Inspiring • Discovering • Believing

Osbaston Church in Wales School

First Aid Policy

(linked to Supporting Learners with Healthcare Needs and Asthma Policies)

Policy Name	FIRST AID
Policy owner	SCHOOL STAFF
Policy agreed	September 2026
Policy review date	September 2027

First Aid Policy

This is the statement of First Aid Policy and arrangements for Osbaston Church in Wales School ("the school")

In the event of injury or medical emergency at Osbaston Church in Wales School, there will be an appointed First Aider or other member of the school staff to assist.

Responsibilities

The Head teacher is responsible for ensuring there is an adequate number of qualified First Aiders

At present we have designated First Aiders:

The following staff member was trained in Emergency First Aid Level 3 in January 2026:

Mrs Shelley Tokar (Deputy Head teacher)

The following staff were trained in Paediatric First Aid (October 2023)

Mrs Caroline Hughes (Class Teacher)

Mrs Nicola Beavan (Lower School Leader)

Mr Mike Marley (Class Teacher)

Mrs Clare Cooper (Class Teacher)

Mrs Emma Wilce (Class Teacher)

Mrs Catherine Baggott (Class Teacher)

Ms Deb Morgan (PPA Teacher)

Mrs Jessica Kift (Administrator)

The following staff completed Paediatric First Aid (May 2024)

Ms Donna Cole (Class Teacher)

Miss Ceri Morgan (Teaching Assistant)

Mrs Debbie Fuse (Teaching Assistant)

Mrs Lisa Dunn (Teacher)

Mrs Sarah Biggs (Teaching Assistant)

Purpose:

- To preserve life
- To limit worsening of the condition
- To promote recovery
- To provide first aid as necessary from trained adults
- To promote health and safety awareness on children and adults, in order to prevent first aid being necessary
- To encourage every child and adult to begin to take responsibility for their own health needs

First Aid Provision

Portable First Aid kits are taken on educational visits and are available from the School Offices in both buildings

Mrs Jessica Kift and Miss Ceri Morgan will ensure the maintenance of the contents of the first aid boxes, portable 'bum bags' and other medical supplies

Staff will be trained in aspects of First Aid deemed necessary; asthma, epilepsy, diabetes, allergies, anaphylactic shock

All staff will ensure they have read the school's First Aid Policy

First Aid Boxes

First Aid boxes are located on both sites at Osbaston Church in Wales School:

Upper School Building

First Aid room behind the school office

Portable kit is located in the office and in classrooms and is taken outside by dinner supervisors

Lower School Building

The First Aid box and portable kits are located in the Disabled Toilet and in the Reception WC Cupboard.

First aid boxes should contain: individually wrapped sterile wound dressings (small, medium, large), triangular bandage, micro pore tape, gloves, bandage, sterile wipes, plasters.

No medicines or tablets are to be kept in the first aid boxes.

First Aid Procedures:

In school:

- In the event of injury or emergency, if possible contact the designated First Aider(s) or other member of staff.
- Any pupil complaining of illness or injury is sent with a peer to the staff room for the First Aider to inspect, and where appropriate treat.
- Parents are contacted if there are any doubts or concerns over the health of welfare of a pupil.
- Pupils receiving a bump to the head or a more serious graze or bump are given a medical form to take home to inform their parents of the injury.
- Incidents are recorded in the First Aid accident book.
- If the situation is life threatening, an ambulance should be called at the earliest opportunity without waiting for the designated first aider(s)/ parents to arrive
- No member of staff or volunteer helper should administer first aid unless he or she has received proper training, except in the case of minor cuts and grazes.
- For their own protection and protection of the patient, staff administering first aid should wear disposable gloves at all times. Hands should be washed before and after administering first aid.

- All serious incidents, including head bumps should be reported to the Head teacher or First Aider, who should call an ambulance and the child's parent(s) as soon as possible. Contact numbers are located in the school offices.
- In the event of a serious incident and an ambulance is called, a member of staff will accompany the child to the hospital. Parents are asked to immediately go to the hospital. It may be appropriate to transport a pupil to hospital without calling an ambulance. This should be on a voluntary basis and will be a senior member of staff accompanied by a teaching assistant. In such cases, staff should ensure they have specific cover on their car insurance policy.
- If staff are concerned about the welfare of a pupil, they should contact other members of staff immediately. If an injury has been sustained, the pupil should not be moved and other children will need to be moved instead.

Out of school:

- Teachers must take a mobile telephone with them on trips out of school. Older pupils with inhalers are reminded to carry their own inhaler and this is checked by the teacher. School staff will carry inhalers belonging to younger learners.
- If leaving the site, teachers must take a portable first aid kit.
- A Risk Assessment will need to be carried out and the relevant form completed. In the case of an overnight stay or an activity involving hazardous activities, the LA will need to be informed and the risk assessment passed.

Incident Reporting:

- Incidents, injuries, ailments and treatment requiring a need for first aid are reported in the accident book kept in the school offices.
- Parents are informed of a head bump or injury by letter or phone call for collection if serious and there is a possibility of concussion. The

letter outlines the injury and symptoms to look out for. The Head teacher is always informed of a head injury.

- First Aiders should contact parents if they have concerns about the injury.
- If a child/ adult falls and breaks a bone, a RIDDOR form must be completed and sent to the LA.
- Staff should complete the accident book if they sustain an injury at work and all other staff should be informed.

Any injured members of staff or other supervising adults should not continue to work if there is any possibility that further medical treatment is necessary. The member of staff/ other supervising adult should seek medical advice without delay.

Staff and pupils should be able to respond to any emergency situation in a calm/organised manner.

Accidents to pupils on the playground

1. The duty teacher will determine whether an injured child needs to be sent inside for minor first aid.
2. CHILDREN MUST NOT BE LEFT UNSUPERVISED ON THE PLAYGROUND.
3. More serious injuries, and ALL involving knocks on the head, must be attended to by a trained first-aider. A pupil will be sent inside to alert staff inside that there is a need for additional support.
4. All incidents involving injury, other than minor cuts or grazes, must be recorded in the accident book kept in the Upper School office or Lower School Intervention Room.
5. If hospital attendance is considered necessary, the first priority must be the safety of the pupils.

Emergency Procedures

- Assess the situation: are there dangers to the First Aider or casualty? Make the area safe. Check for injuries. Is there likely to be a neck injury?
- Assess the casualty for responsiveness; does the casualty respond?

IF THERE IS NO RESPONSE:

- Open the airway by placing one hand on the forehead and gently tilt the head back. Remove any obvious obstructions from the mouth and lift the chin,
- Check for breathing. If the casualty is breathing, assess for life threatening injuries, then place in the recovery position. If the casualty is not breathing, send for help to call an ambulance.
- If the casualty is not breathing, begin CPR. Adult 30 compressions then 2 rescue breaths and repeat. Child: 2 breaths then 30 compressions and repeat. Check for signs of circulation. Look for breathing, coughing or movement.

In the event of SERIOUS INJURY to pupils or staff:

1. It will be necessary to seek help in order to deal with other pupils.
2. A message should be sent to the Head teacher or other senior member of staff asking for urgent help.

TWO CHILDREN MUST BE SENT.

3. The injured pupil should be comforted and reassured.
4. The emergency services should be called. Teaching staff will organise and remove other pupils from the scene.
5. Details of what occurred and the nature of injury/medical condition should be sought and recorded.
6. Parents must be contacted at the earliest opportunity and informed about the incident, sensitively.
7. An emergency contact file exists in both school offices.

8. An accident report must be completed in the accident book at the earliest opportunity. Witness statements must be recorded.
9. It will be necessary to complete a report for Monmouthshire CC

REMEMBER, ambulances travel faster than staff cars, particularly through traffic. This, therefore, is the preferred option.

IF it is more appropriate for a member of staff to take an injured child to hospital, TWO members of staff must be in attendance - one to drive, the other to monitor/comfort the injured child.

A MEMBER OF STAFF WHO WITNESSES A SERIOUS ACCIDENT MUST NOT TRAVEL TO THE HOSPITAL WITH AN INJURED CHILD - they may suffer from 'shock'. The member of staff should themselves receive comfort or counselling.

- In the event of a child having to attend hospital only a teaching member of staff can accompany the child (in the absence of parents). **Only a qualified teacher can act in loco parentis** and therefore make decisions in the interests of the child. This authority **CANNOT** be delegated to a member of the non-teaching staff, agency staff, parent helper or 'friend of the family'. Parents have legal responsibility for a child, **teachers have a 'higher duty of care' for the child's safety (a legal duty)**

Illness at School

Where a child becomes ill during the school day, and there has been discussion and a decision being made by the class teacher, parents may be contacted and advised of the child's condition. If neither parent or next emergency contact cannot be made the child will have to remain in school. Upon collection, a parent/named contact must sign the signing out book indicating that they have taken responsibility for the child.

Body Spillages/ HIV

- No person must treat a pupil who is bleeding without protective gloves.

- Protective gloves are stored in the first aid room in Upper School and the disabled toilet in Lower School
- All body fluid spillages (vomit/ diarrhoea/ blood) must be cleaned immediately using yellow products (bucket, mops, yellow bags, yellow dustpan and brush). This is vital if the spread of infection is to be reduced. Gloves should be worn and yellow kit is used to clean up/ remove body fluid.
- Bio-hazard kits are suitable for dealing with these incidents and are located in first aid rooms.
- The affected area is washed with detergent and water.
- Hands must be washed and dried after the removal of protective gloves.

Any materials used to clean up these spillages are to be disposed of in the **Clinical Waste** containers.

Head Lice

A general alert is sent out to all parents using our communication system if there is a case of head lice in school.

Severe Allergy (Epipen)

All staff complete biannual online training on how to administer medicine to pupils in the case of an emergency. A record of trained staff members is kept in the office.

In such instances, the medical care plan (located in the child's classroom with the pupil's teacher) MUST be adhered to. Any medication administered MUST be taken with the child to hospital and parent informed.

Anaphylactic Shock

In the cases of serious allergy, staff members have been trained to administer Epipen injections. Only trained staff can give the medication. Parents are informed of the need to top up medical supplies as necessary. If

an Epipen is administered, the details will be recorded and sent with the pupil to hospital.

Administering of Medicines

Medicines in School

We have established a procedure for administering medicines in school. (Please see Supporting Learners with Healthcare Needs Policy: Supporting Learners- Healthcare Needs Policy.pdf)This is necessary to ensure the safety of all the children in our care.

As a general policy staff at Osbaston Church in Wales School will not administer medicines to children at school. However, we recognise that there may be particular circumstances where the most practical solution is for a member of staff to administer medication e.g. during a residential visit or where parents or nominated substitute is unable to do so. **This policy applies to prescription medicines only, non-prescribed medicines will not be administered and must not be given to or taken by children in school.**

The circumstances in which medicines may be administered by a member of staff are as follows:

1. The medicine must have been prescribed by the child's doctor;
2. The medicine needs to be administered four times daily i.e. morning, lunch, evening and night. Medicines which have been prescribed to be taken three times a day may be taken at home – morning, evening and night.
3. Signed consent must be given by the adult with parental rights for the child;
4. The Head teacher/ Senior Leader must be informed of the intention to administer medicines in school;

5. Medicine must be clearly labelled and kept in a safe place out of the reach of children;
6. Medicine must not be kept in public areas or in a child's bag;
7. Children must be supervised by a member of staff or with a parent when medicine is administered; they must not be allowed to administer medicine on their own;
8. No member of staff should feel compelled to administer medicines in school, this is a personal matter for the member of staff concerned.

Children should not eat throat tablets in school, including Soothers and Tunes .

Asthma Policy

What to do if a child or adult has an Asthma attack.

Because Asthma varies from child to child it is not possible to give rules that suit everyone, however, the following guidelines may be helpful.

1. Ensure that the reliever medicine is taken.
2. A reliever inhaler, usually blue, should quickly open up narrowed air passages.
3. Stay calm and reassure the sufferer.

Attacks can be frightening so stay calm, the sufferer has probably been through it before. Listen carefully to what the child is saying. It is very comforting to have a hand to hold but do not put your arm around the child's shoulder as this is very restrictive.

4. Help the sufferer to breathe
5. Encourage the child to breathe slowly and deeply. Most children find it easier to sit upright or leaning forward slightly. Lying flat on the back is not recommended.
6. Loosen tight clothing around the neck and offer the child a drink of water.

After an attack

Minor attacks should not interrupt a child's involvement in school. As soon as they feel better they can return to school activities.

Parents/carers must be informed of an attack at the earliest opportunity.

CALL A DOCTOR URGENTLY IF:

- the reliever has no effect after 10 minutes
- the child is either distressed OR
- the child is becoming exhausted
- you have any doubts at all about the child's condition

IF A DOCTOR IS UNOBTAINABLE CALL AN AMBULANCE.

Roles and responsibilities

The Head teacher has responsibility to:

- Plan an individually tailored school asthma policy with the help of school staff, school nurses, local education authority advice
- Plan the school's asthma policy in line with devolved national guidance
- Liaise between interested parties – school staff, school nurses, parents/carers, governors, the school health service and pupils
- Ensure the plan is put into action, with good communication of the policy to everyone
- Ensure every aspect of the policy is maintained
- Assess the training and development needs of staff and arrange for them to be met
- Ensure all supply teachers and new staff know the school asthma policy
- Regularly monitor the policy and how well it is working
- Delegate a staff member to maintain the school asthma register
- Report back to their employers and their local education

School staff have a responsibility to:

- understand the school asthma policy
- know which pupils they come into contact with have asthma
- know what to do in an asthma attack
- allow pupils with asthma immediate access to their reliever inhaler
- tell parents/carers if their child has had an asthma attack
- tell parents/carers if their child is using more reliever inhaler than they usually would

- ensure pupils have their asthma medicines with them when they go on a school trip or out of the classroom
- ensure pupils who have been unwell catch up on missed school work
- be aware that a pupil may be tired because of night-time symptoms
- keep an eye out for pupils with asthma experiencing bullying
- liaise with parents/carers, the school nurse and special educational needs coordinator
- if a child is falling behind with their work because of their asthma.

Parents/carers have a responsibility to:

- tell the school if their child has asthma
- ensure the school has a complete and up-to-date information about medication and administration of medicine for their child
- inform the school about the medicines their child requires during school hours
- inform the school of any medicines the child requires while taking part in visits, outings or field trips and other out-of-school activities such as school team sports
- tell the school about any changes to their child's medicines, what they take and how much
- inform the school of any changes to their child's asthma (for example, if their symptoms are getting worse or they are sleeping badly due to their asthma)
- ensure their child's reliever inhaler (and spacer where relevant) is labelled with their name
- provide the school with a spare reliever inhaler labelled with their child's name
- ensure that their child's reliever inhaler and the spare is within its expiry date
- keep their child at home if they are not well enough to attend school
- ensure their child catches up on any school work they have missed

- ensure their child has regular asthma reviews with their doctor or asthma nurse (every six to12 months)
- ensure their child has a written personal asthma action plan to help them manage

At Osbaston Church in Wales School we:

- recognise that asthma is a widespread, serious, but controllable condition and the school welcomes all pupils with asthma
- ensure that pupils with asthma can and do participate fully in all aspects of school life, including art lessons, PE, science, visits, outings or field trips and other out-of-hours school activities
- recognise that pupils with asthma need immediate access to reliever inhalers at all times
- Ensure parents/ carers of pupils with asthma check dates of inhalers and replace as needed
- keep a record of all pupils with asthma and the medicines they take
- ensure that the whole school environment, including the physical, social, sporting and educational environment, is favourable to pupils with asthma
- ensure that all pupils understand asthma
- ensure that all staff (including supply teachers and support staff) who come into contact with pupils with asthma know what to do in an asthma attack
- will work in partnership with all interested parties including the school's governing body, all school staff, school nurses, parents/carers, employers of school staff, doctors, nurses and pupils to ensure the policy is planned, implemented and maintained successfully.

Background

This policy has been written with advice from the Department for Education & Skills, Asthma UK, the Local Authority, Local Healthcare Professionals, the School Health Service,

Parents/Carers, the Governing body and pupils.

This school recognises that asthma is a widespread, serious but controllable condition affecting many pupils at the school. The school positively welcomes all pupils with asthma. This school encourages pupils with asthma to achieve their potential in all aspects of school life by having a clear policy that is understood by school staff, their employers (the local education authority) and pupils. Supply teachers and new staff are also made aware of the policy.

Asthma medicines

- Immediate access to reliever medicines is essential. Pupils with asthma are encouraged to carry their reliever inhaler as soon as the parent/carer, doctor or asthma nurse and class teacher agree they are mature enough. The reliever inhalers of younger children are kept in the classrooms.
- Parents/carers are asked to ensure that the school is provided with a labelled spare reliever inhaler. The class teacher will hold this separately in case the pupil's own inhaler runs out, or is lost or forgotten. All inhalers must be labelled with the child's name by the parent/carer.
- School staff are not required to administer asthma medicines to pupils (except in an emergency), however many of the staff at Osbaston Church in Wales School are happy to do this. All school staff will let pupils take their own medicines when they need to.

Emergency Inhaler

The school holds a salbutamol (Ventolin) inhaler for use in an emergency, together with an individual disposable spacer, as a back-up if your child's inhaler is not working or is not present in school

If you wish your child to use this emergency inhaler, please complete the healthcare form (accessed at school from the Office, or within the Healthcare Policy.)

Should your child require the use of this inhaler, a letter will be sent home giving full details of the episode and dosage used.

Record keeping

- At the beginning of each school year or when a child joins the school, parents/carers are asked if their child has any medical conditions including asthma on their enrolment form.
- From this information the school keeps its asthma register (as part of the school medical alert register), which is available to all school staff. Parents/carers are asked to inform the school if their child's medicine changes during the year.

Exercise and activity – PE and games

Taking part in sports, games and activities is an essential part of school life for all pupils. All teachers know which children in their class have asthma and all PE teachers at the school are aware of which pupils have asthma from the school's medical alert register.

Pupils with asthma are encouraged to participate fully in all PE lessons. PE teachers will remind pupils whose asthma is triggered by exercise to take their reliever inhaler before the lesson, and to thoroughly warm up and down before and after the lesson.

If a pupil needs to use their inhaler during a lesson they will be encouraged to do so.

Classroom teachers follow the same principles as described above for games and activities involving physical activity.

School environment

The school does all that it can to ensure the school environment is favourable to pupils with asthma. The school does not keep feathered animals and has a definitive no-smoking policy. As far as possible the school does not use chemicals in science and art lessons that are potential triggers for pupils with asthma.

When a pupil is falling behind in lessons

If a pupil is missing a lot of time at school or is always tired because their asthma is disturbing their sleep at night, the class teacher will initially talk to the parents/carers to work out how to prevent their child from falling behind. If appropriate, the teacher will then talk to the school nurse and special education needs coordinator about the pupil's needs.

The school recognises that it is possible for pupils with asthma to have special education needs due to their asthma.

EMERGENCY SALBUTAMOL/VENTOLIN INHALERS

The school holds a salbutamol (Ventolin) inhaler for use in an emergency, together with an individual disposable spacer, as a back-up if your child's inhaler is not working or is not present in school

If you wish your child to use this emergency inhaler, then please complete the information below.

If your child requires the use of this inhaler, a letter will be sent home giving full details of the episode and dosage used.

I confirm that my child has been diagnosed with asthma Yes / No (delete as appropriate)

My child will have a working, in-date inhaler, clearly labelled with their name, which they will bring with them to school every day.

In the event of my child displaying symptoms of asthma and their inhaler is not available or unusable, I consent for my child to receive salbutamol (Ventolin) from an emergency inhaler held by the school for such emergencies.

Signed:	
Date:	
Parent/Guardian full name (PRINT):	
Parent/Guardian mobile number:	

Parent/Guardian Home / work number:	
Parent/Guardian address:	

EMERGENCY SALBUTAMOL (VENTOLIN) INHALER USE OSBASTON CHURCH IN WALES SCHOOL	
Surname*	
Forename*	
Class	
This letter is to notify you that your child has had problems with their breathing today. Please see details below:	
Details:	

Your child did not have their own asthma inhaler with them, so a member of staff helped them to use the school's emergency asthma inhaler containing salbutamol (Ventolin) **Dosage given to your child was : Puffs**	
OR	
Your child's own asthma inhaler was not working, so a member of staff helped them to use the school's emergency asthma inhaler containing salbutamol (Ventolin). **Dosage given to your child was : Puffs** **WE STRONGLY ADVISE THAT YOU PASS THIS INFORMATION ON TO YOUR CHILD'S DOCTOR AS SOON AS POSSIBLE TO SEE WHETHER YOUR CHILD NEEDS FURTHER MEDICAL ASSESSMENT.**	

Signed:	