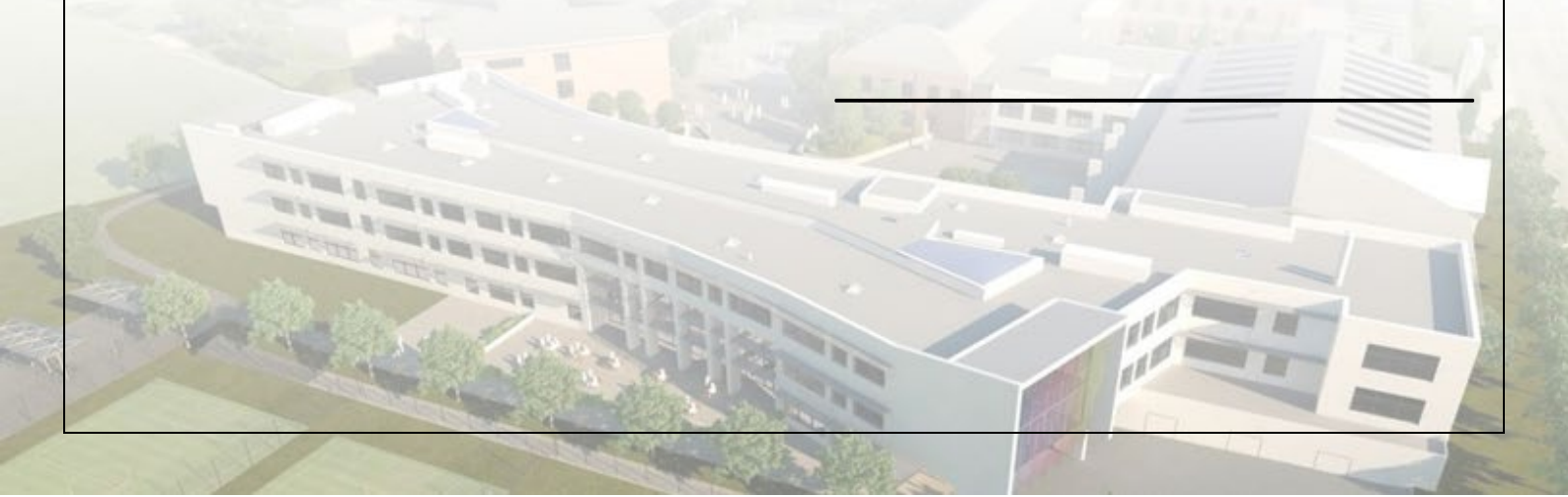
THE SYDNEY RUSSELL SCHOOL

FIRST AID POLICY
Reviewed September 2026
26/27

Dr J. Porter



First Aid Policy

1. Aims

The aims of our first aid policy are to:

- Ensure the health and safety of all staff, pupils and visitors
- Ensure that staff are aware of their responsibilities with regards to first aid
- Provide a process for responding to an incident and recording and reporting the outcomes

2. Roles and responsibilities

2.1 Appointed person(s) and first aiders

First aiders are responsible for:

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

- Acting as first responders to any incidents; they will assess the situation where there is an injured or ill person, and provide immediate and appropriate treatment
- Sending pupils home to recover, where necessary
- Filling in an accident report on the same day, or as soon as is reasonably practicable, after an incident.

2.3 The Principal

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

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

2.4 Staff

School staff are responsible for:

- Ensuring they follow first aid procedures
- Ensuring the first aid proforma is completed before sending a student to first aid

- Ensuring 'first aid calling' is implemented before sending students to first aid
- Ensuring they know who the first aiders in school are
- Providing details for the completion of accident reports, for all incidents they attend to.
- Informing the Business Leader of any specific health conditions or first aid needs

3. First aid procedures

3.1 In-school procedures

In the event of an accident resulting in injury:

- The closest member of staff present will assess the seriousness of the injury and seek the assistance of the Student Marshall Team (who are first aid trained and the main point of contact for first aid requirements), if appropriate, who will provide the required first aid treatment
- The first aider, will assess the injury and decide if further assistance is needed from the Manager of LSC (Heidi Brien) or the emergency services. They will remain on scene until help arrives
- The first aider will also decide whether the injured person should be moved or placed in a recovery position
- If the first aider judges that a pupil is too unwell to remain in school, parents will be contacted and asked to collect their child.
- If emergency services are called, the LSC Team will contact parents immediately
- The relevant member of staff will complete an accident report form on the same day or as soon as is reasonably practical after an incident resulting in an injury

3.2 Off-site procedures

When taking pupils off the school premises, staff will ensure they always have the following:

- A mobile phone
- A portable first aid kit
- Information about the specific medical needs of pupils
- Access to parents' contact details
- Risk assessments will be completed by the lead member of staff prior to any educational visit that necessitates taking pupils off school premises.
- There will always be at least one first aider with a current first aid certificate on school trips and visits.

4. First aid equipment

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

Antiseptic wipes
Bandages
Disposable gloves
Gauzes
Ice packs
Plasters
Sick bags
thermometer

Scissors
Triangle bandage
Burn gel or burn spray
Face shield
Steri-Strips
Hot pack
Eye washer
Plastic tweezers

No medication is kept in first aid kits.

First aid kits are stored in:

- The Reception area (Secondary)
- LSC (Secondary)
- PE Office (Secondary)
- First Aid Cupboard (Primary)

Defibrillators are available on both Primary and Secondary sites.
Primary – main reception and canteen
Secondary – main reception and LSC

Bleed out kits are available on both sites from main reception.

Information regarding defibrillators and bleed out kits are logged with emergency services.

5. Record-keeping and reporting

5.1 First aid and accident record book

- All accident/incidents are recorded on Medical Tracker, if the injury needs only very minor first aid- a wipe, cold compress, plaster or ice pack for a short time
- An accident form is completed by the relevant member of staff on the same day or as soon as possible after an incident resulting in an injury (see accident form process)
- As much detail as possible should be supplied when reporting an accident
- A copy of the accident report form will be sent to Partnership Learning Trust and a copy retained on the school file
- The Trust are responsible for RIDDOR compliance

5.3 Notifying parents

Secondary site – LSC staff will inform parents of any accident or injury sustained by a pupil.

Primary site - The reception team will inform parents of any accident or injury sustained by a pupil.

6. Off-site procedures

When taking student off the school premises, staff will ensure they always have the following:

- School mobile phone
- First-aid kit that should include the same items as the first aid kit kept in school.
- Information on specific medical needs of all students.
- Parents contact details
- Completed Risk Assessment of the venue/location where the students are visiting.
- First aid qualified member of staff.

7. Benedict's law

It is compulsory for all staff to be trained in allergy awareness and emergency response.

- There are spare emergency EpiPens and inhalers stored in the first aid room within LSC on secondary site and within first aid room on primary site. These can be used on any child who is have a reaction.
- Full details are provided in the Asthma & Allergy policy

APPENDIX 1
BODY FLUID SPILLAGE

Body Fluid Spillage Policy Blood and body fluids (e.g. faeces, vomit, saliva, urine, nasal and eye discharge) may contain viruses or bacteria capable of causing disease. It is therefore vital to protect both yourself and others from the risk of cross infection. In order to minimize the risk of transmission of infection both staff and pupils should practice good personal hygiene and be aware of the procedure for dealing with body spillages.

- Treat all blood and body fluids as being potentially infectious
- Wash hands, cover cuts or open lesions on exposed areas of the body with a waterproof plaster and put on your protective gloves/disposable apron prior to cleaning up or handling any body fluids or contaminated items and nappies
- Protect eyes, nose and mouth from being splashed with body fluids (consider the use of face visor - Personal Protective Equipment (PPE) e.g. when jetting out Schmitt/Johnsons or hosing down blood/body fluids
- Remove disposable PPE (remove by pulling inside out to contain any body fluids) and double bag for disposal
- Thorough washing and drying of hands after dealing with blood, other body fluid secretions, using the toilet and before handling food.

References:
This document is to be used in conjunction with:

- The Health and Safety policy.
- Health Protection Agency guidelines on Infection Control. Up to date versions available on the internet.

Staff Contact:

- Please contact caretakers initially so that they can arrange for a member of his team to clean the area appropriately.
- The initial covering up of the situation should be carried out by the person(s) who is at the scene of the incident.

Clean up procedure:

- Ensure disposable gloves are used.
- Place absorbent towels over the affected area and allow the spill to absorb. Wipe up the spill using these and then place in a bin (which has a bin liner).
- The bin that has had the soiled paper towels put in, then needs to be tied up and ideally placed in the yellow bin or double bagged and put in an outside bin.
- Any article of clothing that has got contaminated with the spill should be placed in a plastic bag and tied up for the parents to take home.
- The area then needs to be cordoned off until cleaned
- If the spillage has been quite extensive then the area may need to be closed off until the area can be cleaned correctly.

Needles

Wherever possible avoid hand contact with needles. Collect the needle by using a litter picker, lifting it away from you and into a sharps box. If such equipment is not readily available, think of other alternatives accessible to you e.g. tongs, dustpan/brush and safe receptacle that won't puncture easily e.g. jar/lid or metal can.

Action and support after possible infection with a BBV

If you have sustained a needle stick injury or contaminated with blood or other body fluids, take the following action without delay:

- wash splashes off your skin with soap and running water
- if your skin is broken, encourage the wound to bleed, do not suck the wound – rinse thoroughly under running water
- wash out splashes in your eyes using tap water or an eye wash bottle, and your nose or mouth with plenty of tap water – do not swallow the water;
- record the source of contamination
- report the incident to your supervisor, line manager, Head Teacher and Occupational Health, Safety and Wellbeing as prompt medical advice is important and you should have access to speedy support, advice and reassurance. The circumstances of the incident need to be assessed and consideration given to any medical treatment required.

Treatment may be required following infection with a blood borne virus, but to be effective, it may need to be started quickly, you should attend Queens's hospital (nearest) Accident and Emergency department for advice, without delay.

Blood and other body fluid spillage

- Gloves to be worn at all times
- Any soiled wipes, tissues, plasters, dressings etc must ideally be disposed of in the clinical waste bin (Yellow bag). If not available then the glove being used needs to be taken off inside out so that the soiled item is contained within and placed in a bin which is regularly emptied.
- When dealing with a spillage, absorbent paper hand towels need to be place on the affected area so absorbing the spill.
- The area must be cleaned with disinfectant following the manufacturer's instructions.
- A 'Wet Floor Hazard' sign then needs to be put by the affected area.
- The area should then be ventilated well and left to dry.
- All reusable cleaning up equipment then needs to be appropriately disinfected according to the manufacturer's instructions.
- Wash hands.
- All yellow bags to be disposed of in Yellow bins as the school could potentially be fined if not adhered to.

Management of Accidental Exposure to Blood

- Accidental exposure to blood and other body fluids can occur by:
- Percutaneous injury e.g. from needles, significant bites that break the skin.
- Exposure to broken skin e.g. abrasions and grazes.
- Exposure of mucous membranes, including the eyes and mouth.

Action to Take

- If broken skin encourage bleeding of the wound by applying pressure.
- Wash thoroughly under running water.
- Dry and apply a waterproof dressing.
- If blood and body fluids splash into your mouth – do not swallow.
- Rinse out mouth several times.
- Report the incident to Senior Management.
- If necessary take further advice from NHS Direct.
- An accident form will need to be completed and it may need to be reported to RIDDOR.

Kit Required
It is recommended that all items needed for cleaning spillages of blood or body fluids are kept together in a designated and secure workplace/school area, to which all trained employees have access.
A spillage kit typically includes:

- disposable plastic apron
- disposable non latex gloves
- sterile eye wash/wipes (for those employees who work out in community and do not have access to running water)
- disposable shoe/boot protector (to prevent body fluids trapped in soles contaminating surfaces)
- clinical waste bags
- detergent
- disposable paper towels
- disinfectant /blood spill products
- plastic bucket/bowl/scoop
- when cleaning up blood, mops with disposable heads (for discarding via clinical waste) should be used because of the contamination risk of BBVs. Mops used to clean up other small body fluid spillages should be washable type and cleaned in cleaning equipment sink (not a kitchen sink), rinsed with a disinfecting solution and dried with mop head upwards.

Updated September 2026 - Tmj

Appendix 2
Sharps

For the purpose of this policy the term “sharps” includes items such as needles, scalpels, razor blades, broken glass and any other sharp items that may cause a penetrating injury, laceration or puncture to the skin.

The use and disposal of medical sharps The Sharps Regulations follow the principles of the hierarchy of preventative control measures, set out in the Control of Substances Hazardous to Health Regulations (COSHH).

Safe use of Sharps

- Always use sharps containers with British Standards BS 7320.
- Never fill the sharps bin more than ¾ full. If using sharps smart bins, automatic closure will occur when the bin is full.
- Damaged sharps containers should not be used. Under no circumstances must the contents of one sharps container be decanted into another container.
- Never leave a sharps protruding from the bin.
- Always wear appropriate PPE when handling sharps.
- Sharps bins must be kept away from students and staff. Sharps containers must be located in a safe and secure area.
- Containers should be out of the reach of children. Containers must be at a safe working height and secured so they cannot be tipped over. When not in use places the lid of the container in the temporary closure position.
- The person using the sharps must dispose of them into a sharps box immediately after and at the point of use. Never leave them for someone else to clear away.

Staff Responsibility

- Never bend or break needles after use.
- Do not disassemble needs from syringes or other devices wherever possible.

Disposing of sharps

- Ensure any sharps are placed in the bin immediately after use
- Do not leave used sharps out for others to tidy away

7. Members of staff who hold first aid qualification:

Name	Course	Site	Date completed	Date expires
Adam Guzda	Paediatric First Aid	Secondary	Nov-24	Nov-27
Alice Porter	Paediatric First Aid	Secondary	Jun-24	Jun-27
Amanda Robertson	Paediatric First Aid	Secondary	Nov-24	Nov-27
Amy Jones	Paediatric First Aid	Secondary	Nov-24	Nov-27
Andrea Kurcinova	Paediatric First Aid	Primary	Sep-25	Aug-28
Anita Haslett	Paediatric First Aid	Secondary	Feb-26	Feb-29
Aysha Begum	Paediatric First Aid	Primary	Feb-26	Feb-29
Brinda Kookaloo	Emergency First Aid at Work	Secondary	Sep-26	Sep-29
Carla Watts	Paediatric First Aid	Primary	Nov-24	Nov-27
Carly Bartle	Paediatric First Aid	Primary	Sep-25	Aug-28
Caroline Ezzat	Paediatric First Aid	Secondary	Nov-24	Nov-27
Chantelle Gilroy	Paediatric First Aid	Primary	Sep-25	Aug-28
Charlene Richardson	Paediatric First Aid	Primary	Nov-24	Nov-27
Charlie Walsh	Paediatric First Aid	Secondary	Nov-24	Nov-27
Charlotte Demosthenous	Paediatric First Aid	Secondary	Sep-25	Aug-28
Charlotte McEvoy	Paediatric First Aid	Secondary	Oct-23	Oct-26
Charlotte Goddard	Paediatric First Aid	Secondary	Nov-24	Nov-27
Christopher Dunne	Paediatric First Aid	Secondary	Sep-25	Aug-28
Danielle Kemp	Paediatric First Aid	Secondary	Sep-25	Aug-28
Donna O'Connor	Paediatric First Aid	Primary	Sep-25	Aug-28
Edward Dovey	Paediatric First Aid	Secondary	Nov-24	Nov-27
Elizabeth Allen	Paediatric First Aid	Secondary	Sep-25	Aug-28
Elizabeth Timney	Paediatric First Aid	Secondary	Sep-25	Aug-28
Ellis Ashworth	Paediatric First Aid	Secondary	Nov-24	Nov-27
Emilio Navarro Cobos	Paediatric First Aid	Secondary	Nov-24	Nov-27
Farah Wahid	Paediatric First Aid	Primary	Feb-26	Feb-29
Fariha Ahad	Paediatric First Aid	Secondary	Sep-25	Aug-28
Floransa Ratkoceri	Paediatric First Aid	Secondary	Mar-25	Mar-28
Florida Pepi-Goxhabelli	Paediatric First Aid	Primary	Feb-26	Feb-29
Florije Lamcja	Paediatric First Aid	Primary	Jan-24	Jan-27
Gavin Home	Paediatric First Aid	Secondary	Nov-24	Nov-27
George Greene	Paediatric First Aid	Secondary	Feb-26	Feb-29
Heidi Brien	Paediatric First Aid	Secondary	Feb-26	Feb-29
Helna Ivos	Paediatric First Aid	Secondary	Feb-26	Feb-29
Jamilah Ahmed	Paediatric First Aid	Primary	Jan-24	Jan-27
Jennifer Stock	Paediatric First Aid	Secondary/Primary	Feb-26	Feb-29
Joanne Hubbard	Paediatric First Aid	Secondary	Sep-25	Aug-28

Jodie Maddocks	Paediatric First Aid	Primary	Nov-24	Nov-27
Jomuna Begum	Paediatric First Aid	Primary	Sep-25	Aug-28
Keisha Okwesia	Paediatric First Aid	Secondary	Nov-24	Nov-27
Kenzi Fowell	Paediatric First Aid	Secondary	Nov-24	Nov-27
Kerry Joyce	Paediatric First Aid	Secondary	Feb-26	Feb-29
Kim Matson	Paediatric First Aid	Primary	Nov-24	Nov-27
Leah Dodson	Paediatric First Aid	Secondary	Nov-24	Nov-27
Leah Lemoual	Paediatric First Aid	Primary	Nov-24	Nov-27
Lianne Dickle	Paediatric First Aid	Primary	Jan-24	Jan-27
Lisa Clarke	Paediatric First Aid	Secondary	Feb-26	Feb-29
Lucy Ludlow	Paediatric First Aid	Secondary	Nov-24	Nov-27
Ludmilla Cazac	Paediatric First Aid	Primary	Nov-24	Nov-27
Lynn Williams	Paediatric First Aid	Secondary	Feb-26	Feb-29
Mamoona Butt	Paediatric First Aid	Primary	Sep-25	Aug-28
Marc Amato	Paediatric First Aid	Secondary	Nov-24	Nov-27
Maria Crafer	Paediatric First Aid	Primary	Nov-24	Nov-27
Matthew Mitchell	Paediatric First Aid	Secondary	Jan-24	Jan-27
Matthew Vieira	Paediatric First Aid	Secondary	Nov-24	Nov-27
Megan Boughen	Paediatric First Aid	Primary	Jan-24	Jan-27
Melissa Carter	Paediatric First Aid	Secondary	Nov-24	Nov-27
Michael Sands	Paediatric First Aid	Secondary	Sep-25	Aug-28
Mihaela Bratescu	Paediatric First Aid	Primary	Nov-24	Nov-27
Mihaela Preda	Paediatric First Aid	Primary	Sep-25	Aug-28
Mousumi Rizvi	Paediatric First Aid	Secondary	Sep-25	Aug-28
Nasima Lebony	Paediatric First Aid	Primary	Feb-26	Feb-29
Nasir Uddin	Paediatric First Aid	Secondary	Nov-24	Nov-27
Natalia Irfan	Paediatric First Aid	Primary	Sep-25	Aug-28
Nathaniel Blythe	Paediatric First Aid	Secondary	Sep-25	Aug-28
Neelam Khan	Paediatric First Aid	Primary	Sep-25	Aug-28
Nicole Ryan	Paediatric First Aid	Secondary	Nov-24	Nov-27
Nizam Malji	Paediatric First Aid	Secondary	Nov-24	Nov-27
Nyeem Ali	Paediatric First Aid	Primary	Jan-24	Jan-27
Olivia Goode	Paediatric First Aid	Secondary	Nov-24	Nov-27
Owen Dodd	Paediatric First Aid	Secondary	Feb-26	Feb-29
Regia Khaled Chowdhury	Paediatric First Aid	Primary	Sep-25	Aug-28
Rehana Chitbahal	Paediatric First Aid	Secondary	Sep-25	Aug-28
Rejeya Begum	Paediatric First Aid	Primary	Feb-26	Feb-29
Rodney Mubira	Paediatric First Aid	Secondary	Sep-25	Aug-28
Rosana Antunes	Paediatric First Aid	Secondary	Nov-24	Nov-27
Rowan Newland	Paediatric First Aid	Secondary	Nov-24	Nov-27
Ruchika Singh	Paediatric First Aid	Primary	Feb-26	Feb-29
Ruxandra Ali	Paediatric First Aid	Primary	Feb-26	Feb-29

Sadia Hussain	Paediatric First Aid	Primary	Sep-25	Aug-28
Saima Rehman	Paediatric First Aid	Primary	Nov-24	Nov-27
Sarah Dodds	Paediatric First Aid	Primary	Nov-24	Nov-27
Sarah Swainsbury	Paediatric First Aid	Primary	Nov-24	Nov-27
Saudatu Musah	Paediatric First Aid	Primary	Nov-24	Nov-27
Selvana Vato	Paediatric First Aid	Primary	Feb-26	Feb-29
Shaneil Dodd	Paediatric First Aid	Secondary	Sep-25	Aug-28
Sophie Long	Paediatric First Aid	Secondary	Nov-24	Nov-27
Sultana Razia Zaman	Paediatric First Aid	Secondary	Sep-25	Aug-28
Susan Goodwin	Paediatric First Aid	Secondary	Feb-26	Feb-29
Susan Wright	Paediatric First Aid	Secondary	Nov-24	Nov-27
Suzanne Carter	Paediatric First Aid	Primary	Nov-24	Nov-27
Thomas Ghouse	Paediatric First Aid	Secondary	Nov-24	Nov-27
Thomas Hall	Paediatric First Aid	Secondary	Nov-24	Nov-27
Trudy Bolt	Paediatric First Aid	Secondary	Feb-26	Feb-29
Victoria Barnes	Paediatric First Aid	Secondary	Sep-25	Aug-28
Yasmin Ahmed	Paediatric First Aid	Secondary	Nov-24	Nov-27
Zahira Rapati	Paediatric First Aid	Primary	Sep-25	Aug-28