FARRINGTONS
SCHOOL

First Aid Policy

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Regulatory References	
Links to other policies	
Main changes since last review	6.1 – Final Sentence 9.1 – Final Sentence Adding of Appendix 2 (was previously a separate policy)
Date of next review	September 2027

First Aid Policy

1. Introduction

1.1 Everyone in the School has access to the Farringtons School Medical Centre which is led by the medical team under the supervision of the Assistant Head Pastoral. They are responsible for any medical care or first aid that children, staff or visitors may require during the school day. When the school is open, the medical team as well as other trained first aiders, will administer first aid, or deal with any accidents, emergencies, or if someone is taken ill. A number of boarding staff are also trained in first aid to ensure sufficient cover when the Health Centre is closed at night.

1.2 Medical staff will contact parents promptly in the event of a serious or concerning illness or injury. For less serious conditions they will contact parents either by telephone or email later on the day of the illness or accident. They do not routinely contact parents for minor scrapes like a grazed knee or simple fall in playground.

1.3 This policy should be read in conjunction with our Medical Policy

First Aid at Farringtons School

2. First Aid Notices

2.1 Lists of members of staff who are qualified as First Aiders, and lists of those who have been trained as Appointed Persons, are displayed in departments around the School. The list is also circulated digitally each term. A copy can also be found in (Appendix 1). Staff First Aid training needs updating every three years, although there is training available on an annual basis for First Aiders wanting to refresh specific areas of knowledge that they need.

3. First Aid Boxes

3.1 First aid boxes are placed in all the areas of the School where an accident is considered possible or likely (such as the Sports Hall, or the Science Department) and in the boarding house. Staff always take additional first aid boxes with them when groups of pupils go out of school on organised trips, or to participate in sporting events. All boxes are checked by the members of staff responsible for them at the start of each academic year and, if necessary, replenished. All the School's minibuses carry a first aid box.

4. Access to First Aid

4.1 All new pupils and staff are given information on where to go for help in the event of an accident, as part of their induction at the School.

5. Calling an Ambulance

5.1 If someone at the school has a serious accident, staff are trained to summon medical help immediately. The Medical Centre is normally responsible for summoning an ambulance and for making arrangements for escorting the pupil to hospital; but all staff are advised in their induction training that they should never hesitate to call 999 themselves if the need is urgent. Should a pupil be required to travel urgently to hospital, a member of staff will always stay with them until their parents have arrived and handed over important information. A member of SMT should always be told when an ambulance is required to visit the site for urgent care.

6. Emergency Medical Treatment

6.1 In accepting a place at the School, we require parents to authorise the Head, to consent on the advice of an appropriately qualified medical specialist to pupils receiving emergency medical treatment, including general anaesthetic and surgical procedure under the NHS, if we are unable to contact the parents in time. Pupils are unable to attend the school without a medical consent form being completed on admission

7. Reporting an Accident

7.1 In the event of significant accident or injury, parents must be informed as soon as practicable. The member of staff in charge at the time will decide how and when this information should be communicated, in consultation with the Medical Centre, and with the SMT if necessary. In certain circumstances the School is legally required under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR) to report accidents to the HSE. This is done by the Medical team in coordination with the Assistant Bursar.

8. Our Medical Care

8.1 The school sends all new parents a medical questionnaire/consent form and require it to be completed before their son or daughter joins the School and this MUST be completed. Reminders are sent throughout the school year.

9. Medical Immunisations

9.1 Parents will be advised if immunisations are to take place within school. Communication will be sent to parents once received by the local authority immunisation team. The school does not routinely keep records on immunisations given to pupils.**10. Medical Records**

10.1 The school keeps records of all treatment that pupils receive during their time at the School. All accidents and injuries to pupils are recorded in addition to all medicines that are given to them using iSAMS the school's data base.

10.2 All medical records will be stored in the Medical Centre by law until a pupil's 25th birthday, when they will be securely destroyed. Access to these records is restricted to the Medical Centre Staff.

10.3 The school keeps records of all accidents and injuries, and have a procedure in place for ensuring that they are reviewed regularly in order, where possible to learn how to minimise the likelihood of recurrence.

11. Medicines and Treatments Brought to School for Pupils

11.1 Parents are required to advise the Medical Centre Staff of any medication that pupils bring into the school. If a pupil has a medical condition which necessitates regular access to medication, parents must inform the school so that an appropriate routine can be devised. The relevant staff will be informed, in confidence, of any condition that is likely to a pupil in any area of school life. The medical team will work with parents on the completion of a Health Care Plan may be necessary which sets arrangements that work best for the child *(See 11.2 of the Medical Policy)*.

11.2 Parents should be advised that the school needs further parental consent for prescribed medication if a member of staff is to administer it to a pupil

Appendix 1

FARRINGTONS SCHOOL- FIRST AID TRAINED STAFF LIST

Updated September 2025

Name	Qualification	Department
Danny May	Paediatric First Aid 1 Day Emergency First Aid at Work	Medical Centre
Franca Luzi	2 day Paediatric First Aid 1 Day Emergency First Aid at Work	Medical Centre
Tessa Palacios	2 Day Paediatric First Aid	Medical Centre
Kelly Breen	Paediatric First Aid	FIZ Club
Suganda Dhir	Paediatric First Aid	FIZ Club
Jenny Johnston	1 Day Emergency First Aid at Work	FIZ Club
Melissa Levey	Paediatric First Aid	FIZ Club
Julia Oliver	Paediatric First Aid	FIZ Club
Rvd Janet Verrier	Paediatric First Aid Refresher	FIZ Club
Jo Cryan	Paediatric First Aid	Prep School
Tracey Devaux	Paediatric First Aid	Prep School
Clare Fitzpatrick	Paediatric First Aid	Prep School
Carole Frisby	Paediatric First Aid	Prep School
Sarah Graham	Paediatric First Aid 1 Day Emergency First Aid at Work	Prep School
Heidi Harry	Paediatric First Aid	Prep School
Amanda Horn	1 Day Emergency First Aid at Work	Prep School
Sarah Johnson	Paediatric First Aid First Aid at Work	Prep School
Sara Watts	Paediatric First Aid Forest School First Aid	Prep School
Lisa Webster	Paediatric First Aid Forest School First Aid	Prep School

Name	Qualification	Department
Chris Doyle	1 Day Emergency First Aid at Work	PE Department
Adam Doherty	1 Day Emergency First Aid at Work	PE Department
Ben Coulthard	1 Day Emergency First Aid at Work Paediatric First Aid	Senior School Teacher
Wendy Cox	1 Day Emergency First Aid at Work	Senior Registrar
Jane Daws	1 Day Emergency First Aid at Work	Senior School Teacher
Sarah Flashman	1 Day Emergency First Aid at Work	Senior School (SEND / HLTA)
Megan Gill (maternity leave from September 2025)	1 Day Emergency First Aid at Work	Senior School (SEND / TA)
Victoria Glockling	Emergency First Aid at Work Refresher	Senior School Office
Jaime Hernando	1 Day Emergency First Aid at WorkPaediatric First Aid	Senior School Teacher
Danielle Humphrey	1 Day Emergency First Aid at Work	Senior School Teacher
Claire Lewington	1 Day Emergency First Aid at Work	Senior School Teacher
Katie Miles	1 Day Emergency First Aid at Work	Senior School (SEND / TA)
Karen Millard	1 Day Emergency First Aid at Work	Prep Registrar
Katherine O'Neil	Outdoor DofE First Aid	Senior School Teacher /DofE Lead
Jacqueline Warburton	1 Day Emergency First Aid at Work	Senior School Teacher
Peta White	Outdoor DofE First Aid	Senior School Teacher / DofE Lead
Karen White	1 Day Emergency First Aid at Work	Assistant Bursar
Peter Cheng	1 Day Emergency First Aid at Work	Estates (Maintenance Operative)
Pat Connolly	1 Day Emergency First Aid at Work	Estates (Maintenance Operative)
Chris Moynes	1 Day Emergency First Aid at Work	Estates (Maintenance Operative)

Name	Qualification	Department
James Ellis	1 Day Emergency First Aid at Work	Estates (Head of Grounds)
Andrew Walpole (Drew)	1 Day Emergency First Aid at Work	Estates (Grounds and Maintenance Operative)
Laura Black	1 Day Emergency First Aid at Work	Catering Assistant
Kevin Bodycombe	In House Emergency First Aid	Minibus Driver
Phil Bowdery	First Aid Refresher (FAW)	Minibus Driver
Rob Callaghan	First Aid Refresher (FAW)	Minibus Driver
George Davy	First Aid Refresher (FAW)	Minibus Driver
Chris Dodd	First Aid Refresher (FAW)	Minibus Driver
David Carpenter	First Aid Refresher (FAW)	Minibus Driver
Vince Grima	First Aid Refresher (FAW)	Minibus Driver
Martin Guntrip	First Aid Refresher (FAW)	Minibus Driver
Kevin Knibbs	First Aid Refresher (FAW)	Minibus Driver
Neil London	First Aid Refresher (FAW)	Minibus Driver
Wesley Pollard	First Aid Refresher (FAW)	Minibus Driver
Fiona Staden	In House Emergency First Aid	Minibus Driver
Anthony Small	First Aid Refresher (FAW)	Minibus Driver

Medical Centre
FIZ Club
Prep School
Catering
House Staff

Minibus Drivers
PE Staff
Senior School
Maintenance Team

Appendix 2: Head injuries guidance

1. Preamble
   1.1 Minor head injuries are common in children and do not usually cause any serious problems. They are often caused by a blow to the head and in the school environment this is usually due to a fall or sporting activity.
   1.2 Every minor head injury is different and Farringtons School acts in a 'play safe' manner in assessment and management of head injuries sustained in school. The advice below gives details of what signs and symptoms should be looked for in children who have hit their heads in school and when medical advice should be sought.

2. Definition of a Head Injury
   2.1 A head injury is defined as 'any trauma to the head other than superficial injuries to the face' (NICE Head Injury Guidelines 2014).

3. Common symptoms after a head injury:-
   3.1 Bump or bruise on the exterior of the head.
   3.2 Nausea or vomiting once soon after the injury.
   3.3 Mild headache, younger children may show only irritability.
   3.4 Mild dizziness.
   3.5 Feeling generally miserable / off colour.
   3.6 Loss of appetite – do not force food but ensure good fluid intake.
   3.7 Increased tiredness. He / she should be allowed to sleep but check on them to make sure that they are rousable.
   3.8 Lack of interest / concentration.

4. Dealing with a Head Injury in School
   4.1 If a child sustains a head injury whilst in school an ice pack should be applied immediately to any bump or bruise, if there is an open wound a pressure bandage should be applied. The child should then be escorted, if possible, by an adult to the medical centre or the healthcare practitioner for further assistance.
   4.2 A record of the injury should be completed for the school records. A 'Head Injury advice' document should be emailed to parents by the medical team. In addition, parents may be notified by phone.
   4.3 If a boarder sustains a head injury the duty house staff must be informed and sent a notification of head injury form.
   4.4 First aiders must ensure they inform the medical staff as soon as possible so that the child can be assessed.

4.5 Most minor head injuries should not require further treatment and most children make a full recovery, however, occasionally a child who is thought to only have a minor head injury can develop complications later in the day or sometimes days later. School staff must remain vigilant and take the appropriate action if the child develops a problem. If the child develops any of the following symptoms medical advice must be sought and the child taken to GP/ UCC/ A & E:

- 4.5.1 Becomes increasingly drowsy or very difficult to wake up.
- 4.5.2 Complains of severe headache or visual disturbance.
- 4.5.3 Vomiting.
- 4.5.4 Appears confused.
- 4.5.5 Has a seizure or fit (when the body suddenly moves uncontrollably). CALL 999
- 4.5.6 Cries continuously / becomes irritable and cannot be consoled.
- 4.5.7 Becomes unconscious (unrousable from sleeping) for either short of extended period of time.
- 4.5.8 If after a head injury a child remains unconscious or fits, an ambulance should be called immediately and the parents contacted.
- 4.5.9 Leakage of any blood or straw coloured fluid from ear / ears.
- 4.5.10 Should a child need additional assessment by visiting a GP/ UCC/ A & E, it is the parents/guardians/carers' responsibility to facilitate this.