



Accident and Incident Policy

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Policy Responsibility: Business Management Team

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Date approved: 27/08/2025

Review Date: Annual, 27/08/2026

Version: 2

Location: Staffroom folder, Policy Folder (Digital & Hardcopy), Website

****Please see the Health and Safety Policy & First Aid Policy***

An accident is an unplanned, uncontrolled event, which causes, or could cause injury, damage or loss. In most cases accidents can be avoided and it is our intentions to prevent as many as possible.

We aim to reduce the risk of accidents by:

- Making risk assessments for as many foreseeable risks as possible. By completing risk assessments we can identify hazards and look at how we can eliminate or reduce the risk.
- The premises are regularly checked and used properly.
- Staff and to some extent the children, are aware of hazards? i.e. putting equipment away tidily etc.
- Staff and children are encouraged to care about their environment and their colleagues.
- Staffs identify and report hazards and risks and encourage children to do the same.
- A health and safety officer is appointed to oversee all health and safety issues.

We classify an accident as what we have witnessed and an incident as something we did not see.

All accidents and incidents are recorded on the appropriate forms (Info sheet, Serious Incident, Body Map, HSE as applicable) and reported to the parents/carer's on the day. This will usually be when by phone call or by email or if it is a serious injury or one that needs medical assistance the parent will be informed immediately.

There is always a first aider on site, who will deal with minor injuries.

In school most staff are currently First Aiders, this includes all the safeguarding team and the Head Teacher.

First aid boxes can be found at the following locations: -

- Medical Room
- Staff Room
- Science/Art Room
- Food Room
- Reception

PE or trips and visits team carry a First Aid kit to each session, taking the one from reception.

Individual pupil medication must be always easily accessible and taken whenever the pupil leaves site with education staff.

Eye wash stations:

- Medical Room

The boxes will be checked regularly, monthly, and refilled by the caretaker, any missing items will be noted and replaced as soon as possible.

If first aid is given it must be recorded on the first aid sheet and stored with the accident/incident form it relates to.

Medication:

- Medical Room Cabinets for Medication and Epi-Pens

AED (Defibrillator)

- Medical Room

Emergency Rescue Kit:

- Reception

There is always at least two first aiders on site at all times. All accidents are recorded on a sheet, which includes details of the injury and a body map. The form is signed by the SLT and is then kept in the staff incident file or child's individual section in the Info sheets file.

A record sheet containing number, name & date of all accidents/incidents is kept in the accident/incident file.

All accidents and incidents are reviewed to see if anything can be done to prevent the accident/incident happening again.

An incident form can also be used to record something, which happened that could have been dangerous, actions deemed as unwanted behaviour, an action which could cause damage, loss or injury. Some examples are:

- Loss of amenities.
- An argument.
- A temper tantrum out of the norm.
- A stranger trying to gain access to the building.
- An un-witnessed injury.

Providers must notify Ofsted and local child protection/safeguarding children's agencies of any serious accident or injury to, or serious illness of, or death of, any child whilst in their care, and act on any advice given.

Accidents/incidents relating to staff or visitors to the setting should be reported to the Manager and recorded using the School forms.

Any injury related absence lasting more than 3 days must be reported to RIDDOR.

Serious injury or death and how to deal with these events

As a registered provider we would notify Ofsted of any serious accident, illness or injury to, or the death of, any child whilst in our care, and any action taken in respect of it.

We would make the notification as soon as is reasonably practical, but within 14 days of the incident occurring.

We would also notify the local child protection agency and act on any advice given.

We would always follow our accident procedures in any accident or injury.

Procedure to follow for dealing with injuries involving blood or bodily fluids

There is always at least one first aider on site at all times and this person will be the one to deal with the injury.

See Bodily Fluids box in the medical room

Should bleeding occur at any time the following points should be followed:

- Put on latex gloves and a disposable apron.
- Try to stop the bleeding by applying pressure to the wound with a dry sterile dressing.
- Dispose of dressing into yellow clinical waste bag. (Staff toilet – disposal bin)
- Try and keep the person as calm as possible.
- Ensure there are 2 members of staff with the injured party so that if assistance is needed in any way one can remain with the person at all times.
- Deal with any spillage immediately, using disposable items such as cloths, paper towels which can be thrown away, in the clinical waste bag, after the spillage is cleaned up. Clean the area thoroughly using diluted bleach 1 part bleach to 10 parts water.
- Ensure the area is clear of other children and adults to prevent cross contamination and spread of infection.
- Ensure all non injured children are being cared for and reassured appropriately about what is happening.
- Replace the sterile dressing on the child/adult as often as needed as described in the training.
- All waste should be treated as clinical waste and discarded in the yellow bags provided.
- Hands should be washed and dried thoroughly after the child/adult is cared for and any bleeding has stopped.
- If bleeding starts again a new apron and gloves must be put on to prevent infection.
- If you feel medical assistance is required call 999 and ask for an ambulance. If they need assistance but not as an emergency inform the parents and advise them to visit their local A&E. If ever in doubt always phone for an ambulance, especially in the case of children.

The Governing Body

The governing body has ultimate responsibility for health and safety matters in the school, but delegates operational matters and day-to-day tasks to the Head Teacher and staff members.

The Head Teacher is responsible for the implementation of the first aid policy, including:

- Ensuring that an appropriate number of trained first aid personnel are present in the school at all times
- Ensuring that first aiders have an appropriate qualification, keep training up to date and remain competent to perform their role
- Ensuring all staff are aware of first aid procedures

- Ensuring appropriate risk assessments are completed and appropriate measures are put in place
- Undertaking, or ensuring that managers undertake, risk assessments, as appropriate, and that appropriate measures are put in place
- Ensuring that adequate space is available for catering to the medical needs of pupils
- Reporting specified incidents to the HSE when necessary (see section 6)

School staff are responsible for:

- Ensuring they follow first aid procedures
- Ensuring they know who the first aiders in school are
- Completing accident reports for all incidents they attend to where a first aider is not called
- Informing the Head teacher or their manager of any specific health conditions or first aid needs

First aid procedures

In the event of an accident resulting in injury:

- The closest member of staff present will assess the seriousness of the injury and seek the assistance of a qualified first aider, if appropriate, who will provide the required first aid treatment
- The first aider, if called, will assess the injury and decide if further assistance is needed from a colleague or the emergency services. They will remain on scene until help arrives
- The first aider will also decide whether the injured person should be moved or placed in a recovery position
- If the first aider judges that a pupil is too unwell to remain in school, parents will be contacted and asked to collect their child. Upon their arrival, the first aider will recommend next steps to the parents
- If emergency services are called, the school administrators will contact parents immediately
- The first aider will complete an accident report form on the same day or as soon as is reasonably practical after an incident resulting in an injury

Off-site procedures

When taking pupils off the school premises, staff will ensure they always have the following:

- A mobile phone
- A portable first aid kit

Which includes A leaflet giving general advice on first aid, individually wrapped sterile adhesive dressings 1 large sterile unmedicated dressing 2 triangular bandages – individually wrapped and preferably sterile 2 safety pins Individually wrapped moist cleansing wipes 2 pairs of disposable gloves

- Information about the specific medical needs of pupils
- Parents' contact details

Emergency medication for any pupils requiring it – eg Astham inhalers

Risk assessments will be completed by the operations managers prior to any educational visit that necessitates taking pupils off school premises.

There will always be at least one first aider on school trips and visits where permissible.

A typical first aid kit in our school will include the following:

- Regular and large bandages
- Eye pad bandages
- Triangular bandages
- Adhesive tape
- Disposable gloves
- Antiseptic wipes
- Plasters of assorted sizes
- Cold compresses
- Burns dressings
- No medication is kept in first aid kits.

Record-keeping and reporting

- Forms should include as much detail as possible and should be supplied when reporting an accident, including all of the information included in the accident form.
- A copy of the accident report form will also be added to the pupil's educational record.
- Records held in the first aid and accident book will be retained by the school for a minimum of 3 years, in accordance with regulation 25 of the Social Security (Claims and Payments) Regulations 1979, and then securely disposed of

Reporting to the HSE

The Health and Safety Manager will keep a record of any accident which results in a reportable injury, disease, or dangerous occurrence as defined in the RIDDOR 2013 legislation (regulations 4, 5, 6 and 7).

The Health and Safety Manager will report these to the Health and Safety Executive as soon as is reasonably practicable and in any event within 10 days of the incident. In this case, the Health and Safety Manager will report these to the HSE as soon as reasonably practicable and in any event within 15 days of the accident.

Reportable injuries, diseases or dangerous occurrences include:

- Death
- Specified injuries, which are:
 - o Fractures, other than to fingers, thumbs and toes
 - o Amputations
 - o Any injury likely to lead to permanent loss of sight or reduction in sight
 - o Any crush injury to the head or torso causing damage to the brain or internal organs
 - o Serious burns (including scalding)
 - o Any scalping requiring hospital treatment
 - o Any loss of consciousness caused by head injury or asphyxia
 - o Any other injury arising from working in an enclosed space which leads to hypothermia or heat-induced illness, or requires resuscitation or admittance to hospital for more than 24 hours
- Injuries where an employee is away from work or unable to perform their normal work duties for more than 7 consecutive days (not including the day of the incident). In this case, the relevant member of staff will report these to the HSE as soon as reasonably practicable and in any event within 15 days of the accident
- Where an accident leads to someone being taken to hospital
- Occupational diseases where a doctor has made a written diagnosis that the disease is linked to occupational exposure. These include:
 - o Carpal tunnel syndrome
 - o Severe cramp of the hand or forearm
 - o Occupational dermatitis, e.g. from exposure to strong acids or alkalis, including domestic bleach
 - o Hand-arm vibration syndrome
 - o Occupational asthma, e.g from wood dust
 - o Tendonitis or tenosynovitis of the hand or forearm
 - o Any occupational cancer
 - o Any disease attributed to an occupational exposure to a biological agent
- Near-miss events that do not result in an injury but could have done.

Examples of near-miss events relevant to schools include, but are not limited to:

- o The collapse or failure of load-bearing parts of lifts and lifting equipment
- o The accidental release of a biological agent likely to cause severe human illness
- o The accidental release or escape of any substance that may cause a serious injury or damage to health
- o An electrical short circuit or overload causing a fire or explosion Information on how to make a RIDDOR report is available here: How to make a RIDDOR report, HSE <http://www.hse.gov.uk/riddor/report.htm>

Notifying parents

The Senior Leadership Team will inform parents of any accident or injury sustained by a pupil, and any first aid treatment given, on the same day, or as soon as reasonably practicable.

Reporting to Ofsted and child protection agencies

The Senior Leadership Team will notify Ofsted of any serious accident, illness or injury to, or death of, a pupil while in the school's care. This will happen as soon as is reasonably practicable, and no later than 14 days after the incident.

The Senior Leadership Team will also notify the placing Authorities Child Protection and Safeguarding Board of any serious accident or injury to, or the death of, a pupil while in the school's care.

Training

All school staff are to undertake first aid training. All first aiders must have completed a training course and must hold a valid certificate of competence to show this. The school will keep a register of all trained first aiders, what training they have received and when this is valid until.

Staff will receive training about anaphylaxis and the administration of Epi-pens in relation to any pupils who is admitted or is diagnosed as needing them.