Our Rock Academy

First Aid Policy

" A nurturing, ambitious and inclusive school where every child feels known, valued and connected."

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Version Control

Date	Revisions

Policy statement and aims

Our Rock Academy is an independent secondary school specialising in supporting pupils with SEND and SEMH in Rochester. First aid arrangements will reflect pupils' Autism, SEND and Social, Emotional and Mental Health needs, alongside the needs of employees and visitors.

The school will provide appropriate trained personnel, equipment and facilities, communicate how to obtain help, give prompt care within staff competence and use accurate records to improve safety. Pupils will receive reasonable adjustments so that communication, sensory needs or disability do not create avoidable barriers to treatment or participation.

Legislation and guidance

This policy reflects the Independent School Standards on first aid and medical accommodation, health and safety and first aid law, the Equality Act 2010, and relevant DfE and HSE guidance. Safeguarding, medicines, incident reporting and data protection requirements are addressed in the procedures below.

Our Rock uses the DfE guidance *Supporting pupils with medical conditions at school* to inform its practice. Its section 100 statutory duty applies to maintained schools, academies and pupil referral units, rather than independent schools.

Roles and responsibilities

The Proprietor is responsible for ensuring that the school has suitable first aid and medical support arrangements, including sufficient resources, trained staff, equipment and facilities. The Proprietor receives information about significant incidents and risks so that any necessary improvements can be made.

The Headteacher oversees the day-to-day arrangements. This includes reviewing the first aid needs assessment, ensuring enough trained first aiders are available throughout the school day and for visits, and making sure staff know how to obtain help. The appointed person checks supplies and keeps the arrangements current. First aiders provide care within their training and record the care given.

The Deputy Headteacher and SENDCo coordinate support for pupils with medical conditions. They work with pupils, families and health professionals to develop and review individual healthcare plans and make sure relevant staff understand the support and emergency action required. All staff must follow the plans relevant to their role and report concerns promptly. Parents and carers are asked to keep the school informed of changes to their child's needs and provide

prescribed medicines; the school remains responsible for arranging support during school activities.

First aid procedures

Immediate response

The first member of staff present will check for immediate danger, summon a first aider and stay with the person unless leaving is necessary to obtain help. Another adult should supervise other pupils, protect privacy and bring equipment. Do not move an injured person unnecessarily. Follow emergency service instructions and current training.

Call 999 immediately for a suspected life-threatening emergency, including serious breathing difficulty, suspected anaphylaxis, unresponsiveness or other severe illness or injury. Any member of staff may call; permission from a senior leader or parent is not required. Give the site address and access point in Appendix 1, describe the person's condition and arrange for someone to meet the ambulance. Follow dispatcher instructions, including CPR and use of an AED where indicated.

The first aider will monitor the person until care is handed over. Inform the Headteacher or delegate and contact the family promptly without delaying treatment. A pupil must remain supervised. Where a parent cannot arrive in time, a suitable member of staff will accompany the pupil if permitted and safe arrangements can be made. Share relevant medical information with clinicians. Do not use private transport in place of an ambulance where emergency care is needed.

Where a pupil has a PEEPs plan in place, the evacuation procedure should be followed if mobility is an issue.

Consent dignity and communication

Explain proposed care in an accessible way and seek valid consent where practicable, taking account of the young person's age, understanding and capacity. Young people aged 16 and 17 are generally presumed able to consent; a child under 16 may be competent to consent to the particular treatment. Where the child cannot consent, seek consent from a person with parental responsibility for non-emergency care as appropriate.

Do not delay necessary emergency help or life-saving treatment while trying to contact a parent or locate a consent form. If treatment is refused and there is a serious risk, seek urgent clinical or emergency service advice; staff must not assume that this policy authorises forced treatment. Record the circumstances and advice received.

Use the pupil's preferred communication method, clear short explanations and processing time. Offer a familiar adult and reduce noise, light and unnecessary touch where safe. Explain before touching, preserve privacy and consider a second adult where appropriate. Adjustments must not delay urgent treatment. Record observations of pain or distress, including non-verbal signs, and avoid diagnostic assumptions.

Illness minor injury and head injury

A first aider will assess minor injuries and illness, provide care within training and seek medical advice where needed. The Headteacher or delegate will arrange collection when a pupil is not well enough to remain, with appropriate supervision and advice to the collecting adult. Sending a pupil home must not replace assessment of an emergency.

Treat head injuries cautiously, follow current first aid training and seek urgent help for concerning symptoms. Inform the parent or carer promptly about a head injury and provide written advice on monitoring and when to seek medical help. Record the handover. A pupil with suspected concussion must not return to sport that day; return to activity must follow appropriate clinical advice.

Medical conditions and emergency medicines

Before attendance, identify medical needs through admissions, family discussion and professional advice. Where required, an individual healthcare plan must specify symptoms, routine support, emergency action, medicines, trained staff, consent and arrangements for visits. This will be reviewed at least annually and whenever needs change. Staff administering prescribed rescue medication must have appropriate instruction and competence for the individual procedure.

The plan will also record any triggers, the pupil's day-to-day needs, adjustments to learning or activities, and what the pupil can manage independently. Where appropriate, pupils will be supported to carry or access their own medication promptly, with supervision matched to their needs.

For suspected anaphylaxis, call 999 and give adrenaline promptly in accordance with current training and emergency guidance. Bring the device to the person; do not make them walk. Follow the individual action plan where available. Absence of a prior diagnosis or parental consent must not delay life-saving emergency action. The Headteacher will confirm the school's spare adrenaline arrangements, supply, accessibility and staff training before opening.

Prescribed reliever inhalers must be readily available. A school spare salbutamol inhaler has different eligibility and consent arrangements from emergency adrenaline: use requires the appropriate prescribed-reliever status and written parental consent under the school's emergency inhaler procedure. For serious breathing difficulty, call 999 and follow clinical advice.

Medication will be stored securely under the medicines procedure while allowing prompt access to emergency medication. Staff will check expiry dates, record administration and arrange replacement after use. Medicines are not stored in general first aid kits. Allergy prevention, food handling and planned medical support must be coordinated with relevant school procedures.

Pupils will not routinely be sent home, denied food, drink or breaks needed to manage their condition, or prevented from joining school activities because of a medical condition. Staff will follow the individual healthcare plan and seek medical advice where a change in support is needed.

Off site activities and infection control

Visit leaders will assess first aid cover, communication, travel time to help, individual medical needs, medicines and emergency contacts before departure. Take a suitable kit and a working means of contacting emergency services. Allocate responsibilities for accompanying an injured pupil and supervising the group. A venue's provision does not remove the school's responsibility to check suitable arrangements.

Use hand hygiene, suitable disposable gloves and other protective equipment indicated by the risk. Deal with blood and body fluids under infection-control arrangements, use appropriate waste disposal and report exposure incidents promptly. Staff must not handle discarded sharps directly; isolate the area and obtain trained assistance.

First aid equipment

The needs assessment determines the number, contents and location of kits. Kits will contain suitable dressings, plasters, bandages, eye pads, gloves and other assessed supplies. Equipment for particular activities or medical needs will be provided where required. The appointed person will check supplies at least monthly and after use, replace expired or damaged items and record checks.

First aid locations and staff contact arrangements will be clearly identified and accessible. The Headteacher will confirm suitable medical accommodation for examination and treatment and short-term care of sick or injured pupils, including a washing facility and nearby toilet, and any additional accommodation needed for complex needs. Appendix 1 records the actual arrangements; it must be completed following a site check.

Where an AED is provided, it must be accessible, maintained to the manufacturer's instructions and included in staff induction and emergency planning. Confirm its location and maintenance arrangements in Appendix 1; this draft does not assume one is installed.

Record keeping and reporting

Incident records and family communication

The attending member of staff will complete a factual first aid or accident record as soon as practicable, normally the same day. Record symptoms and observations, injury or illness, time and location, care and medicines given, staff involved, advice sought, family contact and handover. Record near misses through the school's incident system even where treatment is not required. Appendix 2 provides the minimum fields.

Tell parents or carers about pupil injuries, illness and treatment on the same day; make immediate contact for significant incidents. Provide accessible written information where follow-up is required. Record unsuccessful contact attempts and escalate to the Headteacher or delegate. Where family contact may create a safeguarding risk, seek immediate advice from the DSL and follow safeguarding procedures.

RIDDOR

Reporting of Injuries, Diseases and Dangerous Occurrences Regulations.

The Headteacher will ensure that the responsible person checks reportability and submits required reports to the enforcing authority. For pupils and other non-workers, an injury normally requires reporting where it arises from a work-related accident and the person is taken directly from the scene to hospital for treatment. Hospital attendance or diagnostic checks alone do not establish reportability. Consider failures in supervision, equipment, premises or the organisation of the activity; ordinary sports injuries are not automatically reportable.

Event	Reporting action
Reportable death, specified worker injury, non-worker injury meeting the statutory test, or listed dangerous occurrence	Notify without delay and ensure the report is received within 10 days.
Worker unable to perform normal duties for more than 7 consecutive days because of a work-related injury	Report within 15 days of the accident. Exclude the accident day; include weekends and rest days.
Diagnosed reportable occupational disease	Report when the responsible person receives the relevant diagnosis.
Worker incapacity exceeding 3 days but not 7	Record; not reportable solely on this basis.

Use current HSE guidance when deciding whether a near miss is a listed dangerous occurrence or an injury is reportable. Keep the decision, rationale and any report reference. RIDDOR reporting does not replace safeguarding referrals, insurer notifications or other applicable requirements.

Safeguarding confidentiality and retention

Pass unexplained injuries, concerning patterns, disclosures or suspected abuse to the DSL promptly, following Keeping children safe in education 2026 and the Safeguarding Policy. In an emergency, take immediate protective action. Record the pupil's own words where relevant; do not investigate beyond the staff member's role.

Store health and incident records securely with access restricted to those who need the information. Share necessary information with emergency services and relevant professionals lawfully and proportionately. Do not display confidential medical details on public notices. RIDDOR records must be retained for at least three years from the date made. This is not a universal deletion date: pupil, safeguarding and other records may need much longer retention under the approved retention schedule, legal requirements and insurer advice. Suspend routine destruction where a claim, investigation or safeguarding matter requires preservation.

Training

Our Rock will ensure that at least one appropriately qualified first aider is available whenever pupils are on site. The Headteacher will check cover for breaks, absence, visits and activities outside normal school hours. If qualified cover is unavailable, the affected activity will be reorganised until safe arrangements are in place. The first aid needs assessment will be reviewed as pupil numbers, staffing and medical needs change.

First aiders will requalify before their certificates expire. Staff supporting a pupil with a medical condition will also receive training for that pupil's individual healthcare plan and any medication or procedure they are expected to carry out. Competence will be checked before they take on that responsibility. Training and expiry dates will be recorded in Appendix 3 or the staff training register.

Induction for all staff, including temporary staff, will show them how to summon a first aider, call 999, find first aid kits and emergency medicines, and access the main building and external classrooms in an emergency. Staff will be told about the individual healthcare plans they need to follow and how to record and report an incident.

Monitoring arrangements

The Headteacher will review implementation termly, including incidents, near misses, stock checks, staff cover, certificates, healthcare plans and reasonable adjustments. Serious incidents and recurring concerns will trigger immediate review and corrective action. Report significant risks promptly to the Proprietor and provide at least annual assurance on policy effectiveness.

The Deputy Headteacher and SENDCo will coordinate the annual policy review with the Headteacher. Review sooner after significant incidents or changes in law, guidance, premises, provision or pupil needs. The Proprietor will approve material revisions. Before approval, check subsequent independent-school allergy requirements and confirm all Appendix 1 arrangements.

Appendix 1 First aid personnel and operational arrangements

Complete and verify before opening. Keep this operational appendix current when staff, facilities or arrangements change. Publish only the contact and location information staff and visitors need; keep private numbers and pupil medical information secure.

Role or arrangement	Confirmed details
Headteacher and Deputy Headteacher	Mrs Michelle Homer. michelle.homer@ourrockacademy.co.uk Miss Lauren Benson. lauren.benson@ourrockacademy.co.uk
Appointed person	Michelle Homer
Daily cover and absence contingency	The Headteacher checks that a qualified first aider is available before pupils arrive each day. If the usual first aider is absent, qualified cover must be arranged and confirmed before pupils attend.
School address and ambulance entrance	Our Rock Academy Clifton Close Strood ME2 2HG Large gate
Medical accommodation	Medical Room, with running water and a nearby toilet, available for examination, treatment and short-term care of sick or injured pupils. The room has a bed, pedal bin, lockable medical cabinet and fridge.
First aid kit locations	In medical room
Emergency medicines and spare stock	Spare adrenaline auto-injectors: in a clearly identified, unlocked location in the Medical Room. Other medicines: stored in accordance with the medicines procedure, with emergency medicines readily accessible.
Incident records and reporting	In accident book

First aider name	Qualification	Expiry
Michelle Homer	Level 3 Paediatric First Aid Level 3 Emergency First Aid at Work	16th July 2028

Headteacher verification: _____ Date: _____

Appendix 2

Record No.

Pupil Accident Record

1. About the person who had the accident

Name.....

Year.....

2. About you the person filling in this record

Name.....

Role.....

3. About the accident (continue on the back of this form if you need to)

Date when it happened.....
Time.....

Where it happened. State which room or place.

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Say how the accident happened. Give the cause if you can.

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If the person who had the accident suffered an injury, say what it was and what first aid was given.

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What happened to the person immediately afterwards (e.g. went home, went back to class, went to hospital)

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4. About who was notified

Signature of person completing this form.....Date.....

Signature of Head teacher.....Date.....

Signature of parent/guardian.....Date.....

Appendix 3 First aid training log

Record initial training, requalification, annual refreshers and additional medical-condition training. Keep certificates and competency evidence securely. Review upcoming expiry dates each term and before allocating cover.

Staff member	Course and provider	Completed	Expiry or next update
Michelle Homer	Level 3 Paediatric First Aid Level 3 Emergency First Aid at Work MediAid UK	16th July 2025	16th July 2028