aid at work and the assessment of first aid needs.

The School will maintain first aid arrangements that are appropriate to its circumstances and informed by an assessment of first aid needs.

3. Roles and responsibilities

3.1 The proprietor and board of trustees

Manchester Islamic Educational Trust Ltd (MIET) is the registered proprietor of Manchester Muslim Preparatory School.

The proprietor, acting through the board of trustees, will ensure that the School has appropriate first aid arrangements and that first aid is administered in a timely and competent manner through the effective implementation of this policy.

The board of trustees will seek assurance that appropriate staffing, training, equipment, facilities and procedures are in place to meet the School's first aid needs.

3.2 The Headteacher

The Headteacher has overall responsibility for the day-to-day implementation of this policy and will ensure that:

- the School maintains appropriate first aid provision based on an assessment of first aid needs
- sufficient appropriately trained first aid personnel are available during the school day and for School activities
- appropriate arrangements are in place to provide first aid cover during staff absence and other foreseeable circumstances
- staff are aware of the School's first aid procedures and know how to obtain assistance
- appropriate first aid equipment and facilities are available
- suitable medical accommodation is available for the treatment and short-term care of sick or injured pupils
- appropriate arrangements are in place for educational visits and other off-site activities
- the specific paediatric first aid requirements applicable to EYFS are met
- accidents and incidents are recorded and reported as required
- any gaps or concerns relating to first aid provision are addressed promptly.

3.3 MIET Health & Safety Lead

The MIET Health & Safety Lead will provide oversight, advice and support in relation to the School's first aid arrangements.

This will include, as appropriate:

- supporting the Headteacher in reviewing the School's first aid needs assessment
- providing advice on first aid provision, training, equipment and facilities
- supporting the monitoring of compliance with relevant health and safety requirements
- reviewing significant accidents, incidents or emerging trends where appropriate
- advising on any improvements or additional measures required
- providing support in relation to statutory health and safety reporting requirements, including RIDDOR where applicable.

3.4 First aiders

First aiders are appropriately trained and qualified to undertake first aid within the scope of their training and competence.

First aiders will:

- respond promptly when first aid assistance is required
- assess the situation and provide appropriate immediate first aid
- seek assistance from another first aider or member of staff where necessary
- summon emergency medical assistance where required
- remain with the casualty until they have recovered sufficiently or responsibility has been transferred to a parent/carer, ambulance crew or other appropriate healthcare professional
- provide and confirm an accurate record of their first aid assessment, treatment and monitoring, and pass these details to the member of staff responsible for the accident slip

- follow the School's procedures for informing parents/carers where a pupil has been injured or becomes unwell.

3.5 All staff

All staff are responsible for:

- familiarising themselves with the School's first aid arrangements
- knowing how to summon a qualified first aider or emergency assistance
- knowing where first aid equipment is located
- following the procedures set out in this policy
- taking appropriate immediate action within the limits of their competence where delay could place someone at further risk
- reporting accidents, injuries and concerns in accordance with School procedures
- providing first aiders or emergency services with relevant information where known.

4. First aid needs assessment and provision

The School will maintain a first aid needs assessment to determine the level and type of first aid provision required.

The Headteacher, supported by the MIET Health & Safety Lead, will ensure that the assessment takes account of relevant factors including:

- the number and age of pupils, including the specific requirements applicable to EYFS children
- the number of employees and others who may be on the School premises
- the size, layout and location of the School premises
- the distribution of pupils and staff across different floors and areas of the School
- specific hazards and risks arising from School activities
- pupils or staff with particular medical needs, health conditions or disabilities
- the School's previous accident and incident history
- first aid requirements during lessons, breaktimes and lunchtimes
- availability of first aiders and arrangements for absence, leave and other foreseeable circumstances
- educational visits, sporting activities and other off-site activities
- School activities taking place outside normal school hours
- arrangements for visitors and contractors where relevant
- the accessibility of emergency medical assistance.

The findings of the first aid needs assessment will determine:

- the number and type of trained first aid personnel required
- the level and type of first aid training required
- the number and location of first aid kits
- the first aid equipment and supplies required
- the arrangements for first aid during educational visits and other off-site activities
- the medical and first aid facilities required on the School premises
- any additional provision necessary to meet the needs of particular pupils, staff or School activities.

First aid provision will be sufficient to enable appropriate assistance to be provided without unnecessary delay and will take account of foreseeable staff absence and other circumstances that could affect the availability of first aid personnel.

Appropriate first aid provision will be available whenever pupils, staff or others are on the School premises for School activities and during educational visits and other School-organised off-site activities.

During breaktimes and lunchtimes, a named qualified first aider will be identified as part of the staff duty arrangements wherever possible. Staff on duty will know who the designated first aider is and how to summon assistance promptly. This does not prevent any other appropriately qualified first aider from responding where required.

The first aid needs assessment will be reviewed at least annually and sooner where there is a significant change in circumstances, including changes to staffing, premises, pupil needs or School activities, or where an accident or incident indicates that the existing arrangements should be reviewed.

5. First aid procedures

5.1 General procedure

Where a person is injured or becomes ill on the School premises:

- the nearest member of staff will assess the immediate situation and summon a qualified first aider where appropriate
- the casualty will not normally be left unattended
- the first aider will assess the casualty and provide first aid within the scope of their training and competence
- additional assistance will be sought where required
- emergency medical assistance will be summoned where the casualty's condition requires it
- appropriate information will be provided to the emergency services
- the accident, injury and any first aid treatment provided will be recorded in accordance with the School's procedures.

Minor injuries

Staff on duty are expected to take appropriate responsibility for straightforward minor injuries that can be safely managed within their knowledge and competence. A qualified first aider does not need to be called for every minor injury.

For example, staff may provide appropriate basic care for a minor graze, small superficial cut or similar minor injury, including cleaning the affected area and applying a suitable plaster or dressing where appropriate.

Staff must seek assistance from a qualified first aider where:

- they are unsure about the nature or severity of the injury
- the pupil requires assessment or monitoring beyond straightforward basic care
- symptoms develop or the pupil's condition causes concern
- the incident involves any impact to the head, face or neck, however minor
- bleeding is significant or difficult to control
- there is a suspected fracture, serious wound or other significant injury
- the pupil has relevant medical needs which may affect the appropriate response
- the member of staff does not feel competent to manage the injury safely.

Where a named first aider is allocated to break or lunchtime duty, they remain available to provide advice, assessment or treatment where required.

For all pupil accidents and injuries, an accident slip will be completed and parents/carers will be informed on the same day. The accident slip will normally be sent home with the pupil in

accordance with the School's accident reporting procedure. For head, facial or neck impacts, the additional communication requirements in section 5.3 and Appendix 2 apply.

Where a pupil displays concerning symptoms, requires continued monitoring, may need to be collected or where medical assessment may be necessary, the parent/carer will also be contacted directly during the school day.

Where there is any doubt about the seriousness of an injury or illness, staff will seek appropriate professional medical advice or emergency assistance.

5.2 Pupils who become unwell

Where a pupil becomes unwell during the school day, a member of staff will assess the pupil's immediate needs and seek assistance from a first aider where appropriate.

Where the pupil is not well enough to remain in school, the parent/carer will be contacted and asked to collect them.

Until the parent/carer arrives, the pupil will be appropriately supervised. Where necessary, the pupil may wait in the School's designated sick room supervised by a member of staff.

A pupil who is seriously unwell or whose condition gives cause for concern will not be left unattended and appropriate medical assistance will be sought.

Where an infectious illness is known or suspected, the School will follow current public health guidance and the relevant School procedures.

5.3 Head, facial and neck impacts

Every impact involving a pupil's head, face or neck, however minor, must be assessed by a qualified first aider and trigger a prompt telephone call to a parent/carer. This includes collisions, falls and ball impacts. A pupil appearing well immediately afterwards does not remove the need for observation and clear communication.

Appendix 2 sets out the mandatory procedure for assessment, observation, escalation, recording, parental communication and handover. It applies to EYFS, KS1 and KS2, including breaktimes, lunchtimes, educational visits and School-organised clubs. Appendix 3 provides the parent notification and home-monitoring advice.

Following assessment and initial observation, admin telephones a parent/carer to explain the incident, the pupil's condition and any action required. Admin emails the advice in Appendix 3 and sends a text confirming that the advice has been emailed and the accident slip will be sent home with the pupil. The accident slip is not emailed. Calls must not be left until collection.

If a parent/carer cannot be reached, follow Appendix 2, section 4. Where there are symptoms or concerns, obtain medical advice or emergency assistance as required. Treatment must never be delayed while attempting to contact a parent/carer.

Where concussion is suspected, remove the pupil from PE, sport and other activities risking further injury immediately. Follow the assessment and return-to-activity requirements in Appendix 2, section 3.

The class teacher ensures that the next supervising adult is briefed about the incident, monitoring needs and any activity restrictions, and checks that they understand.

EYFS and KS1 pupils must receive a bumped-head wristband; for KS2 pupils, a wristband may be issued where appropriate. If a wristband is not tolerated, record this and inform the teacher. Wristbands do not replace assessment, records, parental communication or handover.

EYFS pupils require particularly careful observation and a lower threshold for medical advice, especially where they cannot reliably explain their symptoms. Follow the collection and club handover arrangements in Appendix 2, section 5.

5.4 Calling an ambulance and transfer to hospital

An ambulance will be called where a first aider or other member of staff considers that emergency medical assistance is required.

Staff will not delay calling an ambulance while attempting to contact a pupil's parent/carer.

Where an ambulance is called for a pupil:

- the parent/carer will be contacted as soon as possible
- relevant information about the pupil, including known medical information and healthcare arrangements where applicable, will be made available to the ambulance crew
- a member of staff will remain with the pupil until responsibility has been transferred appropriately
- Where the parent/carer has not arrived before the pupil is transported to hospital, a suitable member of staff will accompany the pupil where necessary, taking the pupil's relevant medical notes and records to share with hospital staff
- the School will continue reasonable efforts to contact the parent/carer.

The incident and subsequent action will be recorded in accordance with the School's procedures.

5.5 Blood and bodily fluid spillages

Blood and bodily fluids will be treated as potentially infectious and appropriate infection prevention and control precautions will be taken.

Where blood or bodily fluids are present:

- appropriate personal protective equipment (PPE), including disposable gloves and an apron where appropriate, will be worn
- spillages will be dealt with promptly
- an appropriate bodily-fluid spill kit and cleaning/disinfection products will be used in accordance with the manufacturer's instructions and current public health guidance
- disposable materials will be disposed of safely
- hands will be washed thoroughly after removing PPE
- any exposure incident involving blood or bodily fluids will be managed and recorded appropriately.

The School will follow current public health guidance on the prevention and control of infection in education settings.

6. First aid equipment and facilities

6.1 First aid equipment

The School will provide sufficient first aid equipment and supplies in accordance with the findings of its first aid needs assessment.

First aid kits will:

- be readily accessible when required

- be clearly identified as first aid equipment
- contain supplies appropriate to the area, activity and assessed level of risk
- be checked regularly and replenished promptly following use
- have expired or damaged items removed and replaced.

Medication will not be stored in first aid kits. Medicines required by individual pupils will be managed in accordance with the MMPS Supporting Pupils with Medical Conditions and Administering Medicines Policy.

Portable first aid kits will be available for breaktimes, lunchtimes, physical education, educational visits and other off-site activities as required by the School's first aid needs assessment.

6.2 Location of first aid equipment

First aid boxes and/or bags are available in the following locations:

- all classrooms
- first-floor H&S room
- first-floor multipurpose room
- ground-floor sick room
- KS1 breaktime first aid provision
- KS2 breaktime first aid provision
- dining room for lunchtime provision
- sports hall

Staff will be informed of the location of first aid equipment and any changes to these arrangements.

6.3 Checking and replenishment

First aid equipment will be checked regularly by a designated member of staff.

Checks will ensure that:

- first aid kits remain appropriately stocked
- sterile items remain sealed and fit for use
- items are within their expiry dates where applicable
- any equipment used is replaced promptly
- first aid equipment remains available in its designated location.

Any member of staff who uses the last of an item, identifies an item that has expired or notices that a first aid kit requires replenishment must report this promptly.

6.4 Medical and sick-room accommodation

The School will maintain suitable accommodation for the medical examination and treatment of pupils and for the short-term care of pupils who are sick or injured.

The designated accommodation will:

- be readily available when required
- be suitable for the examination, treatment and short-term care of pupils
- include a wash basin
- be located near a toilet
- allow appropriate supervision of a sick or injured pupil
- contain or have ready access to appropriate first aid equipment.

The accommodation will not be used for teaching while it is required for its medical purpose.

The School's designated sick room is located on the ground floor.

6.5 Automated external defibrillator

An automated external defibrillator (AED) is located on the ground floor next to the office. Its location must be clearly identified and staff must know how to obtain it without delay. Access must be maintained during School activities, including after-school clubs.

In a suspected cardiac arrest, call 999, begin CPR as appropriate and arrange for the AED to be brought to the casualty. Follow the emergency call handler's instructions and the AED's prompts.

The Headteacher will designate a member of staff to undertake and record checks in accordance with the manufacturer's instructions, including the readiness indicator, battery, electrode pads and expiry dates. Any fault must be reported promptly and used or expired supplies replaced. Staff familiarisation must cover the device's arrangements for use with children.

6.6 Emergency adrenaline auto-injectors

The School's emergency adrenaline auto-injectors (AAIs) are also located on the ground floor next to the office. They must be clearly labelled, readily accessible to staff, out of pupils' reach and not locked away. Storage must follow the manufacturer's instructions. They are held separately from ordinary first aid supplies.

The Headteacher will designate staff responsible for checking and recording stock, condition and expiry dates and arranging prompt replacement after use or before expiry. Cover must be arranged for absence.

Staff awareness, training, eligibility and consent for use of spare AAIs, emergency action and recording must follow the School Allergy Management Policy and individual allergy action plans. In suspected anaphylaxis, follow the emergency procedure immediately and call 999; do not delay emergency treatment while attempting to contact parents. Spare AAIs do not replace a pupil's prescribed medication.

7. Educational visits and off-site activities

Appropriate first aid provision will be available for all educational visits and other School-organised off-site activities.

The level of first aid provision required will be considered as part of the planning and risk assessment for each visit and will take account of:

- the number and age of pupils participating
- the nature, location and duration of the activity
- the particular risks associated with the activity
- the medical and additional needs of individual pupils
- the availability and proximity of emergency medical assistance
- the number and competence of accompanying staff
- any specific first aid or medical arrangements required for individual pupils.

The visit leader will ensure that:

- a named first aider is identified for the visit and is known to the accompanying staff
- where EYFS pupils are participating, the statutory Paediatric First Aid requirements applicable to EYFS outings will be met
- sufficient appropriately trained staff accompany the visit, taking account of the findings of the risk assessment
- an appropriately stocked portable first aid kit accompanies the group and is readily accessible
- accompanying staff are aware of how to obtain emergency assistance

- relevant information about pupils' medical needs is available to the staff who need it
- emergency contact details are available
- medicines and medical devices required by individual pupils accompany them and remain accessible as required
- appropriate arrangements are made for pupils with Individual Healthcare Plans, Asthma Plans, Allergy Action Plans or other healthcare arrangements.

First aid kits used for educational visits and off-site activities will be stocked in accordance with the School's first aid needs assessment and the nature of the activity. Any additional equipment required because of the location or nature of the visit will be identified during the risk assessment.

Any accident, injury or first aid treatment occurring during an educational visit or other off-site School activity will be recorded and parents/carers informed in accordance with the same School procedures that apply to incidents occurring on the School premises.

Where emergency medical assistance is required during an off-site activity, staff will summon the emergency services without delay and contact the pupil's parent/carer as soon as practicable.

The administration and transportation of medicines during educational visits will be managed in accordance with the MMPS Supporting Pupils with Medical Conditions and Administering Medicines Policy.

8. Staff training and EYFS Paediatric First Aid

8.1 First aid training

The School will ensure that sufficient appropriately trained first aiders are available to meet the needs identified through the School's first aid needs assessment.

First aiders will:

- undertake training appropriate to the role they are expected to perform
- receive training from a competent training provider
- hold a current and valid first aid qualification
- undertake retraining before their qualification expires
- only provide first aid within the scope of their training and competence.

The School will maintain an up-to-date record of trained first aiders, the qualifications held and the dates on which those qualifications expire.

The Headteacher will ensure that arrangements for training and renewal provide sufficient first aid cover at all times, including during foreseeable staff absence.

Staff who are not qualified first aiders will be made aware of the School's first aid procedures, including how to summon a first aider and how to obtain emergency assistance.

8.2 EYFS Paediatric First Aid

For the School's EYFS provision, at least one person who holds a current Paediatric First Aid (PFA) certificate for a full course consistent with the criteria set out in Annex A of the statutory EYFS framework will be on the premises and available at all times when EYFS children are present.

A member of staff who holds a current full PFA certificate will accompany EYFS children on outings and educational visits.

Paediatric First Aid training will be renewed every three years and will be relevant to people caring for young children and babies.

The School will take account of the number of EYFS children, staffing arrangements and the layout of the premises to ensure that a qualified paediatric first aider can respond to an emergency without unnecessary delay.

Staff who are required under the EYFS qualification requirements to hold a PFA qualification in order to be included within the required staff:child ratios will meet those requirements. The School will ensure that the relevant qualification remains current. The EYFS specifically requires relevant Level 2 and Level 3-qualified staff who fall within the applicable rules to obtain PFA within the required timescale in order to count at those qualification levels within the ratios.

The School will maintain an up-to-date record of staff holding current PFA qualifications and will make information about qualified paediatric first aiders available as required.

8.3 Paediatric First Aid during eating

Whilst EYFS children are eating, there will always be a member of staff in the room who holds a current PFA certificate for a full course consistent with the criteria set out in Annex A of the statutory EYFS framework.

EYFS children will always remain within sight and hearing of a member of staff whilst eating.

Staffing and duty arrangements for meals and snacks will be organised so that these requirements are maintained at all times.

8.4 Maintaining first aid cover

First aid and PFA qualification expiry dates will be monitored so that replacement or refresher training can be arranged before certificates expire.

Where staff absence, turnover or another foreseeable circumstance could affect the School's ability to maintain the required level of first aid or PFA cover, alternative arrangements will be made promptly.

9. Accident and first aid records, parental notification and statutory reporting

9.1 Accident and first aid records

The School will maintain accurate records of accidents, injuries and first aid treatment.

Where a pupil sustains an accident or injury:

- the incident will be recorded in accordance with the School's accident recording procedures
- an accident slip will be completed
- details of any first aid treatment provided will be recorded

The member of staff on duty who witnessed the incident or first dealt with it is responsible for completing the accident slip and passing it to the office for parental notification. If nobody witnessed the incident, the member of staff who first receives the report must record the information available and identify clearly what the pupil or others have reported. Any first aider involved must provide and confirm the details of their assessment, treatment and monitoring; they are not responsible for describing an incident they did not witness. If the responsible member of staff is called away, they must explicitly hand the recording task to a named colleague who accepts responsibility for completing it.

Records will be factual, clear and completed as soon as reasonably practicable following the incident.

Accident and first aid records will be stored securely and retained in accordance with the School's Records Retention Schedule, data protection requirements and any applicable insurance requirements.

The School will periodically review accident and incident records to identify recurring patterns, hazards or other matters requiring further action.

9.2 Informing parents/carers

Parents/carers of all pupils from EYFS to Year 6 must be informed on the same day of any accident or injury and any first aid given. An accident slip must be completed and normally sent home with the pupil. Information may also be provided electronically.

A parent/carer must be telephoned promptly during the school day where the injury gives cause for concern, symptoms develop, continued monitoring beyond initial observation is required, collection may be necessary or medical advice or assessment is needed. Contact must be immediate for significant injury or concerning deterioration. Staff must follow section 5.4 where emergency assistance is needed.

For every impact involving the head, face or neck, however minor, admin must telephone a parent/carer promptly to explain what happened and the first aider's assessment. Admin then emails the head-bump advice in Appendix 3 and sends a text confirming that the advice has been emailed and the accident slip will be sent home with the pupil. The accident slip is not emailed. Calls must not be left until collection. Follow Appendix 2, section 4 if a parent/carer cannot be reached. Texts and emails do not replace the required telephone contact or collection handover. Routine minor injuries not involving the head, face or neck do not require a text alert.

Record contact attempts, who was spoken to, the information and advice given and any agreed arrangements. If the parent/carer cannot be reached, follow the escalation and alternative-contact arrangements in Appendix 2 for head-related incidents, and equivalent arrangements for other injuries requiring direct contact. An unanswered call, voicemail or email does not count as a completed two-way conversation.

9.3 Accident book and workplace records

The School will maintain an accident book or equivalent accident recording system in accordance with applicable health and safety and social security requirements.

Records will be kept securely and access will be restricted appropriately to protect personal information.

Where an accident results in a worker being unable to undertake their normal duties for more than three consecutive days, the incident will be recorded even where it does not meet the threshold for reporting to the HSE.

9.4 Reporting under RIDDOR

The School will comply with the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR).

Where an incident may be reportable, the Headteacher will liaise with the MIET Health & Safety Lead to ensure that the circumstances are reviewed and that any required report is made to the Health and Safety Executive (HSE) within the applicable timescale.

Reportable incidents may include, as defined by RIDDOR:

- a work-related death
- a specified injury to a worker
- a work-related injury resulting in a worker being unable to perform their normal work duties for more than seven consecutive days
- specified occupational diseases
- specified dangerous occurrences

- certain work-related injuries to pupils, visitors or other people who are not at work.

For workers, an over-seven-day period does not include the day of the accident but does include weekends and rest days. Such incidents must be reported within 15 days of the accident.

Other reportable incidents, including deaths, specified injuries and dangerous occurrences, must be notified without delay and the required report submitted within the applicable statutory timescale.

9.5 Accidents involving pupils and visitors under RIDDOR

An accident involving a pupil or visitor is not automatically reportable under RIDDOR simply because the person attends hospital.

An injury to a pupil or other person who is not at work is generally reportable where:

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

Being taken to hospital purely as a precaution, where no injury requiring treatment is identified, does not by itself make the incident reportable.

Similarly, most ordinary sporting injuries to pupils are not reportable. They may become reportable where the circumstances indicate that the accident arose out of or in connection with the way the School activity was organised or managed, the condition of the premises or equipment or another work-related factor.

9.6 Follow-up and review

Serious accidents, significant incidents and any incident reportable under RIDDOR will be reviewed by the Headteacher, with support from the MIET Health & Safety Lead where appropriate.

The review will consider whether:

- further action is required to support the injured person
- any immediate hazard needs to be addressed
- risk assessments require review
- procedures, supervision or equipment require amendment
- any further statutory, safeguarding or insurance notification is required
- lessons can be learned to reduce the likelihood of recurrence.

10. First aid arrangements for staff, visitors and contractors

10.1 Staff

Employees who are injured or become ill at work will be provided with appropriate first aid in accordance with this policy.

Where a member of staff is injured or becomes ill:

- appropriate first aid will be provided
- emergency medical assistance will be sought where required
- the incident will be recorded in accordance with the School's accident recording procedures
- the Headteacher or relevant senior member of staff will be informed where appropriate
- any necessary follow-up action or review will be undertaken.

Staff must report work-related accidents, injuries and incidents promptly so that appropriate records can be maintained and any necessary action taken.

Where an incident may meet the requirements for statutory reporting under RIDDOR, the procedures set out in section 9 of this policy will be followed.

10.2 Visitors

The School will provide appropriate first aid assistance to visitors who become injured or unwell whilst on the School premises or participating in a School activity.

Where a visitor is injured or becomes unwell:

- a first aider will be called where appropriate
- first aid will be provided within the scope of the first aider's training and competence
- emergency medical assistance will be summoned where required
- the incident and any first aid treatment provided will be recorded in accordance with the School's procedures.

Where a visitor is accompanied or hosted by a member of staff, that member of staff should assist in ensuring that appropriate help is summoned and that the incident is reported.

10.3 Contractors and other persons working on the premises

Contractors and other persons working on the School premises will be provided with relevant information about the School's first aid arrangements as appropriate.

Where a contractor or other person working on the premises requires first aid, the School will provide or summon appropriate assistance in accordance with this policy.

Any accident or incident occurring on the School premises that may require recording, investigation or statutory reporting will be brought to the attention of the Headteacher and, where appropriate, the MIET Health & Safety Lead.

Where contractors have their own first aid arrangements as part of their work, these will be taken into account as appropriate, particularly in relation to higher-risk or specialist activities.

11. Information about first aid arrangements and staff induction

11.1 Information for staff

All staff will be made aware of the School's first aid arrangements and will know how to obtain first aid assistance promptly.

Staff will be informed of:

- how to summon a first aider
- the location of first aid boxes and other first aid equipment
- the location of the School's sick room
- the arrangements for dealing with accidents, injuries and pupils who become unwell
- the procedures for contacting emergency medical assistance
- the School's accident recording and parental notification procedures
- any relevant arrangements for pupils with known medical conditions
- the additional procedures relating to head injuries
- the identity of the named first aider for breaktime and lunchtime duties, where applicable.

An up-to-date list of appropriately qualified first aiders will be displayed in suitable prominent locations and/or made readily accessible to staff.

Changes to first aid arrangements that staff need to know about will be communicated promptly.

Staff must also know the location and access arrangements for the AED and emergency AAls on the ground floor next to the office, and the relevant emergency procedures in sections 6.5 and 6.6.

11.2 Staff induction

First aid arrangements will form part of the induction process for new members of staff.

As part of induction, staff will be informed of:

- the School's First Aid Policy
- how to obtain first aid assistance
- the location of first aid equipment and facilities
- emergency procedures
- accident and injury recording requirements
- arrangements for informing parents/carers
- relevant medical, allergy, asthma and safeguarding procedures.

Staff do not need to be qualified first aiders to understand and follow the School's first aid procedures. Their responsibilities for straightforward minor injuries and for seeking qualified assistance where necessary are set out in section 5.1 of this policy.

11.3 Information for pupils and parents/carers

Pupils will be given age-appropriate information about how to seek help if they or another person are injured or become unwell.

Parents/carers will be able to access information about the School's first aid arrangements through this policy and will be informed of accidents, injuries and first aid treatment in accordance with section 9.

11.4 Breaktimes and lunchtimes

The duty arrangements for breaktimes and lunchtimes will identify a named first aider wherever possible.

Staff undertaking breaktime and lunchtime duties will be made aware of the named first aider and how to contact them promptly.

The presence of a named first aider does not remove the responsibility of other staff on duty to respond appropriately to straightforward minor injuries within their competence, as set out in section 5.1.

11.5 Educational visits and off-site activities

The named first aider for an educational visit or other off-site activity will be identified as part of the visit arrangements and made known to accompanying staff before the activity takes place.

Where EYFS pupils are participating, the additional Paediatric First Aid requirements set out in section 8 will apply.

11.6 Visitors and contractors

Relevant information about the School's first aid arrangements will be provided to visitors, contractors and other persons working on the premises where appropriate, including how to summon assistance in an emergency.

12. Monitoring, review and related policies/documents

12.1 Monitoring and implementation

The Headteacher will monitor the effective implementation of this policy, with advice and support from the MIET Health & Safety Lead as appropriate.

Monitoring will include consideration of:

- whether sufficient appropriately trained first aid personnel are available
- first aid and Paediatric First Aid qualification expiry dates
- the effectiveness of arrangements for breaktimes, lunchtimes and educational visits
- the availability, condition and replenishment of first aid equipment
- the suitability and accessibility of the School's sick-room accommodation
- accident, injury and first aid records
- patterns or trends identified from accidents and incidents
- significant incidents, near misses and RIDDOR-reportable events
- the effectiveness of arrangements for informing parents/carers
- whether the first aid needs assessment remains appropriate.

Accident and first aid records will be used, where appropriate, to identify trends, recurring hazards and areas in which first aid arrangements or risk-control measures may need to be improved.

12.2 Review of first aid provision

The School's first aid needs assessment will be reviewed regularly and whenever there is a significant change that may affect first aid provision.

This may include:

- significant changes to pupil or staff numbers
- changes to the age profile or needs of pupils
- changes to the premises or use of particular areas
- significant changes to staffing arrangements
- the introduction of new activities or identified hazards
- changes arising from an accident, serious incident or near miss
- evidence from accident or first aid records indicating that existing provision should be reconsidered
- changes to legislation, statutory requirements or relevant guidance.

Any identified shortcomings in first aid provision will be addressed promptly.

12.3 Review of this policy

This policy will be reviewed at least annually by the Headteacher and earlier where:

- there is a significant change to the School's first aid arrangements
- the first aid needs assessment identifies that amendments are required
- a serious accident or incident indicates that procedures should be reviewed
- there is a relevant change in legislation, statutory requirements or guidance
- changes to the EYFS statutory framework affect the School's Paediatric First Aid arrangements.

The board of trustees will receive appropriate assurance that the School has suitable first aid arrangements and that this policy is being effectively implemented.

12.4 Related policies and documents

This policy should be read alongside, where relevant:

- Supporting Pupils with Medical Conditions and Administering Medicines Policy
- School Allergy Management Policy
- Head Bump and Head Injury Procedure (Appendix 2)
- Health and Safety Policy; Risk Assessment Policy
- Educational Visits Policy
- Safeguarding and Child Protection Policy
- SEND Policy
- Whole School Food Policy
- Data Protection Policy
- Records Retention Schedule
- Relevant Individual Healthcare Plans, Asthma Plans and Allergy Action Plans.

Appendix 1 First Aid Staff Reminder

For all staff, including teaching staff, midday supervisors and admin. Follow these steps alongside the First Aid Policy and the Head Bump and Head Injury Procedure in Appendix 2.

1. Respond straight away | Staff on duty

Stop the activity, make the area safe and reassure the pupil. Give basic care only within your competence. Do not leave an unwell pupil or a pupil causing concern unattended.

2. Get help | Staff on duty and first aider

Every head, face or neck impact must be assessed by a qualified first aider, however minor. For other injuries, call a first aider where there are symptoms, uncertainty, significant injury or a need for continued monitoring. In an emergency, call 999 and inform a senior leader. Do not wait for parental permission.

3. Complete the accident slip | Staff member who witnessed or first dealt with the incident

Record what happened, the injury, care given and action taken. If unwitnessed, record what is known and who reported it. The first aider supplies and confirms their assessment, treatment and monitoring details. If called away, hand the recording task to a named colleague who accepts responsibility.

4. Inform parents | Admin and responsible staff

Every head, face or neck impact requires a prompt telephone call to a parent/carer. Admin explains the incident, emails the head-bump advice and sends a text confirming that the advice has been emailed and the accident slip will go home with the pupil. Do not email the accident slip or leave the call until collection.

If a parent cannot be reached and there is no major concern, admin texts asking them to contact school, records the attempts and follows up. If there are symptoms or concerns, try other authorised contacts, alert a senior leader and follow Appendix 2. Never delay medical help.

For other accidents and injuries, inform parents on the same day and send the accident slip home. Telephone promptly where there are concerns, possible collection or a need for medical advice.

5. Monitor and hand over | Supervising adult and class teacher

The supervising adult follows the first aider's instructions and reports any deterioration immediately. The class teacher ensures the next supervising adult is briefed about the incident, monitoring and restrictions, and checks that they understand.

Before a club, the teacher briefs the coach directly and informs admin. Teachers update the collecting adult at normal collection; admin does so after clubs. If someone other than a parent collects, brief that person. Admin must try calling the parent again before dismissal where possible if no telephone conversation has yet taken place, and continue following up. No further call is needed if admin has already spoken to the parent.

6. Check completion | Staff member responsible for the slip and admin

Ensure the record is complete and the accident slip goes home with the pupil. For head, face or neck impacts, admin records the telephone conversation or unsuccessful contact attempts and confirms that the advice and text have been sent. Any outstanding contact must be followed up.

Text confirming advice has been emailed

MMPS: Head-bump advice has been emailed to you. Your child's accident slip will be sent home with them today.

Emergency equipment

The defibrillator (AED) and emergency adrenaline auto-injectors are on the ground floor next to the office. Know how to access them and follow the relevant emergency procedures.



Head Bump and Head Injury Procedure

Purpose and scope

This policy sets out the response to head, face and neck impacts at MMPS, including lessons, breaks, visits and school-organised clubs. First-aid and emergency procedures also apply to staff and visitors, with contact arrangements adapted as appropriate.

Every pupil head bump must be assessed by a qualified first aider and reported to a parent by telephone. Symptoms may develop later. An absence of swelling or a pupil initially appearing well does not rule out injury. Staff must act within their training and seek medical advice when uncertain.

1 Minor bump with no concerning symptoms

The pupil is alert, behaves normally and is comfortable enough to participate in quiet activities. There may be minor local bruising, swelling or tenderness, but this is not increasing. There is no headache, dizziness, nausea, vomiting, unusual drowsiness, change in behaviour or other concerning feature.

Action to be taken

- A qualified first aider assesses the pupil and observes their initial recovery. Check for any recent head injury or relevant medical condition.
- The pupil may remain in school following assessment if appropriate supervision and monitoring can be maintained. Record the named adult responsible, the review arrangements and any activity restrictions. Seek medical advice if there is uncertainty about the injury.
- For a minor head bump, use an ice pack or cold pack wrapped in a cloth or towel for short periods, if appropriate and tolerated. Never apply ice or a frozen pack directly to the skin.
- Complete an accident slip and record the assessment, care and review time.
- Inform the class teacher or next responsible adult so they can watch for later symptoms.
- Admin telephones a parent promptly during the school day and sends the written notification described in section 4.
- If symptoms develop, follow section 2 or 3. Apply a lower threshold for medical advice in EYFS or where a pupil cannot explain symptoms reliably.

2 Head injury with ongoing or concerning symptoms but no loss of consciousness

This includes increasing swelling, ongoing pain or distress, or the pupil appearing unwell. Headache, nausea or dizziness may indicate concussion and require medical advice. Minor local bruising, swelling or tenderness alone may be managed under section 1 where all its conditions are met.

Action to be taken

- A qualified first aider assesses the pupil, informs a senior leader and records monitoring arrangements. Keep the pupil supervised and stop physical activity.
- Admin telephones a parent promptly and arranges collection where the pupil remains unwell, has ongoing pain or distress, cannot comfortably participate in quiet activities or needs supervision beyond what school can safely provide. Seek medical advice for possible

concussion or other concerning symptoms. Keep the pupil supervised while next steps are arranged. Neither observation nor collection must delay necessary medical help.

- Obtain prompt NHS 111 advice for vomiting, dizziness or other worrying symptoms without emergency signs. Seek advice for neck pain or relevant blood-thinning medication or a bleeding condition.
- Follow section 3 immediately for serious symptoms or deterioration. Complete the accident slip, written notification and adult handover.

3 Serious head injury and medical escalation

Call 999 immediately if the pupil has any of the following after a head impact:

- Unconsciousness without recovery, difficulty staying awake or a seizure.
- New weakness or numbness, or problems with walking, balance, understanding, speech, vision or hearing.
- A concerning change in behaviour, such as unusual irritability or confusion, or rapid deterioration.
- Signs of skull injury, including a dent or embedded object, clear fluid from the ears or nose, bleeding from the ears or bruising behind them or around an eye without a direct eye injury.
- A high-speed impact, a fall of more than 1 metre or 5 stairs, severe neck pain or suspected spinal injury.

Action to be taken

- Call 999 and summon a qualified first aider. Do not wait for the first aider to arrive or for parental permission before calling.
- Follow first-aid training and the call handler's instructions. If spinal injury is suspected, do not ask the pupil to walk or turn their head. Move only for immediate safety or lifesaving care.
- Inform the Headteacher or another senior leader. Admin contacts a parent immediately.
- Keep the pupil supervised by a first aider, with senior staff support, until care is transferred. If a parent is unavailable, arrange for a suitable staff member to accompany the pupil to hospital where necessary.
- Record the incident and actions as soon as practicable. Paperwork must never delay treatment.

Urgent assessment even if the pupil is awake

Any loss of consciousness followed by recovery, memory loss, repeated vomiting or a severe or increasing headache requires urgent medical assessment, normally in A&E. Call 999 if emergency signs are present or safe transport is not possible. Do not leave the pupil alone while help is arranged.

Suspected concussion and return to activity

Remove the pupil from PE, sport and activities risking another impact immediately. No return is permitted that day or within 24 hours, even if symptoms settle. Arrange healthcare assessment or NHS 111 advice within 24 hours; serious symptoms require earlier action. If the pupil returns to school before the 24-hour period has ended, the Headteacher or a senior leader must be informed.

Return to learning and sport must follow medical advice and a graduated recovery programme. Returning to learning takes priority over unrestricted sport. The next school day or parental permission alone does not provide clearance to resume sport. Record restrictions and share them with parents, teachers and club staff.

Following concussion, there must be no return to sporting competition before 21 days from the injury. This is a minimum period, not automatic clearance to return; the pupil must also meet the graduated return-to-activity requirements and follow medical advice.

4 Recording and parent communication

For every head bump

- The staff member who witnessed or first dealt with the incident completes the accident slip. If unwitnessed, the first recipient of the report records what is known and identifies the source. The first aider provides and confirms assessment, care and monitoring details.
- Record the date, time, place, incident, symptoms, treatment, observations, staff involved, medical advice, activity restrictions and handovers.
- For every head bump, admin telephones a parent promptly, explains the incident and first aider's assessment and records the conversation. Explain whether the pupil will remain in school under observation, requires collection or needs medical assessment, following sections 1–3. Record the monitoring arrangements and any agreed next steps.
- If admin is unavailable, the senior member of staff responsible at the time must ensure that a named adult makes and records the call. During an educational visit, this is the visit leader's responsibility; during a club, the club lead must contact the designated school member of staff and agree who will make the call. Parental contact must not be delayed while responsibility is being allocated.
- Admin emails the head-bump advice and sends a text confirming that the advice has been emailed and the accident slip will be sent home with the pupil. The accident slip is not emailed.
- If a parent cannot be reached and there is no major concern, admin sends a text asking them to contact school and records the contact attempts. Follow up to ensure a parent is informed. If there are symptoms or concerns, try other authorised contacts, alert a senior leader and follow the escalation procedure. Contact attempts must not delay medical help.
- If email fails, arrange another reliable same-day method of providing written information. Observe any contact restrictions.

The accident slip records what happened, the assessment and care given. The advice emailed to parents in Appendix 3 explains home monitoring and when to seek medical help. Any individual monitoring instructions or activity restrictions must also be explained to parents and recorded. Ask parents to report later symptoms and medical advice received.

5 Wristband and handover

- The staff member dealing with the incident ensures EYFS and KS1 pupils receive a bumped-head wristband; KS2 pupils may receive one where appropriate. If not tolerated, record this and tell the class teacher.
- The supervising adult follows the first aider's instructions and reports any deterioration immediately. The class teacher ensures the next supervising adult is briefed about the incident, observations, monitoring requirements and any activity restrictions, and checks that they understand. A wristband never replaces this handover.
- Before an after-school club, the teacher checks the assessment and restrictions, briefs the club coach directly on monitoring and when to seek help and tells admin to inform parents at collection.
- A pupil awaiting collection because of symptoms, requiring ongoing monitoring for symptoms or with suspected concussion must not take part in a physical club. Arrange suitable supervision.
- The teacher updates the collecting adult at normal collection; admin does so after a club. If someone other than a parent collects, brief that person. If admin has not yet spoken to a parent

about the incident, admin must try calling again before dismissal where possible and continue following up until contact is made. No further telephone call is needed if admin has already spoken to the parent, either through the original call or a return call following the text message. Record who was informed.

- If the parent has already been telephoned, explain any changes and repeat relevant advice at collection. Required daytime calls must not wait until collection.

6 Review

The Headteacher reviews significant incidents, repeated injuries and any gaps in recording or communication. Review this policy annually and sooner if guidance or school arrangements change.

7 Supporting guidance

The School's communication and handover requirements above are local procedures. Medical escalation is informed by the sources below. Staff must act within their training and obtain professional advice where uncertain.

[1] NHS, Head injury and concussion: <https://www.nhs.uk/conditions/head-injury-and-concussion/>

[2] Hull University Teaching Hospitals NHS Trust, Head Injury and Concussion in Children: <https://www.hey.nhs.uk/patient-leaflet/head-injury-and-concussion-in-children/>

[3] UK Concussion Guidelines for Non-Elite (Grassroots) Sport, November 2024: <https://www.sportandrecreation.org.uk/files/uk-concussion-guidelines-for-non-elite-grassroots-sport---november-2024-update-accessible-version-061124084259.pdf>

DfE, First aid in schools, early years and further education:

<https://www.gov.uk/government/publications/first-aid-in-schools/first-aid-in-schools-early-years-and-further-education>



Appendix 3

Head, Face and Neck Impact Notification

Dear Parents/Carers,

Child's name: _____

Date of incident: _____ **Approximate time:** _____

Your child had a bump involving their head, face or neck today. The accident slip will be sent home with your child and explains what happened, how they were assessed and any care provided. This email provides advice on monitoring your child at home.

Most minor bumps are not serious. We share this advice as a precaution so that you know what to look out for at home. Receiving this notification does not mean that your child has concussion.

Looking after your child at home

Please ensure an adult stays with your child for the first 24 hours after the injury. They can sleep as usual.

Following a minor head injury, avoid rough play for a few days and contact sports for at least three weeks. Your child should stay off school until feeling better. Follow any individual medical advice and activity restrictions given to you. If concussion is suspected or diagnosed, their return to learning and sport must follow medical advice and a gradual recovery programme.

When to seek help

Contact NHS 111 promptly if your child vomits, feels dizzy, has a headache that does not settle or develops any other symptom that worries you. For a child under 5, telephone 111.

Call 999 immediately if your child:

- is unconscious, is difficult to wake or cannot stay awake, or has a seizure;
- develops difficulty walking, balancing, seeing, hearing or speaking, new weakness or numbness, or a marked change in behaviour or understanding;
- has clear fluid from the nose or ears, bleeding from the ears, or severe neck pain.

Loss of consciousness even if recovered, memory loss, repeated vomiting or a severe or increasing headache needs urgent medical assessment, normally in A&E. Call 999 if your child is deteriorating or cannot travel safely.

Please let the school office know about any symptoms that develop later or medical advice received, so we can support your child. If anything on the accident slip is unclear, please contact us.

Further advice: www.nhs.uk/conditions/head-injury-and-concussion/

No signed acknowledgement or return is required.