



First Aid Policy

23 October 2026

About This Document

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History

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1.0	7 Sep - 2018	School Governors	Approved and adopted.
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1.5	23 Oct - 2026	René Esterhuizen, Headteacher	Reviewed, no changes.

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1. Introduction

- 1.1. The First Aid procedure at The Vine Christian School is in operation to ensure that every student, member of staff and visitors will be well looked after in the event of an accident, no matter how minor or major.
- 1.2. It is emphasised that the team consists of qualified First Aiders and not trained doctors or nurses.
- 1.3. In the event of an accident all members of the school community should be aware of the support available and the procedures available to activate this.
- 1.4. Our First Aiders are:
 - i. Mrs Nadine Van der Merwe, St. Johns ambulance First aid at work trained, and paediatric trained.
 - ii. Mr Bob Wheeler, St. Johns ambulance First aid at work trained.
 - iii. Mrs Sarah Neale, St. Johns ambulance First aid at work trained.
- 1.5. The First Aid area, along with a first aid kit for administering First Aid can be found in the First Aid room.
- 1.6. All staff who are trained in First Aid in the workplace are clearly identified in the school.
- 1.7. The purpose of the Policy is:
 - i. To provide effective, safe First Aid cover for students, staff, and visitors.
 - ii. To ensure that all staff and students are aware of the system in place.
 - iii. To provide awareness of Health & Safety issues within the school and on school trips, to prevent, where possible, potential dangers or accidents.
 - iv. The term FIRST AIDER refers to those members of the school community who are in possession of a valid First Aid at work certificate or equivalent.

2. Statement of General Policy

- 2.1. To record all accidents and injuries in the accident book.
- 2.2. To inform parents and guardians of serious injuries or accidents.
- 2.3. Medicine will only be administered with the parent's permission.
- 2.4. First aid supplies will be taken on all educational visits.
- 2.5. Regular staff training will be provided every three years.
- 2.6. To ensure that we have parental permission before administering emergency first aid.
- 2.7. To have at least one staff member fully qualified in Paediatric First Aid.
- 2.8. First Aiders will:
 - i. Ensure that their qualification and insurance [provided by the school] are always up to date.
 - ii. Ensure that first aid cover is available throughout the working hours of the school week.

- iii. Always attend a casualty when requested to do so and treat the casualty to the best of their ability in the safest way possible. This includes wearing gloves where any loss of blood or body fluid is evident, calling for help from other First Aiders or Emergency Services.
 - a) Help fellow First Aiders at an incident and provide support during the aftermath.
 - b) Act as a person who can be relied upon to help when the need arises.
 - iv. Ensure that the portable first aid kit (located in the school office) is wellstocked.
 - v. Insist that any casualty who has sustained a significant head injury is seen by professionals at the hospital, either by sending them directly to hospital or by asking parents to pick up a child to take them to hospital, ensure that parents are aware of all head injuries promptly.
 - a) Ensure that a child who is sent to hospital by ambulance is either:
 - b) Accompanied in the ambulance at the request of paramedics.
 - c) Followed to a hospital by a member of staff to act in loco parentis if a relative cannot be contacted.
 - d) Met at hospital by a relative.
 - vi. The First Aider need not be the member of staff to accompany the casualty to hospital, however, an appropriate person should be sent.
 - vii. Liaison must occur with the teacher in charge of cover, to ensure that lessons are covered in the event of an absent teacher.
 - viii. A record must be kept of each student attended to, the nature of the injury and any treatment given, in the book provided by the First Aid cabinet in the school office. In the case of an accident, the Accident Book must be completed by the appropriate person.
 - ix. Ensure that everything is cleared away, using gloves, and every dressing etc. be put in a yellow bag for contaminated/used items and sealed tightly before disposing of the bag in a bin. Any bloodstains on the ground must be washed away thoroughly. No contaminated or used items should be left lying around.
- 2.9. The Governors Will:
 - i. Provide adequate First Aid cover as outlined in the Health & Safety [First Aid] Regulations 1981.
 - ii. Monitor and respond to all matters relating to the health and safety of all persons on school premises.
- 2.10. The Head Teacher Will:
 - i. Ensure that they always obtain the history relating to a student not feeling well, particularly in the cases of headaches, to ensure that no injury has caused the student to feel unwell.
 - ii. Ensure that if an injury has caused a problem, the student must be referred to a First Aider for examination.
 - iii. At the start of each academic year, provide the first aid team with a list of students who are known to be asthmatic, anaphylactic, diabetic, or epileptic or have any other serious illness.
 - iv. Have a file of up-to-date medical consent forms for every student in each year and ensure that these are readily available for staff responsible for school trips/outings.

- v. Ensure all new staff are made aware of First Aid procedures in school.

2.11. Supervisors And Monitors Will:

- i. Familiarise themselves with the first aid procedures in operation and ensure that they know who the current First Aiders are.
- ii. Be aware of specific medical details of individual students when publicised by the Head Teacher.
- iii. Ensure that their students are aware of the procedures in operation.
- iv. Never move a casualty until they have been assessed by a qualified First Aider unless the casualty is in immediate danger.
- v. Send for help to Reception as soon as possible either by a person or telephone, ensuring that the messenger knows the precise location of the casualty. Where possible, confirmation that the message has been received must be obtained.
- vi. Reassure, until a First Aider arrives at the scene.
- vii. Send a student who has minor injuries to the medical area if they are able to walk where a First Aider will see them, this student should be accompanied.
- viii. Send a student who feels generally 'unwell' to their respective Supervisor and not to a First Aider, unless their deterioration seems uncharacteristic and is causing concern.
- ix. Ensure that they have a current medical consent form for every student that they take out on a school trip which indicates any specific conditions or medications of which they should be aware.
- x. Have regard to personal safety.

2.12. Office Staff Will:

- i. Call for a qualified First Aider, unless they are one themselves, to treat any injured student. This should be done by mobile telephone giving the specific location of the casualty.
- ii. Support the First Aiders in calling for an ambulance or contacting relatives in an emergency.
 - a) Send students who simply do not feel well to their respective Supervisor.
 - b) NOT administer paracetamol or other medications without prior consent from parents

3. General Procedures

- 3.1. Plastic gloves are to be worn when dealing with all incidents.
- 3.2. Cuts are cleaned using, where appropriate running water and/ or alcohol wipes and if needed, plasters are available.
- 3.3. Bloods/soiled dressing and used gloves should be disposed of appropriately.
- 3.4. Minor incidents and accidents should be dealt with, wounds cleaned etc., and the child returned to the playground when possible and practical.

- 3.5. Any incident that has required First Aid treatment by a qualified First Aider should be recorded in the Accident Record book and parents informed if necessary. The class teacher should be informed.
- 3.6. Ice packs are available to be used to reduce the swelling for bumps and suspected strains and sprains or alternatively a cold compress. If ice packs are used, then these are first wrapped in a paper towel to prevent contact with the skin.
- 3.7. Injured/poorly pupils must never be left alone or sent alone for help.
- 3.8. The first aid equipment is regularly checked and managed by the First Aid Officer.

4. Head Injuries

- 4.1. Parents to be informed either by letter at the end of the day or by telephone. A head injury must be dealt with by a Senior First Aider who is responsible for making the decision to ring parents.
- 4.2. The child must always keep the letter visible so that teachers and assistants know of the injury.
- 4.3. If a parent has been contacted by telephone, they will be encouraged to collect their child from school and seek further advice either from a doctor or accident and emergency department.
- 4.4. Details are recorded in the Accident book. The class teacher should always be informed.

5. Precautions for Offsite Activities

- 5.1. Staff involved with any off-site activities must take a First Aid box. A person trained in First Aid should accompany the children on the visit. First Aid should also be an essential element of informing the risk assessment for the visit.
- 5.2. It is the responsibility of the staff member in charge to take a first aid box with them on the visit and they will also carry any medication needed for individual children. Prior to any residential visit taking place medical forms will be completed by the parents/carer of all pupils. This will allow the school to consider what reasonable adjustments may need to be made to enable young people with medical needs to participate fully and safely on visits.
- 5.3. Arrangements for taking any necessary medicines will need to be taken into consideration. Staff supervising excursions will always be aware of the medical needs and relevant emergency procedures of pupils in their care. Copies of medical forms for children with specific needs will be taken on the visit. Other information can be obtained by contacting the school. Staff will always carry mobile phones for emergency use.
- 5.4. If staff are concerned about whether they can provide for a young person's safety, or the safety of others, on a visit, the school will seek parental views and medical advice from the school health service and/or the young person's GP, Specialist Nurse or Hospital Consultant. Prior to a visit medication should be handed to the first aider by parents/ carers.
- 5.5. Following the visit, the first aider will hand back any medication to the child's parent. (Medication should not be handed back to the child).

6. Hospital Treatment

- 6.1. If a child needs hospital treatment in a non-urgent situation, the parent will be contacted to accompany the child to hospital. If the parent cannot be contacted, then permission must be given by a Senior First Aider to ring for a taxi and a first aider accompany the child in the back of a taxi. A Senior First Aider must always be left in school. Every attempt to contact the parents will be made by the school. Should parents be unable to be contacted the relevant member of staff, usually the Headteacher, or in her absence the other Senior First Aider, will act on the parent's behalf, providing parents have signed consent forms to this effect. Consent forms will be signed prior to a child's admission to the school.

7. Ambulance Emergency

- 7.1. In an emergency a Senior First Aider must be informed, a person trained in first aid must attend to the casualty and an ambulance called for without delay. The parents/carers will then be contacted. A member of staff must then accompany the child to hospital and wait for the parents to arrive. A Senior First Aider must always be left in school. Every attempt to contact the parents will be made by the school. Should parents be unable to be contacted the relevant member of staff, usually the Headteacher, or in her absence the other Senior First Aider, will act on the parent's behalf, providing parents have signed consent forms to this effect. Consent forms will be signed prior to a child's admission to the school.

8. Hygiene Control Guidelines

- 8.1. It is advisable to follow the Hygiene Control Guidelines recommended by the DfE listed below in all instances to provide protection against a range of infections to which staff in schools may be exposed. The following is a basic hygiene procedure which should be put into operation in all instances against a range of infections which members of the school community may be exposed to:
- 8.2. Personal Hygiene
- i. Toothbrushes or other implements which could become contaminated with blood must not be shared.
 - ii. Minor cuts, open or weeping skin lesions and abrasions should be covered with a suitable dressing.
 - iii. Sanitary towels and tampons should be placed in the disposal bins provided.
 - iv. Hands are to be washed with soap after going to the toilet and before food. Hand sanitizers will be provided for use by all members of the school community. Separate cleaning equipment is to be used for toilets.
- 8.3. Accidents Involving External Bleeding/Bodily fluids
- i. Normal First Aid procedures should be followed, which should include the use of disposable gloves.
 - ii. Wash the wound immediately and copiously with water. Apply a suitable sterile dressing and pressure pad if needed.

- iii. Cotton Wool should not be used in cleaning wounds since it is not sterile and could cause infection.
- iv. As soon as possible seek medical advice should the bleeding continue.
- v. Splashes of blood from one person to another.
- vi. Splashes of blood on the skin should be washed off immediately with soap and water. Splashes of blood into the eyes or mouth should be washed out immediately with copious amounts of water.
- vii. After accidents resulting in bleeding, contaminated surfaces, e.g., tables or furniture should be disinfected. Separate cleaning equipment is to be used.

9. Administration Of Medicines

- 9.1. Please read the Medication Policy alongside this document.

10. Reporting of Injuries Diseases and Dangerous Occurrences

- 10.1. We will report work-related accidents, diseases, and dangerous occurrences according to the regulations relating to RIDDOR. Full details of all occurrences which need to be reported may be found in the Health and Safety file in the office.