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Our **Vision**
RESPONSIBILITY
RESPECT
RESILIENCE

You are a shining light in our community

You are the light of the world. A city on a hill cannot be hidden. - Matthew 5:14b

First Aid & Illness Policy

Approved by:	RMC	**Date:** October 2025
Last reviewed on:	October 2025	
Next review due by:	October 2026	
Related Documents	Medical needs policy, medication policy	
Guidance	• Education policy 2003, Health & Safety at work etc act & first aid regulations 1981 • Guidance on Health protection in schools and other childcare settings • Statutory framework for the early years foundation • The Road Vehicles (Construction and Use) Regulations 1986 • Medicines Act 1968 (Human medication regs 2017)	
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Document summary

Authority and circulation

This policy has been authorised by *the principal and governors* of Bradford Academy. It is available to parents and students and to all members of Academy Staff.

The arrangements within this policy (for example the number of First Aiders, Appointed Persons and first aid boxes and contents of first aid boxes) are based on the results of a suitable and sufficient needs assessment carried out by the Academy regarding all staff, students and visitors.

This policy complies with paragraph 3(6) of the schedule to the Education (Independent School Standards) (England) Regulations 2003 (SI 2003/1910), the Health and Safety at Work etc Act 1974 and subsequent regulations and guidance including the Health and Safety (First Aid) Regulations 1981 (SI 1981/917) and the *First aid at work: Health and Safety (First Aid) Regulations 1981 approved code of practice and guidance* and the human medicines guidance 2012 regulation 238 and schedule 19. The Human Medicines Regulations 2012

Definitions and Terminology

First Aid

means the treatment of minor injuries which do not need treatment by a medical practitioner or nurse as well as treatment of more serious injuries prior to assistance from a medical practitioner or nurse for the purpose of preserving life and minimising the consequences of injury or illness. For the avoidance of doubt, First Aid does not include giving any tablets or medicines, the only exception being giving aspirin to treat a suspected heart attack, and administering an Adrenaline Auto injector for a severe allergic reaction, in accordance with accepted first aid practice

First Aiders

are members of staff who have completed an approved First Aid course and hold a valid certificate of competence in First Aid at Work (**FAW**) or Emergency First Aid at Work (**EFAW**), Emergency Paediatric First Aid **(EPFA),** or the full Paediatric First Aid **(PFA**), based on the requirements of the Health and Safety Executive (**HSE**) and the Early Years Foundation Stage requirements **(EYFS)**

First Aid Guidance

is the First aid at work: Health and Safety (First Aid) Regulations 1981: approved code of practice and guidance (Health and Safety Executive, 2nd edition, 2009).

Appointed Persons

are members of staff who are not qualified First Aiders who are responsible for looking after the first aid equipment and facilities and calling the emergency services if required. Appointed persons should not administer first aid. The academy main first aider will assume this duty or delegate as required.

Staff
means any person employed by the Academy, volunteers at the Academy and self-employed people working on the premises.

The Health and Safety Officer
is *Richard Canavan,* who can be contacted on 01274 256789

Aims of this policy

To ensure that the Academy has adequate, safe and effective First Aid provision for every student, member of staff and visitor to be well looked after in the event of any illness, accident or injury, no matter how major or minor.

To ensure that all staff and students are aware of the procedures in the event of any illness, accident or injury.

Nothing in this policy should affect the ability of any person to contact the emergency services in the event of a medical emergency. For the avoidance of doubt, Staff should dial 9 for an outside line followed by 999 for the emergency services in the event of a medical emergency before implementing the terms of this Policy whilst making clear arrangements for liaison with ambulance services on the Academy site.

Who is responsible?

Overall responsibility.

The Academy Executive principal, as the employer, has overall responsibility for ensuring that the Academy has adequate and appropriate First Aid equipment, facilities and First-Aid personnel and for ensuring that the correct First Aid procedures are followed.

Equipment & Persons.

The Executive principal holds responsibility for ensuring that there are adequate and appropriate First Aid equipment, facilities and appropriately qualified First Aid personnel available to the Academy. For more information, please see http://www.hse.gov.uk/firstaid/legislation.htm

Needs (risk) Assessment.

The Academy First Aider, or other suitably trained and experienced person, will carry out an annual First Aid needs assessment and review the First Aid needs to ensure that the First Aid provision is adequate, and communicate the findings to the operations director and other health & safety officers as appropriate.

Access.

The senior leadership team are responsible for ensuring that all staff and students (including those with reading and language difficulties) are aware of, and have access to, this policy.

Training.

The Executive principal is responsible for ensuring that staff have the appropriate and necessary First Aid training as required and that they have sufficient understanding, confidence and expertise in relation to First Aid.

Review:

The Health & Safety officer, Richard Canavan, is responsible for all reviews following accidents / incidents and annually or as otherwise required.

First Aiders

A list of current first aiders can be found on medical tracker by creating a report of staff qualifications.

The Academy employs a main first aider (FA1) qualified to a minimum Level 3 first aid in the workplace, but ideally Level 3 first response emergency care.

The main duties

- To give immediate First Aid to students, staff or visitors when needed, commensurate with the standards in the current voluntary aid society FAW manual (currently 11th Edition), to preserve life and prevent injuries from worsening.
- To ensure safety to themselves and the casualty
- Call an ambulance or other professional medical help when necessary.
- First Aiders are to ensure that their First Aid certificates are kept up to date.
- Gain consent to treat the casualty.
- The First Aiders will undergo update training at least every three years.
- To read and acknowledge understanding of all relevant policies in connection with their job role, and to assist where appropriate in the updating and maintaining of these policies.
- All staff should read and be aware of this Policy, know who to contact in the event of any illness, accident or injury and ensure this Policy is followed in relation to the administration of First Aid. All staff will use their best endeavours, always, to secure the welfare of the staff and students.

Training

First Aiders will be trained by a suitable and reputable training provider, whose staff are trained in the management of first aid, to a minimum of FAW standard and are in possession of a suitable teaching / training and assessing qualification. This is to be checked by the person who books the first aid course.

As stated in the First Aid Needs Assessment, when selecting a provider for training our first aid team, we will use a training provider who offers a recognised OFQUAL certificate, or by one of the First Aid charitable organisations.

Training will be updated every 3 years, with an annual refresher available for staff who request it. The Academy main first aider will provide updates and refreshers periodically.

We use two preferred suppliers currently. First on scene and Lambda medical.

Early year should complete: Paediatric First Aid (Level 3 RQF) - First On Scene

All other first aiders: Combined FAW and Paediatric First Aid (Level 3 RQF) - First On Scene

FREC 3: FREC® 3 First Response Emergency Care (Level 3 RQF) - First On Scene

Or: FREC 3 - Lambda Medical - Level 3 First Response Emergency Care

Whilst it would be sensible, training does not need to be exclusively externally led. Where there is a suitable person in the Academy able to deliver first aid training, it would not be necessary to send first aiders out to a provider, and providing due diligence checks are carried out, it would be acceptable for first aiders to attend internal training courses and be issued with an Academy certificate of attendance / competence. They would need:

Minimum FAW & Paediatric first aid (preferably FREC 3)
Recognised training qualification, such as level 3 award in education & training (EAT) or equivalent.

Currently, there is no member of staff suitably qualified to deliver first aid training.

Standards of treatment

- All first aid treatment will be carried out in line with:
- The Charitable organisations First Aid manual, at the most current edition (currently 11th Edition)
- Resuscitation council guidelines 2021
- Other Specific, documented, training that the first Aider has attained outside of this remit that can be evidenced.

First Aid Equipment.

It would fall to the Academy's main first aider to ensure the medical room is adequately stocked with first aid equipment, suitable to the injuries requiring treatment. See needs assessment document for a list of typical equipment.

Diagnostic equipment & Observations

This should **not** generally be used by first aiders, however first aiders with specific training (FREC, professional medical persons) or those trained by the Academy Main First Aider where appropriate, may use the following diagnostic equipment:

- Infrared or Tympanic thermometer
- Pulse oximeter.
- BP recording instruments (digital or with sphygmomanometer & stethoscope as trained)
- BM kits
- Eye torch

Equipment / medication not specified in the needs assessment, will not be permitted for use in a first aid capacity.

If there are no persons trained in the ability to undertake patient observations using diagnostic equipment or other Methods, (Temperature, pulse, 02 levels & Blood pressure) then the use of a thermometer should only be carried out where the first aider feels they have the experience or ability to use the equipment provided and make an experience-based judgement formed from the use of everyday life skills gained as a responsible adult. The Academy senior leadership team should not insist that a first aider takes patient observations if they do not feel able to make the judgement and where they have not been specifically and suitably trained to do so.

NEWS 2

First aiders able to take full observations and understand what those mean, can use the National early warning system (NEWS) to score the severity of any medical condition and determine if an ambulance should be called. The first aider must understand the NEWS 2 system to make this judgement.

First Aid Room

Will be stocked by the First Aider as per the needs assessment and minimum order levels, using the appropriate suppliers.

First aid boxes

First aid boxes are marked with a white cross on a green background and are stocked in accordance with the academy needs assessment and as per the recommendations of the contents of a BSI kit. For more information, please see http://www.hse.gov.uk/firstaid/legislation.htm.

First aid boxes are located

- DSP office
- PE office
- Main and satellite kitchens.
- Outbuilding provisions (where a suitable first aider is in provision)
- Medical room in primary
- Main Primary office
- Pastoral offices
- Minibus
- Facilities office
- X4 travel kits in the first aid room
- X1 mobile kit in first aid room
- X6 emergency observation kits in the first aid room

If first aid boxes are used, they should be taken to the First Aider who will ensure that the first aid box is properly re-stocked.

All requirements for the first aid kits are supplied by the First Aider and are regularly stocked when requested.

Academy minibuses:

The Academy may from time-to-time use / hire transport. In such circumstances, the member of staff in charge is responsible for ensuring that there is adequate first aid provision (which may require the member of staff to contact a first aider). The First Aid box should be stocked in accordance with part 2 of schedule 7 of the Road Vehicles (Construction and Use) Regulations 1986 (SI 1986/1078)

These are available as travel kits from the medical room, which must be signed out by the trip organiser. Failure to return the travel kit to the medical room after use will incur a fee of £70 to the department of the person who signed the kit out.

Off-site activities:

First aid boxes for any off-site activities can be collected by prior arrangement from the medical room. Any incident of first aid treatment must be reported and entered on the paper version of the medical tracker form.

When students travel offsite for PE, they will be accompanied by a member of staff and will take first aid equipment. Any incident of first aid treatment must be reported and entered the paper version of the medical tracker form.

Procedures

If a student is taken seriously ill in a lesson or has an accident, and it is felt necessary for medical treatment the following may occur.

Non-emergency

- Teaching staff to follow procedure in the staff handbook.
- Pastoral call out to be used.
- Pastoral to attend, triage and treat where possible and if qualified.
- Emergency First Aider is sent for if student is unfit to move or learner is sent to the medical room.
- First aid is administered when necessary. Parents/carers may be contacted depending upon the nature of the problem, especially if it is thought that some follow up may be needed.

Emergency procedures

In more serious cases where hospital attention is deemed necessary, the Academy will attempt to contact parents/carers who will be expected to take their child to hospital unless this is an emergency.

In an emergency, an ambulance will be called, and the parent/carer contacted by the Academy.

Parents will be expected to meet the ambulance at the Academy. Where the parents / carers wish to meet the learner at the hospital, a member of staff will not generally be sent, as they will be in the care of the Yorkshire Ambulance Service

If parents cannot be contacted, the Academy will act in loco parentis and give permission for any emergency treatment, on advice from clinicians and in the learner's best interests. In this case, a member of staff will always accompany the learner to the hospital.

Learners' siblings who attend the Academy, will not be permitted to ride unaccompanied in the ambulance with the injured learner.

In the event a learner is transported in an emergency ambulance, parents may collect siblings of the injured learner from reception in the usual manner, if it would be difficult to collect them at the usual end of day.

Emergency Services

Where the emergency services are required, it should become the responsibility of one designated individual to make the call. The first aider on scene will take charge and appoint someone to make the call and give all the details required.

The Lister Avenue address should be used where possible, using the post code BD4 7QR. Facilities will need to be informed of the impending arrival in case they are needed to unlock any gates. A spare key for the top gates is in the office.

Multiple Casualties

In the event the Academy should have multiple casualties, that does not meet the requirements of a mass casualty event – the following should be observed.

Multiple casualties with one or less ambulances in attendance.

The Academy first aider (FA1) or other-directed person (ODP) will deploy first aiders to the positions they are best suited to delivering care needs. The First aiders will collect from the first aid room on deployment an observation kit, and from main office, a radio.

Either the FA1 or ODP will assume control of the situation and expect all deployed staff to relay updates on casualty conditions, as they arise.

All First Aiders will switch radios to channel 5.

FA1 / ODP will designate the calling of an ambulance if required, and use the multiple casualty operating base, until all the casualties have been moved to further care or released back into normal Academy daily life. The multi – casualty operating base will be in one of four internal locations, dependent upon need, availability, and circumstance.

1. The main office, on the hot desk
2. The first aid room if appropriate
3. Cyber Café
4. SLT corridor

A debrief will take place with each first aider that has been deployed, and the situation can be closed out. First Aiders must write their reports on Medical Tracker in the usual manner.

Multiple casualties with one or more ambulances in attendance.

The Academy first aider (FA1) or other-directed person (ODP) will deploy first aiders to the positions they are best suited to delivering care needs. The First aiders will collect from the first aid room on deployment an observation kit, and from main office, a radio.

Either the FA1 or ODP will assume control of the situation and expect all deployed staff to relay updates on casualty conditions, as they arise.

All First Aiders will switch radios to channel 5

FA1 / ODP will designate the calling of ambulances to a single person, who will inform Yorkshire ambulance service (YAS) that we have multiple casualties, and how many ambulances we require on scene, and use the multiple casualties operating base, (MCOB) including the mass casualty file, to give a handover to ambulance crews on arrival. Additional staff may be used to meet ambulance staff and escort them to the MCOB.

The multi – casualty operating base will be in one of four internal locations, dependent upon need, availability, and circumstance.

5. The main office, on the hot desk
6. The first aid room if appropriate
7. Cyber Café
8. SLT corridor

The MCOB will continue to be in place until all the casualties have been moved to further care or released back into normal Academy daily life.

A debrief will take place in the MCOB with each first aider that has been deployed, and the situation can be closed out. First Aiders must write their reports on Medical Tracker in the usual manner.

External MCOB will be decided at the time of incident and communicated in an appropriate way.

Other staff Deployment

Other staff may be needed to channel learners and staff away from casualties to ensure privacy and ease of access and treatment. This may include, but is not limited to:

- Zoning off an area or areas
- Directing pedestrian / vehicular traffic
- Collating resources
- Updating members of the SLT
- Liaising with other emergency services
- Cleaning spillages
- Making access arrangements for emergency vehicles
- Providing access arrangements for parents / carers
- Liaising with parents / carers
- Providing water if needed to the emergency deployment team (EDT)

These duties may involve the following departments at our Academy.

- Professional services – office staff, reception staff
- Facilities
- Housekeeping
- Safeguarding
- SLT
- Catering

Mass Casualty events / METHANE

The Academy first aider (FA1) or other-directed person (ODP) will deploy available first aiders to the positions they are best suited to delivering care needs. The First aiders will collect from either FA1 or ODP an observation kit and the 10 second triage kit and ensure they have a radio. Either the FA1 or ODP will assume control of the situation and expect all deployed staff to relay updates on casualty conditions, as they arise.

All First Aiders will switch radios to channel 5.

The multi – casualty operating base will be decided at time of the major incident, dependent upon need, availability, and circumstance and will be communicated once established.

FA1 / ODP will designate the calling of ambulances to a single person, who will inform Yorkshire ambulance service (YAS) that we have a major incident and use the METHANE model to communicate our response.

Utilise any person available to deploy for any duties required.

We will use the ten-second triage kit (TST) to assess casualties. The mass casualty bag and TST kit are in the first aid room on the bottom of cupboard 6 in the green kit bag. A description of METHANE & TST can be seen on the links below.

METHANE explained

Ten second triage (TST)

Debrief

During debrief, we must remember that outcomes are not always positive and providing lifesaving care and treatment can be physically demanding and mentally exhausting, so not only can we take learning from each case, but it is also imperative to talk through situations, letting emotions out without judgement. Debrief must be a clear and open forum to help each other work through the challenges and emerge as strong, and wiser human beings. We must ensure that the mental health needs of our medical team are cared for and make clear that we have an Academy councillor who can be accessed if needed and signpost organisations where help and emotional support can be accessed.

Learners & staff with specific medical conditions.

Please refer to our medical needs policy for dealing with specific conditions and for details of the Academy Nursing & Wellbeing service.

Physical Assault & Incidents with violence.

Where a member of the Bradford Academy community has been involved in an act of violence or aggression, resulting in injuries to the head or abdomen, an emergency ambulance must be called. Please relay any significant findings and record on the tracker as described in the how-to handbook.

Head injury – Significant findings

- Bruising / swelling / bleeding
- Fluid from ears / nose
- Nausea / vomiting / headache / dizziness
- Visual disturbances
- Unequal /blown /unresponsive pupillary response.
- Combative casualty response

Abdominal injury – significant findings

- Severe pain to abdomen and or lower back
- Nausea / vomiting
- Rigid abdomen when palpated.
- Pattern bruising

General significant findings.
Any of the below outside of normal parameters.

- Heart rate
- Manual pulse – rate, strength, consistency
- O2 saturations
- Blood pressure
- Respiration rate
- Temperature
- BM
- News 2 score – individual score of 3 / combined score exceeding 6.

Head injury protocol

There is an activley bleeding wound.

- Move them to first aid **only** if it is safe to do so
- Consider mechanism of injury and possibilty of neck injury
- If the wound is not severe and requires no further care, call parents to collect and give the NHS head injury and concussion information leaflet, found pinned up on the first aid room wall.
- **If the wound requires minor wound closure, call parents to collect and take to BRI.**
- Record on medical tracker as an injury to a specific part of the head.

There is a swelling or bruising

- Move them to first aid only if it is safe to do so
- Consider mechanism of injury and possibilty of neck injury
- Treat with a wrapped ice pack and monitor
- If there are no signs of nausea, headache, visual disturbances, dizzyness or neck injury, the learner may return to lesson and told to return if feeling unwell.
- Write their name in **red** marker pen on the right hand side of the whiteboard. This will let all first aiders know that the child has had a head injury
- Phone parents. Let them know they are ok to still be in school. But give the parents the option to collect them if they wish - this will be authorised.
- Give the NHS head injury and concussion information leaflet, found pinned up on the first aid room wall.
- Record on medical tracker as an injury to a specific part of the head.

If there are signs of nausea, headache, visual disturbances, dizzyness or neck injury –

- Call parents to collect and give the NHS head injury and concussion information leaflet, found pinned up on the first aid room wall.
- Record on medical tracker as a head injury.

Serious head injury –

if any of the following are present, do not move the learner, treat as necessary using the first aid methods in the first aid handbook 11th Edition and training received, and stay with them. **Get someone to call for an ambulance** & call the learners parents. Record on medical tracker as a head injury.

- Learner has lost responsiveness for any period
- Mechanism of injury suggests potential neck injury
- Symptoms present of concussive or fracture injury
- A seizure has taken place post head injury
- Severe loss of Blood through open wound
- Probability of use of drugs or alcohol
- Record on medical tracker as a head injury

Minor bumps, bruises, scrapes to the face, forehead etc…

- Consider mechanism of injury and possibilty of neck injury
- Treat with a wrapped ice pack if required
- If there are no signs of nausea, headache, visual disturbances, dizzyness or neck injury, the learner may return to lesson and told to return if feeling unwell.
- Even though the injury may be minor, remember we all feel injury very differently so write their name in red marker pen on the right hand side of the whiteboard. This will let all first aiders know that the child has had a potential head injury.
- When recording on medical tracker, it does not need to be recorded as a head injury, but might be better placed to record as an injury to forehead, face, cheek etc. Please keep the use of head injury for more serious incidents.You may want to record it under bumps & scrapes.
- If the learner does come back feeling unwell, call parents to collect and give the NHS head injury and concussion information leaflet, found pinned up on the first aid room wall.

A learner with any injury to the head or face must not continue with any sporting or dance activity.

Whenever parents collect always send home the NHS head injury and concussion information leaflet.

Illness in the academy

The teacher or associate staff who first observes, or is informed of illness, must estimate how serious it is. Learners will often state they feel sick, or have headaches, and this is generally not a cause for concern.

If the staff member becomes concerned about the learner's wellbeing.

1. In the first instance should seat the learner near them, observe and monitor their condition, ensuring they have water to drink.
2. A learner who feels they may vomit, may be sent to the toilet in the usual way, but should be instructed to return to class so that they can be monitored.
3. Learners should remain in class where observation, monitoring and assessment of complaint may be undertaken.

It may be appropriate to clarify the learner's condition at break and allow learner to proceed with peer / staff support as necessary, informing other colleagues of concerns, if any.

If you become increasingly concerned about a learner's condition:

4. Staff should send for pastoral support through the call out system and continue to observe until support has arrived.
5. Pastoral may decide that first aid support is required either in the lesson or in the medical room.
6. Teaching staff should not send learners to the first aid room but rely on the pastoral call – out service we have in place. This ensures learners are not wandering the corridors during lesson time, or that a potentially unwell learner is not left on their own.

Safeguarding unwell learners

The duty first aider will make an evidence-based decision or in consultation with the attendance and pastoral teams, make an informed decision about whether a learner is able to stay in Academy and will contact parents if a learner needs to go home for any reason.

The first aiders in the academy cannot diagnose or treat some conditions which require specialist medical intervention or provision. They will make decisions based upon their current knowledge and practice.

Learners should not call their parents directly, as it is not always necessary for the learner to go home when other provisions can be made to support them in school, or to cause alert to a parent for a non-emergency condition. First Aiders must not contact parents via a learner's mobile telephone, in the interests of safeguarding all our learners. Where difficulties arise in contacting parents, contact the learners pastoral support worker / safeguarding for advice.

In the interests of safeguarding our learners, we are only able to call numbers held on file, and learners can only go home, when collected by one of the named contacts held on Arbor, or a designated adult, whose name must be left with reception, by that designated contact and with a password.

Learners from any year group when deemed unwell, must not be allowed to walk home, take public transport home or be sent home in a taxi. They MUST be collected by a suitable adult who is over 18 years of age.

(There may be extreme circumstances where this can be waived, however support must be gained from the lead member of the safeguarding team or the Academy Principal.)

Learners contacting home

Where a learner does make direct contact home to say they are not well and the adult with whom they reside wishes to take them home, the learner may be escorted from lesson to main reception where the responsible adult may collect them. This will be recorded as an unauthorised absence as failure on the learner's behalf to respect the correct channels that the Academy has in place to support the wellness of learners, and the smooth running of the Academy. Therefore, the learner **must not** sign out as gone home ill but sign out as other. Their mobile phone use will be picked up by their pastoral support worker and the behaviour policy followed accordingly.

Nutrition

It is often the case that learners visit first aid support for nausea, headaches & dizziness. Occasionally learners will feel weakened and may appear pale and shaky. These symptoms are often caused by lack of nutrition, especially missing breakfast and not taking in enough water. When these symptoms are present, and the learner has no elevated, or below normal temperature and there are no other medical considerations, the learner will be encouraged to get something to eat and drink and return to lessons as normal. Should the learner's condition remain unchanged or deteriorate, the steps 1 – 6 above should be further carried out.

The academy's duty first aider will re-assess their condition, before deciding whether it is appropriate to send a learner home.

We encourage all learners to consider their nutritional needs, to be Productive and stay well during the Academy Day. If the learner has no means of providing themselves with appropriate nutrition whilst at the Academy, arrangements can be made to ensure their well – being is paramount. This may include the use of a dinner slip or telephoning the parents to bring adequate nourishment into the academy.

Pain relief

The Academy cannot provide pain relief. Where a learner has pain that is not a result of injury, we may request that parents / carers bring pain relief to the learner at the Academy, to enable them to carry on their day. Parents / carers will be responsible in this instance for administering the pain relief to the learner.

Temperature

The Academy recommends the use of an infrared or tympanic thermometer in the Academy, should a learner feel unwell. First Aiders using the thermometer will receive training on its use and follow the principles below.

We currently have infrared thermometers in the first aid room, and where temperatures are reaching an increased level, first aid staff will also check, using the tympanic thermometer.

All emergencies outside of the first aid room will require the use of the tympanic thermometer.

- Normal temperature between 36°c and 37.4°. Learners may remain in the Academy
- Elevated Temperature 37.5°and over. Learner may want to, and should be allowed to go home
- Fever 38°and over – learner will need to go home

Temperature lower than a normal body temperature may indicate illness. An attempt should be made to warm the learner and temperature re checked after 15 minutes. If there is no improvement, the learner should be sent home.

Infection control, Vomiting & diarrhoea.

The Academy works in conjunction with the government guidelines on infection control in schools and childcare settings.

- Diarrhoea – this is noted after 3 episodes of loose stools within 24 hours, and a learner should be sent home.
- Vomiting – Where a learner has not eaten, they should be encouraged to do so. Vomiting can be a symptom of anxiety, so communication with the learner in a caring manner, with some time out of lesson may be effective. Check for underlying medical conditions. If symptoms of Norovirus are present, or the learner has an elevated temperature, they should be sent home.

Learners sent home with these symptoms should not return to school until 48 hours after the symptoms have stopped.

Learners usually do not need to go home in the following instances:

- Vomiting Bile is generally green / yellow with a sour Odour and generally due to having an empty stomach.
- Vomiting Liquid: can be clear or coloured and is generally the result of drinking something too quickly, or on an empty stomach.
- One off episode such as eating too much or too much rich food or sweets / chocolate
- They have no other symptoms
- It is not witnessed by an adult.

Sepsis

is an emergency medical condition where the immune system overreacts to an infection. It affects people of all ages and, without urgent treatment, can lead to organ failure and death. The numbers are staggering – 245,000 people develop sepsis every year in the UK, and 48,000 die. All first aid staff need to be aware. Training can be provided on request. For symptoms and information, please visit the Sepsis Trust.

Sepsis E-learning | The UK Sepsis Trust

Staff Illness in the academy

Staff who feel unwell should make a judgement, as adults, about their own suitability to be in the academy, and inform their line manager as required. They may use the first aid room for checking temperature and to take any medication in privacy.

Reporting

The treatingFirst Aider should complete a record of first aid provision into the appropriate report. (Accident report or illness report)

All injuries, accidents and illnesses, however minor, must be reported to a first aider and they are responsible for ensuring that the accident / illness report is filled in correctly and that parents are kept informed as necessary.

Accident Report:

All injuries, accidents, and dangerous occurrences on or off the Academy site if in connection with the Academy must be recorded in the accident report; this is an on-line document maintained by the Academy First Aider. The date, time and place of the event or illness must be noted with the personal details of those involved with a brief description of the nature of the event or illness. Records should be stored for at least 3 years or if the person injured is a minor (under 18), until they are 21.

As above, we have an illness report which should be completed for all Non-Accidents.

Currently, our system is known as Medical Tracker, owned and managed through the business trading name of Conkka uk. All GDPR details can be sought via out GDPR compliance team.

Primary record keeping

Every classroom has a clearly marked cupboard which contains a book to record accidents & illness on paper versions. This should then be given to the main office in primary or secondary to be recorded onto the tracker.

Reporting to Parents:

Not all incidents in school need to be reported to a learner's parent. In the event of accident or injury where we deem it necessary, 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 First Aider if necessary.

Reporting to HSE

The Academy is legally required under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (SI 1995/3163) (**RIDDOR**) to report certain incidents to the HSE. The person responsible for reporting all incidents / accidents involving staff or learners is Richard Canavan

Immunisations

From time to time the Academy will host the school's immunisation team in conjunction with the national immunisation strategy, for Human Papilloma Virus (HPV), Influenza, and School Leaver Booster (SLB). The team mobile number is: 07702821955.

We have a copy of the GDPR statement from the team, should it be requested.

Where possible, these should be booked in advance with the immunisation team, and an event request form completed on the staff dashboard.

- Use the Lecture Theatre as first choice of venue
- 30 chairs (Facilities)
- 5 exam type tables (Facilities)
- 1 round table (Facilities)
- water
- 1 member of the Administration team to collate the whereabouts of and collect learners from lessons.
- Pastoral teams should be kept informed when their year groups have been selected for immunisation.
- Nursing teams must be made aware of fire and safety procedures
- Access to the internet for nursing teams
- Table and seating for admin team member
- Laptop for admin to use.
- Screens

Monitoring & Review:

There will be a termly review of reported incidents, which is carried out by the First Aider in order to take note of trends and areas of improvement in accidents and illnesses. This will form part of the annual First Aid Needs (risk) assessment. The information may help identify training or other needs and be useful for investigative or insurance purposes.

In addition, the health & safety officer will undertake a review of all procedures following any major incident to check whether the procedures were sufficiently robust to deal with the major occurrence or whether improvements should be made.

The policy will be reviewed annually by The Academy First Aider, in consultation with other significant members of staff and when changes to the policy may be required.

Document Control

Version	Date	Comments	Author
1	03/09/20	Completion	STO
1	09/09/20	reviewed	PDI / JTY
1	14/09/20	ratified	Governing bODy
1	9/9/2020	Covid addendum added	STO
1	28/06/2022	Multiple casualties & immunisations added. Illness updated. Safeguarding updated. Covid updated.	STO
1		• Industrial Action by YAS • Head injuries	
1	12/07/2023	• Update to 11th Edition & ERC Guidelines 2021. • Sepsis • Medical tracker • COVID	STO
1	25/07/2023	• Reviewed for release	STO
1	02/10/2024	• Removal of covid addendum • Immunisations – added use of screens. • Location of first aid boxes in primary • Primary record keeping • Health and safety officer changed	
1	2nd October 2025	• Added mass casualty • TST • Methane • Removed ops director • Updates to some sentences • Update first aid box locations	