



Sacred Heart School

First Aid Policy

At Sacred Heart School we all aspire to provide a happy, safe and secure environment in which every child is encouraged to achieve their full potential.

This policy is applicable to all pupils, including those in EYFS.

Written by:	Bursar
Approved by:	Head teacher and Senior Leadership Team
Last reviewed on:	September 2026
Review date:	September 2028
Review Cycle:	Every Two Years

Contents

1. Purpose and scope
2. Legal and guidance framework
3. Responsibilities
4. First aid needs assessment and trained staff
5. First aid equipment and facilities
6. First aid procedures
7. Medicines and emergency medication
8. EYFS and Little Hearts Nursery
9. Allergies, asthma and serious medical conditions
10. Head injuries
11. Educational visits, sport and off-site activities
12. Calling the emergency services
13. Recording, reporting and parental notification
14. AED arrangements
15. Infection prevention and exclusion
16. Training, monitoring and review

1. Purpose and scope

Sacred Heart School is committed to providing prompt, appropriate and effective first aid for pupils, staff and visitors. This policy applies throughout the school, including Little Hearts Nursery and the Early Years Foundation Stage (EYFS), before- and after-school provision, educational visits, sports fixtures and other school activities.

First aid is the immediate assistance given to a person who is injured or becomes ill. It does not replace professional medical assessment or treatment. Staff will act within the scope of their training and will seek medical or emergency assistance whenever this is required.

2. Legal and guidance framework

This policy has regard to the Health and Safety (First-Aid) Regulations 1981; Department for Education guidance on first aid in schools, early years and further education and supporting pupils with medical conditions; the statutory EYFS framework; the June 2026 statutory guidance on allergy safety in schools; current UK Health Security Agency (UKHSA) health protection guidance; and the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR).

The school will follow the most recent versions of statutory and public-health guidance rather than reproduce detailed clinical or exclusion guidance which may change during the lifetime of this policy.

3. Responsibilities

The Headteacher has overall responsibility for ensuring that suitable first aid arrangements are in place. Day-to-day organisation may be delegated to appropriately trained staff, but this does not remove the school's responsibility to ensure sufficient trained personnel, suitable facilities, appropriate equipment and effective procedures.

The Bursar, working with the Headteacher and relevant staff, will ensure that the first aid needs assessment is reviewed, training is arranged, records are maintained and reportable incidents are notified where required. Designated staff will check first aid equipment and the AED.

All staff must know how to obtain first aid assistance, summon emergency help and report an accident or illness. Staff must follow Individual Healthcare Plans (IHPs), allergy and asthma arrangements and any pupil-specific emergency procedures relevant to their role.

4. First aid needs assessment and trained staff

The school will maintain and review a first aid needs assessment. This will take account of the number and age of pupils, Little Hearts Nursery and EYFS requirements, the layout and location of the premises, staff and visitor needs, known medical conditions, higher-risk activities, sports, swimming, educational visits, before- and after-school provision, staff absence and the need for cover throughout the school day.

The school will ensure that there are sufficient appropriately trained first aiders to provide first aid without delay. At least one person with a current paediatric first aid certificate will be available on the premises and accompany outings where required by the EYFS statutory framework.

A current register of trained first aiders, the qualifications held and expiry dates will be maintained by the school office rather than relying solely on a fixed list within this policy. Relevant information will be readily available to staff. Outside sports or activity providers must have appropriate first aid arrangements for the activities they deliver.

Staff receive appropriate first aid awareness and emergency-response updates. Training needs are reviewed following incidents, changes in pupil needs and as part of the school's first aid needs assessment.

5. First aid equipment and facilities

The principal first aid supplies and outing bags are kept in the medical room. Additional first aid supplies are available in the Foundation Stage area and in other locations identified through the first aid needs assessment. First aid kits taken off site must be appropriate to the activity and group.

A designated member of staff will check first aid equipment at least termly and replenish items promptly. Emergency medication belonging to individual pupils is not part of the general first aid kit and must be stored and carried in accordance with the pupil's healthcare arrangements.

6. First aid procedures

Any member of staff may provide simple immediate assistance within their competence, such as reassurance or applying a cold pack. Where an injury or illness requires assessment or treatment beyond this, an appropriately trained first aider should be called.

Staff administering first aid must follow current infection-control precautions, including effective hand hygiene and appropriate personal protective equipment when there is a risk of contact with blood or bodily fluids.

Where there is doubt about the seriousness of a child's condition, staff should seek advice from a trained first aider and, where appropriate, NHS 111 or the emergency services. A child who is seriously unwell or injured must not be left alone.

Detailed clinical first aid instructions are not reproduced in this policy. Trained staff must follow the procedures taught through their current accredited training and any instructions given by emergency healthcare professionals.

7. Medicines and emergency medication

The administration of medicines is managed in accordance with the school's Administration of Medicines and Supporting Pupils with Medical Conditions arrangements. Medication will only be administered where appropriate authorisation has been obtained and by staff who are competent and, where necessary, specifically trained.

Prescription medicines must normally be supplied in the original container, labelled with the child's name and prescribing instructions. Administration must be recorded accurately. The school will not make administration dependent on the member of staff also holding a general first aid qualification unless this is required for the particular medicine or emergency procedure.

Children who are competent to carry and use their own inhaler or other emergency medication may do so where this has been agreed with parents and reflected in their healthcare arrangements. Otherwise, emergency medication must be stored securely but remain readily accessible.

Any school-held non-prescription medicine will be managed under the school's medicines procedures, with appropriate parental consent and safeguards. Antihistamine must not be regarded as a substitute for adrenaline in the emergency treatment of anaphylaxis.

8. EYFS and Little Hearts Nursery

First aid arrangements for Little Hearts Nursery and the EYFS will meet the requirements of the statutory EYFS framework. The school will ensure appropriate paediatric first aid cover at all times when children are present and on outings.

Accidents, injuries and first aid treatment involving EYFS children will be recorded and parents/carers informed. The school will make any notification to Ofsted and/or other agencies required by the EYFS statutory framework following a serious accident, illness, injury or death. Whether a safeguarding referral is also required will depend on the circumstances.

9. Allergies, asthma and serious medical conditions

Sacred Heart will identify pupils with allergies, asthma and other serious medical conditions and ensure that relevant information is shared with staff who need it to keep the child safe. Where required, an IHP will be agreed with parents/carers and relevant healthcare professionals and reviewed at least annually or sooner if needs change.

The school will take reasonable steps to minimise exposure to known allergens and will ensure that pupils at risk of anaphylaxis and/or acute asthma have prompt access to their prescribed adrenaline auto-injectors and/or reliever inhalers. Staff will receive appropriate allergy awareness and emergency-response training.

Where the school holds spare adrenaline auto-injectors or emergency asthma inhalers, these will be obtained, stored, checked and used in accordance with current statutory guidance and the school's allergy and medical procedures. Expiry dates will be monitored.

Emergency medication must accompany pupils on educational visits, sports fixtures, swimming and other off-site activities. Risk assessments and trip planning must take account of individual medical needs. Serious allergy incidents and near misses will be reviewed so that lessons can be learned and risk controls strengthened.

10. Head injuries

All head injuries will be taken seriously. The child will be assessed and monitored by an appropriate member of staff, the incident will be recorded, and parents/carers will be informed. Parents will be contacted promptly where there are concerning symptoms or where the injury is more than trivial.

Emergency medical assistance must be sought where symptoms or the mechanism of injury indicate a potentially serious head injury, including loss of consciousness, seizure, deteriorating responsiveness, significant confusion, breathing difficulty, suspected spinal injury or other cause for serious concern. Staff will follow their current first aid training and emergency-service advice.

11. Educational visits, sport and off-site activities

First aid provision forms part of the risk assessment and planning for educational visits, sports fixtures, swimming and other off-site activities. The trip or activity leader must ensure that suitable first aid provision is available and that relevant medication, healthcare information and emergency contact arrangements accompany the group.

For EYFS outings, paediatric first aid cover will meet statutory requirements. For other groups, the level of first aid cover will be determined by the nature of the activity, the age and needs of the pupils, the location and access to emergency assistance.

12. Calling the emergency services

Staff must call 999 where a child, adult or visitor appears to have a serious or life-threatening illness or injury, or where urgent emergency medical assistance is otherwise required. Examples include severe breathing difficulty, anaphylaxis, unconsciousness or significantly reduced responsiveness, severe bleeding, a serious seizure, suspected serious head or spinal injury, or any other situation in which staff believe there is an immediate risk to life or serious harm.

Staff should not delay calling 999 while attempting to contact parents. Parents/carers must be informed as soon as practicable. Where a pupil is taken to hospital and a parent/carer is not yet present, an appropriate member of staff will accompany the pupil where practicable and remain until responsibility can be handed over.

13. Recording, reporting and parental notification

All accidents requiring first aid will be recorded on the school's designated recording system, including the date, time and location; the nature of the injury or illness; treatment or action taken; the name of the person providing first aid; and any communication with parents/carers.

Parents/carers will be informed of significant injuries, illness or treatment. For head injuries, the school will provide appropriate information about the incident and advise parents to seek medical advice if concerning symptoms develop.

The Headteacher or Bursar will consider whether an incident meets the legal threshold for reporting under RIDDOR. Most pupil accidents at school or on school trips are not RIDDOR-reportable; reporting depends on the circumstances and statutory criteria. Records required under RIDDOR will be retained for the legally required period.

A serious accident is not automatically a safeguarding referral. Where an incident raises a safeguarding concern, the school's Child Protection and Safeguarding Policy will be followed. EYFS notifications will be made where the statutory notification threshold is met.

14. AED arrangements

An automated external defibrillator (AED) is available on the wall of the Church building. Its location must be known to staff and it must remain accessible in an emergency.

The school will nominate a responsible person to carry out and record routine checks at the frequency recommended by the manufacturer, including readiness indicators and the expiry dates and condition of pads and batteries. Any defect or expired component must be addressed promptly. In an emergency, staff should call 999, commence CPR where required and use the AED in accordance with its spoken instructions.

15. Infection prevention and exclusion

The school follows current UKHSA health protection guidance for schools and early years settings. Detailed infection exclusion periods are not reproduced in this policy because national guidance is updated periodically.

Parents/carers should not send a child to school where the child is subject to a public-health exclusion period or is too unwell to participate safely in the school day. In particular, children with diarrhoea and/or vomiting should normally remain away from the setting until 48 hours after symptoms have stopped, subject to any different or additional advice for a diagnosed infection.

The school will seek advice from the local UKHSA Health Protection Team where national guidance recommends this, including in relation to outbreaks or specified infectious diseases.

16. Training, monitoring and review

First aid arrangements will be monitored through the first aid needs assessment, accident and incident records, training records, checks of equipment and emergency medication, and review of significant incidents and near misses.

This policy will be reviewed annually and sooner where there is a significant change in statutory guidance, school provision, pupil need or following a serious incident. The current register of first aiders and operational contact information will be maintained separately so that changes can be made promptly without waiting for a formal policy review.

Key external guidance

- Department for Education: First aid in schools, early years and further education.
- Department for Education: Supporting pupils at school with medical conditions.
- Department for Education: Allergy safety in schools statutory guidance (June 2026).
- UK Health Security Agency: Public health exclusion periods in children and young people's settings (updated July 2026).
- Health and Safety Executive: Incident reporting in schools and RIDDOR guidance.