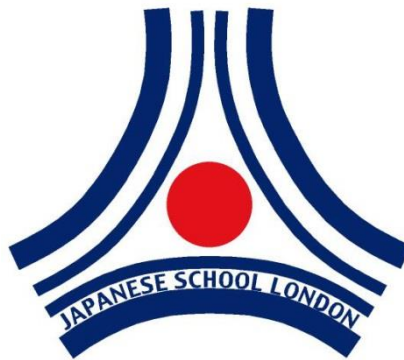


First Aid Policy

The Japanese School



Approved by:	The School Management Committee	Date: September 2025
Last reviewed on:	September 2025	
Next review due by:	September 2026	

Version Number	Modified By	Modifications Made	Date Modified
1.1	K. Nishihara	Update format.	01/04/2021
1.2	K. Okamoto	Updated	28/04/2022
1.3	K. Okamoto	Review and update	04/05/2022
1.4	K. Okamoto	Review and update	01/06/2023
1.5	K. Okamoto	Review and update	01/09/2024
1.6	A. Fusada	Review and update	23/09/2025

Contents

1. Authority and circulation	3
2. Definitions	3
3. Aims of this policy	3
4. Who is responsible?	3
5. First aid boxes	4
6. Information on pupils	4
7. Procedures for pupils with medical conditions such as asthma, epilepsy, diabetes, etc. ...	4
8. Procedure in the event of illness	4
9. Procedure in the event of an accident or injury	4
10. Procedure in the event of contact with blood or other body fluids	5
11. Reporting	5
12. Monitoring	6
APPENDIX	7

1. Authority and circulation

1-1. This policy has been authorised by the School Management Committee of The Japanese School Limited (the school). It is available to parents and pupils and to all members of school staff.

1-2. 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 risk assessment carried out by the school with regard to all staff, pupils and visitors.

1-3. 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*, School Premises (England) Regulations 2012 and Education (Independent School Standards) Regulations 2014.

2. Definitions

2-1. 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.

2-2. First Aiders are members of staff approved First Aid course and hold a valid certificate of competence in First Aid at Work (FAW) or Emergency First Aid at Work (EFAW).

2-3. 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).

2-4. 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.

2-5. Staff means any person employed by the school, volunteers at the school and self-employed people working on the premises.

3. Aims of this policy

3-1. To ensure that the school has adequate, safe and effective First Aid provision in order for every pupil, 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.

3-2. To ensure that all staff and pupils are aware of the procedures in the event of any illness, accident or injury.

3-3. 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 999 for the emergency services in the event of a medical emergency before implementing the terms of this Policy and make clear arrangements for liaison with ambulance services on the school site.

4. Who is responsible?

4-1. The Headteacher has overall responsibility for ensuring that the school has adequate and appropriate First Aid equipment, facilities and First-Aid personnel and for ensuring that the correct First Aid procedures are followed.

4-2. The Headteacher delegates to the Deputy Headteacher and the School nurse the day-to-day responsibility for ensuring that there are adequate and appropriate First Aid equipment, facilities and appropriately qualified First Aid personnel available to the school. The Deputy Headteacher, the School nurse and the Headteacher will regularly (at least annually) carry out a First Aid risk assessment and review the school's First Aid needs to ensure that the School's First Aid provision is adequate.

4-3. The Headteacher is responsible for ensuring that all staff and pupils are aware of, and have access to, this policy.

4-4. The Headteacher delegates to the Deputy Headteacher responsibility for collating medical consent forms and important medical information for each pupil and ensuring the forms and information are accessible to staff as necessary.

4-5. The Headteacher is responsible for ensuring that staffs have the appropriate and necessary First Aid training as required and that they have sufficient understanding, confidence and expertise in relation to First Aid.

4-6. First Aiders: The Headteacher is responsible for ensuring that the school has the minimum number of First Aid personnel (First Aiders and/or Appointed Persons).

The main duties of First Aiders are to give immediate First Aid to pupils, staff or visitors when needed and to ensure that an ambulance or other professional medical help is called when necessary. First Aiders are to ensure that their First Aid certificates are kept up to date through liaison with the Headteacher.

4-7. 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, at all times, to secure the welfare of the pupils.

4-8. Anyone on School premises is expected to take reasonable care for their own and others' safety.

5. First aid boxes

First aid boxes are marked with a white cross on a green background and are ~~stocked~~. Each container adheres to British Standard 8599.

A designated first aider must take a fully stocked first aid kit on all school trips.

6. Information on pupils

6-1. Parents are requested to provide written consent for the administration of First Aid and medical treatment before pupils are admitted to the school.

6-2. The Deputy Headteacher (in consultation with the Head Teacher if necessary) will be

responsible for reviewing pupils' confidential medical records and providing essential medical information regarding allergies, recent accidents or illnesses, or other medical conditions which may affect a pupil's functioning at the school to the Headteacher, class teachers and First Aiders on a "need to know" basis. This information should be kept confidential but may be disclosed to the relevant professionals if it is necessary to safeguard or promote the welfare of a pupils or other members of the school community.

7. Procedures for pupils with medical conditions such as asthma, epilepsy, diabetes, etc

Wherever it is safe and appropriate to do so, pupils will be permitted to carry and self-administer their own emergency medication (e.g. auto-injectors, inhalers, insulin pens).

Teachers and designated First Aiders will be informed of each pupil's medical needs, support them in taking their medication correctly and safely, and ensure that any administration is recorded and reported to parents.

Spare emergency medication for pupils will be stored in the staff room and kept readily accessible to all relevant staff members.

8. Procedure in the event of illness

Illness: If a student is unwell during lessons, then they should consult the member of staff in charge who will assess the situation and decide on the next course of action. (Appendix)

9. Procedure in the event of an accident or injury

9-1. If an accident occurs, then the member of staff in charge should be consulted. That person will assess the situation and decide on the next course of action, which may involve calling immediately for an ambulance. Appointed Persons or First Aiders can also be called for if necessary.

9-2. In the event that the First Aider does not consider that they can adequately deal with the presenting condition by the administration of First Aid, then they should arrange for the injured person to access appropriate medical treatment without delay.

9-3. Ambulances: If an ambulance is called then the First Aider in charge should make arrangements for the ambulance to have access to the accident site. Arrangements should be made to ensure that any pupils are accompanied in the ambulance if necessary, or followed to hospital, by a member of staff if it is not possible to contact the parents in time.

10. Procedure in the event of contact with blood or other bodily fluids

10-1. The First Aider should take the following precautions to avoid risk of infection:

- (1) cover any cuts and grazes on their own skin with a waterproof dressing;
- (2) wear suitable disposable gloves when dealing with blood or other bodily fluids;
- (3) use suitable eye protection and a disposable apron where splashing may occur;
- (4) use devices such as face shields, where appropriate, when giving mouth to mouth resuscitation;
- (5) wash hands after every procedure.

10-2. If the First Aider suspects that they or any other person may have been contaminated with blood and other bodily fluids which are not their own, the following actions should be taken without delay:

- (1) wash splashes off skin with soap and running water;
- (2) wash splashes out of eyes with tap water or an eye wash bottle;
- (3) wash splashes out of nose or mouth with tap water, taking care not to swallow the water;
- (4) record details of the contamination;
- (5) report the incident to the Health and Safety Officer and take medical advice if appropriate.

11. Reporting

11-1 The First Aider should complete a record of first aid provision

11-2 All injuries, accidents and illnesses, however minor, must be reported to the Deputy Headteacher and he is responsible for ensuring that the accident report forms and databases are filled in correctly and that parents and HSE are kept informed as necessary.

11-3 **The Records:** All injuries, accidents, illnesses and dangerous occurrences (unless very minor) must be recorded in the Records. 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. What happened to the injured or ill person immediately afterwards should also be recorded.

The record should be readily accessible, and details recorded should include:

- date, time and place of incident
- name of injured or ill person
- details of the injury or illness
- details of what first aid was given
- what happened immediately after the incident (for example, went home, went back to class, went to hospital)
- name and signature of first aider or person dealing with the incident

11-4 **Reporting to Parents:** In the event of 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 Deputy Headteacher if necessary.

11-5 Insurance

The Japanese School Ltd shall arrange commercial insurance which covers all the activities of first aiders.

11-6 **Reporting to HSE:** The School is legally required under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (SI 1995/3163) (**RIDDOR**) to report the following to the HSE

(1) Accidents involving Staff

- Work related accidents resulting in death or major injury (including as a result of physical violence) must be reported immediately (major injury examples: dislocation of hip, knee or shoulder; amputation; loss of sight; fracture other than to fingers, toes or thumbs);
- Cases of work related diseases that a doctor notifies the school of (for example: certain poisonings; lung diseases; infections such as tuberculosis or hepatitis; occupational cancer);
- Certain dangerous occurrences (near misses – reportable examples: bursting of closed pipes; electrical short circuit causing fire; accidental release of any substance that may cause injury to health).

(2) Accidents involving pupils or visitors

Accidents where the person is killed or is taken from the site of the accident to hospital and where the accident arises out of or in connection with:

- Any school activity (on or off the premises);
- The way a school activity has been organised or managed (e.g. the supervision of a field trip);
- Equipment, machinery or substances;

–The design or condition of the premises.

11.7 Automated external defibrillators

There are automated external defibrillators (AED) as part of their first aid equipment.
Further details are provided in the AED guide for schools.

11.8 Medicines administration in schools

First aid at work does not include giving tablets or medicines.

Medication should not be kept in a first aid container.

The administration of prescription only medication specified in Schedule 19 of the Human Medicines Regulations 2012 should only be given by those trained to do so. However, where a first aid needs assessment identifies that Schedule 19 medication may be required to be administered in an emergency, the Japanese School will provide further first aiders with additional training so that they can be aware of the symptoms and condition and administer lifesaving medication in an emergency.

11.9 Mental health

The Japanese School will appoint a senior mental health lead. The mental health leader shall make the best use of existing resources and effort to help improve the wellbeing and mental health of pupils and staff with professional advisor's assistance, if necessary.

12. Monitoring

The Headteacher will organise a regular review of the Records in order to take note of trends and areas of improvement in accidents and illnesses. This will form part of the (at least) annual First Aid risk assessment. The information may help identify training or other needs and be useful for investigative or insurance purposes. In addition, the Headteacher 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.