



Holy Cross Catholic Multi-Academy Company

Christ the King Catholic
Primary School

First Aid 2026 - 2029

Responsible for Policy	Jennifer Riach
Resources Committee Approval Date	September 2026
Posted on Website	September 2026
Date of Policy Review	September 2029

This policy is designed to promote the health, safety and welfare of children, staff and visitors to this school through the provision of first aid equipment and trained personnel in accordance with the requirements of the Health and Safety (First Aid) Regulations 1981 and Approved Code of Practice and Guidance.

The Aims of the Policy

The aim of providing first aid is to save lives and to ensure that minor injuries and illnesses do not escalate into major ones. The aim of this policy is to ensure that:

- We are compliant with all relevant legislation.
- A person is appointed to take charge of first aid arrangements.
- Staff nominated as first aiders receive up-to-date training by a suitably recognised organisation.
- Suitably stocked and marked first aid containers are available at all appropriate locations throughout the school.
- All members of staff are fully informed with regard to the first aid arrangements.
- All staff are aware of hygiene and infection control procedures.
- Written records are maintained of any accidents, injuries, diseases, or dangerous occurrences. Reports are undertaken as required under the reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013.
- First aid arrangements are regularly reviewed and assessed to maintain adequate first aid provision.
- Ensure first aid systems are aligned with safeguarding procedures and that any welfare concerns identified through accident reporting are referred to the Designated Safeguarding Lead (DSL)
- The school recognises that injuries, repeated accidents, unexplained marks, patterns of attendance linked to illness, self-harm concerns or medical presentations may indicate safeguarding concerns. All staff have a responsibility to report concerns immediately in line with the Child Protection and Safeguarding Policy

The school will comply with:

- ✓ Keeping Children Safe in Education 2026
- ✓ Working Together to Safeguard Children
- ✓ Supporting Pupils at School with Medical Conditions

Safeguarding

Designated Safeguarding Lead: Headteacher

Deputy DSLs: Senior Leaders: – Deputy Headteacher and Assistant Headteacher

The school acknowledges that safeguarding is everyone's responsibility.

Any injury or incident causing concern must be reported to the Designated Safeguarding Lead (DSL) immediately.

Patterns of injuries, repeated accidents, delayed treatment, unusual explanations or concerns arising during first aid provision will be considered in conjunction with safeguarding procedures.

Staff must follow the Child Protection and Safeguarding Policy where there are concerns relating to a child's welfare

Procedure

First aid provision will be available at all times while people are on the school premises and also off the premises while on school visits.

Risk Assessment

In accordance with the school's Health and Safety Policy, the annual risk assessment of all school buildings and facilities will pay particular attention to:

- Practical activities
- The use of machinery
- Storage of hazardous substances
- The use of equipment for sports and physical education

From this assessment, a judgment will be made as to how many trained first aiders are required to provide an effective and safe response to accidents and injuries.

A judgment will also be made as to how many fixed and portable first aid containers should be available and where they are to be located.

Specific consideration will be given to staff or children who have special health needs or disabilities.

In determining the level of provision, the Leadership Team will consider:

- The provision during lunch times and breaks
- The adequacy of the provision to account for staff absences
- The provision of first aid for off-site activities and school trips
- The provision for practical activities

Qualification and Training

All school first aiders hold a certificate of competence that is valid for three years.

Refresher training and retesting of competence will be arranged at least three months before certificates expire.

The school will consider interim refresher training to maintain first aiders' basic skills and keep them up to date with changes, where necessary, e.g. adrenaline pen, CPR and defibrillator training.

First aid training will be complemented by staff every three years by the Midland Training Company. All staff will receive safeguarding updates in accordance with Keeping Children Safe in Education requirements.

Staff administering first aid should understand how to identify and report safeguarding concerns.

Early Years Foundation Stage (EYFS)

All newly qualified staff with Level 2 or 3 childcare qualification will also hold a current Paediatric First Aid or Emergency Paediatric First Aid Certificate.

At least one person who has a current Paediatric First Aid Certificate will be on the premises and available at all times when children are present and will accompany children on outings.

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/532503/PFA_Consultation_findings_and_response.PDF

First Aid Materials, Equipment and Facilities

First aid containers will be:

- Clearly marked
- Located near to hand washing facilities
- Stocked in accordance with HSE recommendations

Portable first aid containers will be available for all school trips and other activities that take place over 200 metres from school buildings. All first aid containers will be identified by a white cross on a green background.

Where it is known that staff or children engaged in an out of school activity have specific health needs or a disability, the contents of the first aid container will include the resources to meet these specific needs, e.g., a supply of insulin or an adrenaline pen.

Labelled first aid boxes are located in:

- 1 in the staffroom at both school sites
- 1 in the EYFS area
- 2 defibrillators – located in the main school office at both sites.
-

A first aid box contains:

- Sterile non-woven swabs, wound dressings, plasters
- Scissors, micropore
- Triangular bandage/eye pads
- Large/medium bandages and powder free gloves
- Sterile water
- No medicine/tablets are to be kept in the first aid bags

Classroom First Aid Grab Bags

Each class in school has their own first aid bag which contains:

- Sterile non-woven swabs, wound dressings, plasters.
- Scissors, micropore
- Triangular bandage
- Large/medium bandages and powder free gloves
- Emergency medicine/tablets can be kept in the class first aid bag to take out at playtimes/lunchtimes.

The bag will be kept out of reach of the children and medication used in accordance with a child's EHCP or CCP

Information and Notices

First aid notices giving the location of first aid containers and the names of members of staff who are certificated first aiders will be prominently displayed in the first aid kits and in various locations around school.

The school will make every effort to ensure that first aid notices are clear and easily understood by all.

Information on the school's first aid provision will be provided in the induction pack given to new and temporary staff.

Hygiene and Infection Control

All staff will:

- follow basic hygiene procedures.
- be aware as to how to take precautions to avoid infections, e.g., HIV, AIDS, and COVID-19, etc.

All staff will have access to single use disposable gloves and hand washing facilities.

The school will ensure adequate and appropriate stock levels of PPE is provided for all staff:

- Gloves – are to be worn to protect your hands.
- Face masks/coverings – are worn to protect/prevent the spread of a respiratory virus when close contact with another person cannot be avoided when applicable.
- Eye protection or shields – are worn when there is a risk of bodily fluids splashing up into your face.
- Aprons – are worn to protect your clothing from becoming soiled.

Disposable gloves will be worn at all times when dealing with blood or other body fluids or when disposing of dressings or other potentially contaminated equipment.

Instructions on the disposal of all used dressings or equipment will be included in the first aid containers.

School's Body Spillages/HIV Procedures:

- No person must treat a child who is bleeding, without protective gloves.

- Protective gloves are stored in the first aid kits.
- Sponges and water buckets must never be used for first aid to avoid the risk of HIV contamination.
- All body fluid spillage's (vomit, diarrhoea, and blood) must be cleaned immediately. This is vital so spread of infections is reduced. Disposable gloves, mask and an apron should be worn. They must be kept for this purpose only. Following use, gloves, mask and apron must be carefully discarded in black bin liner.
- Absorbent granules should be dispersed over the spillage and left to absorb for a few minutes then swept up into newspaper. A designated dustpan and brush is available for body spillages and is kept in a cleaning cupboard. Wash the affected area with warm water and detergent and dry. Once spillages have been put into newspaper, put into a black bin liner, and dispose of in the external bin.
- Hands must be washed and dried after removal of protective gloves.

Recording Accidents and Injuries

All accidents and injuries will be recorded in a written form and such records will be kept for a minimum of six years.

Accident records will be reviewed termly by senior leaders to identify any emerging trends, recurring injuries or safeguarding concerns.

Where patterns emerge, appropriate action will be taken including referral through safeguarding procedures where required.

The record of any first aid treatment given by first aiders and other appointed persons will include:

- the date, time, and place of the incident
- the name and class of the injured or ill person
- details of the injury or illness and what first aid was given
- what happened to the child or member of staff immediately afterwards (e.g., went home, resumed normal duties, or went to hospital)
- the name and signature of the first aider or person dealing with the incident

Serious or significant incidents will be reported to parents by direct contact with the parent or carer.

In an emergency involving outside medical professionals or services the school manager/deputy, or the appointed person will follow the school's established procedures for contacting a parent or carer.

School Incident Reporting Procedures

- All incidents, injuries, head injuries, ailments and treatment will be reported in the Accident files. Serious incidents where a child has had to be taken to hospital must be reported to the Head teacher and also the Business Manager.
- Parents will be informed of a head injury by telephone immediately and invited to assess their child. If not, a written note will be provided outlining the incident and outlines the injury and symptoms to look out for. This letter is to be handed to

the class teacher so that they are aware of any injury and therefore can monitor the child.

- First Aiders will contact parents by phone if they have concerns about any injury.
- Staff should complete the school accident book if they sustain an injury at work. An injured member of staff or other supervising adult should not continue to work if there is any possibility that further medical treatment is needed. The member of staff or other supervising adult concerned should seek medical advice without delay.

Medical Conditions

The school will support pupils with medical conditions in accordance with statutory DfE guidance Supporting Pupils at School with Medical Conditions.

Pupils with diabetes will be supported in accordance with their Individual Healthcare Plan and will have access to glucose monitoring equipment, insulin, hypo treatments, snacks and drinks as required.

Reporting Accidents to the HSE (RIDDOR)

The following types of accidents will be reported to the HSE as required under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013:

<http://www.hse.gov.uk/pubns/edis1.pdf>

Accident – Employees

- Accidents resulting in death or major injury (including those that result from physical violence)
- Accidents that prevent the injured person from doing their normal work for more than seven days
- Work-related disease that affects an employee and that a doctor confirms in writing
- Fractures, other than to fingers, thumbs, and toes
- Amputation
- Any injury likely to lead to permanent loss of sight or reduction in sight
- Any crush injury to the head or torso causing damage to the brain or internal organs.
- Serious burns (including scalding) which cover more than 10% of the body or cause significant damage to the eyes, respiratory system, or other vital organs
- Any scalping requiring hospital treatment
- Any loss of consciousness caused by head injury or asphyxia
- 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

Accident – Children and Visitors (Members of the Public)

- The death of the person which arose out of or in connection with a work activity.

- An injury that arose out of or in connection with a work activity and the person is taken directly from the scene of the accident to the hospital for treatment.

The responsible person at/for the school will consider whether the incident was caused by:

- A failure in the way a work activity was organised (e.g., inadequate supervision of a field trip)
- The way equipment or substances were used (e.g., lifts, machinery, experiments etc); and/or
- The condition of the premises (e.g., poorly maintained, or slippery floors not clearly indicated)

Nearest Hospital Location

Address: University Hospital Coventry & Warwickshire
Clifford Bridge Rd · 024 7696 4000

School Procedures

First Aid Provision

- A number of staff will hold a Paediatric First Aid Qualification. Training will be carried out by an organisation whose training and qualifications are approved by the Health and Safety Executive. The certificate is valid for three years after which a refresher course is required before further re-certification. A list of qualified first aiders is displayed by the first aid kits and in various locations around school.
- A designated lead first aider will oversee the implementation of this policy.
- There are a number of designated people at both Westhill Road and Scots Lane site who will ensure that there are enough first aid boxes for the number of children and adults in the school and for the number of children and adults participating in a school trip. There is a legal requirement for first aid equipment for each person in the school; this should be regularly checked on the NHS website.
- The designated lead person will ensure the maintenance of the contents of the first aid boxes and other supplies.
- The head teacher keeps a record of the training completed and will identify when first aiders need to refresh training and inform the School Business Manager.
- All staff will be trained in any aspects of first aid deemed necessary to support a care plan for a child e.g. asthma, epilepsy, the use of an Epi-pen.
- The designated lead person for first aid will monitor the frequency of accidents, their location, and age group to see if patterns emerge. They will bring this to the attention of the Head teacher/SBM, who will plan a course of action to address the matter.
- There are two defibrillators in school – one positioned in each school office. For best practise the first aiders have had training and are qualified to deliver this. However, you do not need to be trained to use a defibrillator, there are clear instructions on how to attach the defibrillator pads. It then assesses the heart rhythm and will only instruct you to deliver a shock if it's needed.

Procedures – In School

- In the event of injury or medical emergency, children /staff will be directed to an appointed first aider.
- IF THE SITUATION IS LIFE THREATENING THEN AN AMBULANCE SHOULD BE CALLED AT THE EARLIEST OPPORTUNITY BY DIALLING 999/112.
- If an incident, illness, or injury occurs, the member of staff in charge will assess the situation and decide on the appropriate course of action, which may involve calling for an ambulance immediately or calling for a first aider.
 - If called, a first aider will assess the situation and take charge of first aider administration. If the first aider does not consider that they can adequately deal with the presenting condition by the administration of first aid, then they will arrange for the injured person to access appropriate medical treatment without delay.
 - Where an initial assessment by the first aider indicates a moderate to serious injury has been sustained, or the individual has become seriously unwell, a responding staff member will call 999 immediately.
 - Where necessary, a trained staff member will administer emergency help and first aid to all injured persons. The purpose of this is to keep the victim alive and, if possible, comfortable, before professional medical help arrives. In some situations, immediate action can prevent the accident from becoming increasingly serious, or from involving more victims.
- Unless it cannot possibly be avoided, members of staff should administer first aid with another adult present or in a public area. Whilst respecting the dignity of the child, adults should not put themselves in vulnerable situations.
- Members of staff or volunteer helpers should only administer first aid if absolutely necessary and would be ideally trained.
- For their own protection and the protection of the patient, staff who administer first aid should take the following precautions:
- Exposed cuts and abrasions should be cleaned under running water and patted dry with a sterile dressing or cleaned with sterile wipes.
- CHECK FOR ALLERGY TO PLASTERS BEFORE USE.
- Hands should be washed before and after administering first aid.
- Disposable gloves should be worn.

Where the seriously injured or unwell individual is a pupil, the following process will be followed:

- A responding staff member calls 999 immediately and follows the instructions of the operator – this may include the administering of emergency first aid.
- Where an ambulance is required, a staff member accompanies the pupil in the ambulance and calls the pupil's parent as soon as possible to inform them of the course of action taken. The staff member remains with the pupil at the hospital until a parent arrives.
- Where an ambulance is not required, but medical attention is needed, the pupil's parent is called as soon as possible to inform them that the pupil will need to be taken to a hospital or a doctor. If a parent/guardian cannot be contacted the pupil is taken to a hospital or doctor in a staff car, accompanied by at least **two** staff members – one of whom to drive the car, (with business insurance) and one

of whom, a first aider, to sit with the pupil in the back seat and attend to their medical needs. The parent will be contacted that this course of action has been taken, and at least one of the staff members remains with the pupil at the hospital or doctor's office until a parent arrives.

- The school will ensure that no further injury can result from any incidents that occur, either by making the scene of the incident safe, or (if they are fit to be moved) by removing injured persons from the scene.
- Responding staff members will see to any pupils who may have witnessed the incident or its aftermath and who may be worried or traumatised, despite not being directly involved. These pupils will be escorted from the scene of the incident and comforted. Younger or more vulnerable pupils may need parental support to be called immediately.

Once the above action has been taken, details of the incident will be reported promptly to:

- The head teacher
- The parents of the victim(s)
- Any child complaining of illness or who has been injured will be taken to a first aid point by an adult for the named first aider(s) to inspect and, where appropriate, treat. Constant supervision will be provided (this designated facility has access to a wash basin and toilet facilities which are close by). If appropriate, parents will be contacted so that the child can be collected and taken home.
- Contact details can be obtained from the school office. A member of staff will accompany the child to the hospital if the parent is not able to come to school immediately.
- If staff are concerned about the welfare of a child, they should contact the school office/first aider immediately. If an injury has been sustained, the child should not be moved unless they are in immediate danger.

Procedures – Educational Visits/Residentials

- The Head Teacher and EVC has responsibility for ensuring staff have adhered to the school's 'Educational Visits Procedures' when organising a visit.
- Risk Assessment will be carried out as part of an educational trip. Particular attention needs to be paid to the Educational Visits Policy.
- Educational visit/risk assessment forms must be completed before any visit takes place and this is signed by the SLT.
- This form has the mobile numbers for emergencies of staff on the trip and those in school.
- This form also has information about any child who has an illness or needs medication.
- Staff must take an adequate number of first aid kit/s for the number of children participating.

Action at an Emergency (to be undertaken by trained first aider)

- Assess the situation: Are there dangers to the first aider or the casualty? Make the area safe, look at injury: Is there likely to be a neck injury?
- Assess the casualty for responsiveness: Does the casualty respond?

IF THERE IS NO RESPONSE in an adult:

- Open airway by placing one hand on the forehead and gently tilt the head back. Remove any obvious obstructions from the mouth and lift the chin.
- Check for breathing. If the casualty is breathing assess for life threatening injuries and then place in the recovery position.
- If the casualty is not breathing send a helper to call an ambulance and then bring the defibrillator from the main foyer.
- If breathing is absent begin Cardiopulmonary Resuscitation (CPR).
- Give 30 chest compressions, 2 rescue breaths and then continue with 30 chest compressions, (30:2) until emergency help arrives.

IF THERE IS NO RESPONSE in a child:

- Give 5 rescue breaths and with one hand on the centre of the chest give 30 chest compressions,
Then continue with 2 rescue breaths and 30 chest compressions (30:2) until emergency help arrives.

IF THERE IS NO RESPONSE in a child under one year:

- Give 5 rescue breaths and with index and middle finger on the centre of the chest give 30 chest compressions,
Then continue with 2 rescue breaths and 30 chest compressions (30:2) until emergency help arrives.

Person Protective Equipment (PPE):

Where it is not possible to maintain a 2-metre distance and you are required to deliver hands on care, don-on PPE.

Cardiopulmonary Resuscitation:

If you are required to perform cardiopulmonary resuscitation (CPR), you should conduct a dynamic risk assessment to assess appropriate infection control precautions.

In adults, it is recommended that you do not perform mouth-to-mouth ventilation – perform chest compressions only. Compression-only CPR may be as effective as combined ventilation and compression in the first few minutes where cardiac arrest has not occurred due to lack of oxygen (asphyxia arrest).

In children, cardiac arrest is more likely to be caused by a respiratory problem or lack of oxygen. Therefore, chest compressions alone are unlikely to be effective. If a decision is made to perform mouth-to-mouth ventilation, use a resuscitation face shield, if one is available.

STORAGE OF MEDICATION

Medicines will be stored securely and appropriately in accordance with individual product instructions, save where individual pupils have been given responsibility for keeping such equipment with them. Medicines will be stored in the original container in which they were dispensed, together with the prescriber's instructions for administration, and properly labelled, showing the name of the patient, the date of prescription, and the date of expiry of the medicine.

Medicine brought in by pupils will be returned to their parents for safe disposal when they are no longer required or have expired.

An emergency supply of medication will be available for pupils with medical conditions that require regular medication or potentially lifesaving equipment, e.g., Salbutamol inhaler, an EpiPen.

In the event of a fire, the first aid grab bag with all medication inside (spaces do not need to be taken outside as disposable spaces will be supplied within the office grab bag) must be taken outside with the class.

Parents will advise the school when a child has a chronic medical condition or severe allergy so that an IHP can be implemented, and staff can be trained to deal with any emergency in an appropriate way. Examples of this include epilepsy, diabetes, and anaphylaxis. A disclaimer will be signed by the parents in this regard.

ILLNESSES AND ALLERGIES

When a pupil becomes ill during the school day, their parent will be contacted and asked to pick their child up as soon as possible.

A quiet area will be set aside for withdrawal and for pupils to rest while they wait for their parent to pick them up. Pupils will be monitored during this time.

Where a pupil has an allergy, this will be addressed via the child's IHCP and inline with KCSIE requirements.

All staff have received training linked to Benedicts Law 2026

CONSENT

Parents will be asked to complete and sign a medical consent form when their child is admitted to the school, which includes emergency numbers, alongside details of allergies and chronic conditions – these forms will be updated during the first Parents' Evening at the beginning of each school year.

Staff do not act 'in loco parentis' in making medical decisions as this has no basis in law. Staff will always aim to act and respond to accidents and illnesses based on what is reasonable under the circumstances and will always act in good faith while having the best interests of the pupil in mind – guidelines will be issued to staff in this regard.

Low Level Concerns

Concerns regarding the conduct of adults working with children must be reported in accordance with the school's Low-Level Concerns and Allegations Procedures.

MONITORING AND REVIEW

This policy will be reviewed annually by the governing board, and any changes communicated to all members of staff.

Staff will be required to familiarise themselves with this policy as part of their induction programme.

Staff will be informed of the arrangements that have been made in connection with the provision of first aid, including the location of equipment, facilities, and personnel.

Information on the administering of medicines to children can be found in the relevant school policy.

Information is available from the school office or by emailing ctk-admin@hccmac.co.uk about all Staff that have:

First Aid Trained

Epi-pen trained

Asthma Training

Epilepsy Training

Paediatric First Aid Trained

***All staff to administer minor first aid as and when necessary.**

Only send for a first aider for major incidents or concerns that may need a second opinion.

First Aid Procedures – In School

WHAT TO DO IN AN EMERGENCY

In the event of injury or medical emergency, children /staff will be directed to an appointed first aider.

IF THE SITUATION IS LIFE THREATENING THEN AN AMBULANCE SHOULD BE CALLED AT THE EARLIEST OPPORTUNITY BY DIALLING 999/112.

If an incident, illness, or injury occurs, the member of staff in charge will assess the situation and decide on the appropriate course of action, which may involve calling for an ambulance immediately or calling for a first aider.

- If called, a first aider will assess the situation and take charge of first aider administration. If the first aider does not consider that they can adequately deal with the presenting condition by the administration of first aid, then they will arrange for the injured person to access appropriate medical treatment without delay.
- Where an initial assessment by the first aider indicates a moderate to serious injury has been sustained, or the individual has become seriously unwell, a responding staff member will call 999 immediately.
- Where necessary, a trained staff member will administer emergency help and first aid to all injured persons. The purpose of this is to keep the victim alive and, if possible, comfortable, before professional medical help arrives. In some situations, immediate action can prevent the accident from becoming increasingly serious, or from involving more victims.

Where the seriously injured or unwell individual is a pupil, the following process will be followed:

- A responding staff member calls 999 immediately and follows the instructions of the operator – this may include the administering of emergency first aid.
- Another member of staff then contacts the Head and office staff to ensure emergency help knows where to go and ensures other pupils are removed from the area.
- Where an ambulance is required, a staff member accompanies the pupil in the ambulance and calls the pupil's parent as soon as possible to inform them of the course of action taken. The staff member remains with the pupil at the hospital until a parent arrives.
- Where an ambulance is not required, but medical attention is needed, the pupil's parent is called as soon as possible to inform them that the pupil will need to be taken to a hospital or a doctor. If a parent/guardian cannot be contacted

the pupil is taken to a hospital or doctor in a staff car, accompanied by at least **two** staff members – one of whom to drive the car, (with business insurance) and one of whom, a first aider, to sit with the pupil in the back seat and attend to their medical needs. The parent will be contacted that this course of action has been taken, and at least one of the staff members remains with the pupil at the hospital or doctor's office until a parent arrives.

- The school will ensure that no further injury can result from any incidents that occur, either by making the scene of the incident safe, or (if they are fit to be moved) by removing injured persons from the scene. Responding staff members will see to any pupils who may have witnessed the incident or its aftermath and who may be worried or traumatised, despite not being directly involved. These pupils will be escorted from the scene of the incident and comforted. Younger or more vulnerable pupils may need parental support to be called immediately.

Once the above action has been taken, details of the incident will be reported promptly to:

- The head teacher
- The parents of the victim(s)
- Any child complaining of illness or who has been injured will be taken to a first aid point by an adult for the named first aider(s) to inspect and, where appropriate, treat. Constant supervision will be provided (this designated facility has access to a wash basin and toilet facilities which are close by). If appropriate, parents will be contacted so that the child can be collected and taken home.
- Contact details can be obtained from the school office. A member of staff will accompany the child to the hospital if the parent is not able to come to school immediately.
- If the staff are concerned about the welfare of a child, they should contact the school office/first aider immediately. If an injury has been sustained, the child should not be moved unless they are in immediate danger.

WHAT TO DO IN AN EMERGENCY

1. Keep safe by checking for dangers or hazards before you approach a casualty. If anything happens to you, you are no use to the casualty and there is now an extra person who needs help. Hazards might include:

- trip hazards
- spilt liquids
- electrical equipment
- broken glass or other objects

If you do not feel it is safe to approach, the best thing you can do is make an effective call for help.

2. Call for help, using 999 or 112.
3. When calling 999 or 112, you will need to provide the following information if you can, in as much detail as possible. The acronym LIONEL can make this easier to remember:

1. **LOCATION** – Tell the emergency services where you are, and where you would like them to arrive. Bear in mind accessibility issues for an ambulance or other emergency vehicle. Building name/numbers and postcodes are the best information you can provide.
 2. **INCIDENT** – Tell them what has happened, factually and in as much detail as possible.
 3. **OTHER SERVICES** – Let them know if other emergency services may be needed too. For example, a road traffic collision may require support from the police service to manage traffic, or the fire service if somebody is trapped in their vehicle.
 4. **NUMBER OF PEOPLE** – The number of people involved in an incident could dictate how many ambulances are needed.
 5. **EXTENT OF THE INJURIES** – What injuries does/do the casualty(ies) have, and how severe are they. Again, this can impact the response time and level from the emergency services.
 6. **LOCATION** – Repeat again where the emergency services need to arrive.
4. You can now perform any first aid, if it is safe to do so. Also, continue to reassure the casualty that you have called for help

CHRIST THE KING CATHOLIC PRIMARY SCHOOL

ACCIDENT/INCIDENT FORM

To be completed when an adult has an accident/incident at school

Did the adult/child go home or to hospital as a result of an accident/incident YES / NO

DETAILS OF INJURED PERSON

Name: _____ Age: _____ DOB: _____

Address: _____

Date of Accident/Incident: _____ Time of Accident/Incident: _____

ACCIDENT/INCIDENT DETAILS

Location(where it took place): _____

What happened
(before,during& after): _____

Nature of Injury: _____

Please give details of any First Aid treatment given:

What action, IF ANY, has taken place as a result of accident/incident

SIGNED: Person Reporting

SIGNED: Head Teacher

Dated: _____

Please hand to ADMIN OFFICE asap

CHRIST THE KING CATHOLIC PRIMARY SCHOOL

ACCIDENT/INCIDENT FORM

To be completed when a child has an accident/incident at school

Did the adult/child go home or to hospital as a result of an accident/incident YES / NO

DETAILS OF INJURED PERSON

Name: _____ Age: _____ DOB: _____

Address: _____

Date of Accident/Incident: _____ Time of Accident/Incident: _____

ACCIDENT/INCIDENT DETAILS

Location(where it took place): _____

What happened
(before,during& after): _____

Nature of Injury: _____

Please give details of any First Aid treatment given:

What action, IF ANY, has taken place as a result of accident/incident

SIGNED: Person Reporting

SIGNED: Head Teacher

Dated: _____

Please hand to ADMIN OFFICE asap