

First Aid Policy

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Enquiries Contact: support@uk.oneschoolglobal.com	Approval Authority OSG UK Board	Policy Author Rui Martins
Associated Documents Administration of Medicines Policy Safeguarding & Child Protection Policy Health and Safety Policy		

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1. PURPOSE

OneSchool Global UK (OSG UK) is committed to provide emergency first aid provision in order to deal with accidents and incidents affecting employees, volunteers, students and visitors. The arrangements within this policy are based on the results of a suitable and sufficient risk assessment carried out by OSG UK in regard to all (staff, volunteers, students and visitors).

Some students and staff may, at some time, have a medical condition which could impact upon participation in school activities. This is likely to be short-term. Others, may, have medical conditions which, if not properly managed, could limit access to education. These are regarded as having medical needs and extra care may need to be taken in supervising these students in some activities.

Each OSG UK Campus complies and accepts responsibility, in principle, for staff who volunteer to give, or supervise students taking prescribed medicine during the school day. Where a student attends school, but is suffering from pain, and has been given medication to bring into school (e.g., migraine tablet), they should have written authorisation from a parent with instructions confirming when the child should take the medication. The student should be supervised by a member of staff and parents notified in writing that medication has been taken.

2. SCOPE

This policy applies to all staff and students at the Campus. 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 health and welfare of our students.

3. DEFINITIONS

Term	Definition
First Aid	The treatment of minor injuries which do not need treatment from a medical practitioner, and treatment for more serious injuries prior to assistance from a medical practitioner for the purpose of preserving life and minimizing the consequences of injury or illness. It does not include the giving of medicines or tablets.
First Aider	Member of staff who has completed a OfQual-approved (or other recognised training body/regulator) First Aid course and who holds a valid First Aid certificate.
HSE	Health and Safety Executive
Staff	Any person employed by the Trust including volunteers and contractors.

4. POLICY STATEMENT

4.1 Introduction

4.1.1 This Campus recognises its legal duty to make suitable and sufficient provision for first aid to students, staff, and visitors, including those travelling or working away from the Campus premises and to appropriately respect the confidentiality and the rights of students as patients.

- 4.1.2** This policy aims to comply with paragraph 4.23) of the schedule to the Education (Independent School Standards) (England) Regulations 2014 (SI2014/3283), OneSchool Global UK is the employer and is ultimately responsible, through the Board of Directors for the implementation of 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.
- 4.1.3** Anyone on the Campus premises is expected to take reasonable care for their own and others' safety.

4.2 Policy aims

- 4.2.1** To ensure that each OSG UK Campus has adequate, safe, and effective first aid provision in order for every student, member of staff, volunteer, 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.
 - To ensure that medicines are only administered at the campus when express permission has been granted for this.
 - To promote effective infection control.
- 4.2.2** 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 at the campus.
- 4.2.3** To achieve the policy aims, each school campus will:
- Have suitably stocked first aid boxes as required by current legislation.
 - Carry out a suitable and sufficient assessment of the risks posed to persons in the event that they suffer an accident, injury or ill health.
 - Appoint sufficient First Aiders to take charge of first aid.
 - Provide information to staff, volunteers, students, and parents on the arrangements for first aid.
 - Have a procedure for managing accidents, including immediate liaison with emergency services, medical staff, and parents.
 - Review and monitor arrangements for first aid on as appropriate on a regular basis (and at the very least on an annual basis).

4.3 First aiders

- 4.3.1** The Campus will display a list of qualified First Aiders in the Staff Room and in key locations around the building, in addition to detail on this policy (See [Appendix 1](#)). The First Aiders will undergo update training every three years or sooner.
- 4.3.2** Training requirements are for the appointed person(s) to have completed a 3-day First Aid at Work course and for all other supporting first aiders to have completed a 1-day Emergency First Aid at Work course.
- 4.3.3** The main duties of First Aiders are to give immediate first aid to students, staff or visitors as required 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 Campus Principal. It is our policy that there will be at least one qualified person on every site when students are present.
- 4.3.4** HSE recommendations for First Aid cover:

- Term time: 1-2 Appointed Persons (i.e., max 100 workers at any time in Lower Risk Activity, with max 5-6 in Medium Risk activities)
- School Holidays: 1 Appointed Person (i.e., max 20 workers in Low/Medium Risk Activity)

4.4 First aid kits

4.3.5 First Aid kits are marked with a white cross on a green background. First aid kits are checked regularly by the Premises Manager / Health & Safety Officer or designated personnel at the campus, who will be responsible for ensuring that kits are re-stocked, records of the checks are maintained on the Online Safety Portal (DoneSafe).

4.3.6 First aid kits are located at key positions around the site including the main Reception/Office and the Staff Room, and near to hand washing facilities where possible.

4.3.7 General First Aid Kit Minimum Contents (similar/ additional items acceptable)

- A leaflet giving general advise on first aid
- 20 individually wrapped sterile adhesive dressings/ plasters (assorted sizes)
- 2 sterile eye patches
- 4 individually wrapped triangular bandages (preferably sterile)
- 6 safety pins
- 6 medium (approx. 12cm x 12cm) individually wrapped sterile un-medicated wound dressings
- 2 large (approx. 18cm x 18cm) individually wrapped sterile un-medicated wound dressings
- 3 pairs of disposable gloves
- Microporous tape
- Mouth to mouth resuscitation device with valve
- 1 pair of rust-less blunt ended scissors
- In addition to the items listed in the general first aid kits, some subjects have additional risks, and the Campus may wish to also include the following items in the kits in these areas:

4.3.8 Science/ D&T

- Eyewash 250ml
- Finger Dressing
- Burn/ Soothe relief dressing
- Food Technology/Cooking
- Finger Dressing
- Burn/ Soothe relief dressing

4.3.9 Burns Kit Minimum Contents

- A leaflet giving general advise on first aid
- 20 individually wrapped sterile adhesive dressings/ plasters (assorted sizes)
- Eye wash phials – 20ml
- sterile eye patches
- 2 individually wrapped triangular bandages (preferably sterile)
- 6 safety pins
- medium (approx. 12cm x 12cm) individually wrapped sterile un-medicated wound dressings
- 1 large (approx. 18cm x 18cm) individually wrapped sterile un-medicated wound dressings
- 1 finger bandage

- 3 pairs of disposable gloves
- 20 moist cleansing wipes
- Adhesive tape
- Mouth to mouth resuscitation device with valve
- 1 foil blanket
- 1 burn dressing – small 10 x 10cm
- 1 burn dressing – medium 20 x 20cm
- 1 pair of rust-less blunt ended scissors
- Burn/ Soothe relief dressing

4.3.10 Spillage Kits

A specialist spillage kit will be available at the Campus for Bodily fluid spills in line with COSHH (2002) to protect those responsible for Cleaning up from microbiological hazards.

General contents should include:

- Super absorbent powder
- Biohazard disposal bags
- Disinfectant spray
- Alcohol free wipes
- Scoop
- Scraper
- Gloves
- Aprons

4.5 School vehicles

4.5.1 All OneBus vehicles will all have a First aid kit on board which is readily available for use, and which is maintained in a good condition. First aid kits must be taken when groups of students go out of school on organised trips or to participate in sports.

4.5.2 Vehicles First Aid Kit Minimum Contents (as per transport regulations requirements)

- 10 antiseptic wipes
- 1 disposable bandage (not less than 7.5cm wide)
- 2 individually wrapped triangular bandages
- 24 individually wrapped sterile adhesive dressings (assorted sizes)
- 3 large sterile un-medicated ambulance dressings (not less than 15cm x 20cm)
- 2 sterile eye patches with attachments
- 12 assorted safety pins
- 1 pair of rust-less blunt ended scissors
- 1 pair of disposable gloves

4.6 Education trips & sports activities

4.6.1 First aid kits must be carried by the First Aider when groups of students go out of school on organised trips or to participate in sports.

4.6.2 Travelling First Aid Kit for Trips & Visits Minimum Contents (similar/ additional items acceptable)

- A leaflet giving general advise on first aid
- 6 individually wrapped sterile adhesive dressings (assorted sizes)
- 2 individually wrapped triangular bandages
- 2 safety pins
- 1 large (approx. 18cm x 18cm) individually wrapped sterile un-medicated wound dressings
- 1 pair of disposable gloves
- 10 Individually wrapped moist cleaning wipes

4.6.3 PE/Sports

- A leaflet giving general advise on first aid
- 20 individually wrapped sterile adhesive dressings/ plasters (assorted sizes)
- 2 sterile eye patches
- 2 individually wrapped triangular bandages (preferably sterile)
- 6 safety pins
- 6 medium (approx. 12 x 12cm) individually wrapped sterile un-medicated wound dressings
- 2 large (approx. 18 x 18cm) individually wrapped sterile un-medicated wound dressings
- 3 pairs of disposable gloves
- Microporous tape
- Mouth to mouth resuscitation device with valve
- 1 pair of rust-less blunt ended scissors
- 3 foil blankets
- 3 ice packs
- Wound wash/ 10 Individually wrapped moist cleaning wipes
- Deep freeze spray
- Deep heat spray

4.7 Information on students

- 4.7.1** Parents are requested to provide written consent for the administration of First Aid and medical treatment before students are admitted to the Campus.
- 4.7.2** The Campus is responsible for reviewing students' confidential medical records and providing essential medical information regarding allergies, recent accidents or illnesses, or other medical conditions which may affect a student to the Campus Principal, Class Teacher / Form Tutor and First Aiders on a "need to know" basis. This information will be kept confidential but may be disclosed to the relevant professionals if it is necessary to safeguard or promote the welfare of a child.
- 4.7.3** Information held by the main Office will include a record of students who need to have access to asthma inhalers, Adrenaline Auto-injector pens, injections or similar and this information should be circulated to teachers and First Aiders. Individual students (or their Class Teacher as appropriate) usually have responsibility for keeping such equipment with them. Additional spare inhalers should also be provided to the Campus by parents of children that require them. In other cases, the equipment should be suitably labelled and will be stored securely, either in the Office or the medical room (for access by suitably qualified staff and students when appropriate).

5. PROCEDURES

5.1 Procedure in the event of illness

- 5.1.1** If a student feels unwell, they should be taken to the main Office. If it is only a minor problem another student should accompany them, but in more serious cases a member of staff should contact the School Office to summon a First Aider.

5.2 Procedure in the event of an accident

- 5.2.1** 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. First Aiders can also be called for if necessary.

- 5.2.2** 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.
- 5.2.3** 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 student or adult is 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. In this instance a photocopy of the child's medical questionnaire must be provided for medical professionals.

5.3 Procedure in the event of a head injury

- 5.3.1** Minor head injuries are common on the school playground and on the sports field. Fortunately, the majority of head injuries are minor and do not result in complications or hospitalisation; however, a small number of children do suffer from a severe injury to the brain.
- 5.3.2** Complications such as swelling, bruising, or bleeding may occur inside the skull or inside the brain, and the amount of damage depends on the power and speed of the impact. Staff members and first aiders must be able to identify signs and symptoms, identify an emergency, and know how and when to call for help. School staff / school first aiders have a duty of care to act in the same way that any prudent parent would in the event of illness or injury.
- 5.3.3** Students who sustain a head injury at school campus should be evaluated by the campus First Aider to establish the extent of the injury and to plan future care/action.
- 5.3.4** After any head injury - Even though no concerning signs are visible, it is critical that the student parents are informed of the head injury / concussion and are provided with written instructions on how to monitor their child. (Use template letter and guidance from [Appendix 4](#) of this Policy)
- 5.3.5** If the student's condition worsens, the material in the Parent letter should recommend that the student is referred to the A&E, is seen by a doctor at the local GP Practice, NHS Walk in Centre, or Hospital.
- 5.3.6** The guidance provided in the Parent letter is aimed to assist parents in recognising the signs / signals of a head injury and that their child requires further medical assistance / treatment.
- 5.3.7** Please consult the [Appendix 5](#) of this policy for further details on how to Manage Head Injuries at the school campus.

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

- 5.4.1** If a spillage of blood or other bodily fluids occurs, a First Aider must be informed. They will then arrange for the proper containment, clear up and cleansing of the spillage site. The First Aider should take the following precautions to avoid risk of infection:
- cover any cuts and grazes on their own skin with a waterproof dressing
 - wear suitable disposable gloves when dealing with blood or other bodily fluids
 - use suitable eye protection and a disposable apron where splashing may occur
 - use devices such as face shields, where appropriate, when giving mouth to mouth resuscitation
 - wash hands after every procedure
- 5.4.2** 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:
- wash splashes off skin with soap and running water.

- wash splashes out of eyes with tap water or an eye wash bottle.
- wash splashes out of nose or mouth with tap water, taking care not to swallow the water.
- record details of the contamination.
- report the incident to the Campus Principal and take medical advice if appropriate.

5.5 Procedure for dealing with bodily fluids

5.5.1 In order to maintain protection from disease, all bodily fluids should be considered infected. To prevent contact with bodily fluids the following guidelines should be followed.

- When dealing with any bodily fluids wear disposable gloves.
- Wash hands thoroughly with soap and warm water after the incident.
- Keep any abrasions covered with a plaster.
- Spills of the following bodily fluids must be cleaned up immediately.

5.5.2 Bodily fluids include:

- Blood, Faeces, Urine, Nasal and eye discharges, Saliva, Vomit

5.5.3 Disposable towels should be used to soak up the excess, and then the area should be treated with a disinfectant solution.

- Never use a mop for cleaning up blood and bodily fluid spillages
- All contaminated material should be disposed of in a yellow clinical waste bag.
- Avoid getting any bodily fluids in your eyes, nose, mouth or on any open sores.
- If a splash occurs, wash the area well with soap and water or irrigate with copious amounts of saline.

5.6 Procedure in the event of off-site accident, injury, or illness

5.6.1 A First Aid kit should be carried by all teachers in charge of off-site activities such as PE activities. An allergy list will be part of the First Aid kit. Any treatment or incident should be recorded on return to the Campus by the member of staff in charge. Educational trip leaders must ensure that first aid provision is appropriate to the activities and groups concerned, this must be contained within the relevant risk assessment.

5.7 Dealing with students with asthma

5.7.1 Older students carry inhalers with them and used them as necessary. Younger children's inhalers are looked after by a member of staff and made available as necessary. Parents are asked to provide school with a spare inhaler.

5.7.2 See [Appendix 2](#) – Asthma treatment

5.8 Dealing with students with allergies

5.8.1 Information about students with allergies is provided to all teachers and First Aiders. Details of students who have been prescribed Adrenaline Auto-injector pens to use in instances of allergic reaction are included in this information. All staff have received training on the use of Adrenaline Auto-injector pens and should be aware of the location of spare Adrenaline Auto-injector pens for specific students. Individual students (or their Class Teacher as appropriate) usually have responsibility for keeping such equipment with them. Details on the administration of Adrenaline Auto-injector pens are stored with the device and in all first aid boxes and is also displayed in the Staff Room.

5.8.2 See [Appendix 2](#) – Anaphylaxis treatment.

5.9 Dealing with students with epilepsy

5.9.1 See [Appendix 2](#) - Managing Epilepsy and Seizures

5.10 Dealing with students with diabetes

5.10.1 See [Appendix 2](#) – Diabetes treatment.

5.11 Reporting

5.11.1 All injuries, accidents, and illnesses, however minor, must be reported to the Main Office or Donesafe via Public link displayed on the [First Aid Notice – Appendix 1](#).

5.11.2 Accident Reporting: The member of staff in charge at the time will fill in an Accident Report Form for every serious or significant accident that occurs on or off-site if in connection with the Campus. The Form is located on the Online Safety Portal (DoneSafe) and, where in place, the Accident Book should also be completed. Records should be stored for at least three years or if the person injured is a minor (under 18), until they are 21.

5.11.3 Reporting to Parents: In the event of accident or injury sustained, parents must be informed on the same day or as soon as reasonably practicable, and of any first aid given. The member of staff in charge at the time will decide how and when this information should be communicated, in consultation with the Campus Principal if necessary.

5.11.4 The NHS has a [useful guide](#) to help parents decide whether a child is well enough to go to school, based on their symptoms. i.e. in cases of vomiting and diarrhoea children should definitely be kept off school until at least 48 hours after their symptoms have gone.

5.11.5 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 (most easily done on line at [RIDDOR Reporting](#) or by calling the Incident Contact Centre (ICC) on 0345 300 9923) - Please note that RIDDOR Reporting is performed by NSO Only. Consult [Appendix 7](#) for further details on Accident Reporting Procedure.

- 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).
- Work related accidents which prevent the injured person from continuing with his/her normal work for more than three days must be reported within 10 days
- 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).
- Accidents involving students 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 activity (on or off the premises)

- the way an 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.

5.11.6 For further details on Accident Reporting Procedure including the reporting to HSE, consult [Appendix 7](#)

5.12 Monitoring

5.12.1 The Campus Principal and the Health & Safety Officer will organise a monthly review of the accidents and injuries and will, if necessary, make recommendation to the RP / CA Team. In addition, the Campus Principal and RP / CA Team will undertake a review of all procedures following any major incident to check whether the procedures were sufficiently robust to deal with the major incident and whether any improvements should be made.

5.12.2 NSO will also be conducting random checks and determine any necessary actions including timeline for improvement.

6. GUIDELINES

- [DfE Guidance on First Aid in Schools](#)
- ISI Commentary – Regulatory Requirements

VERSION CONTROL

Policy Code	Date	Version No.	Nature of Change
OPC/5	February 2020	2.0	Review, minor updates only
OPC/5	November 2020	2.1	Clarification around Appendix 1
OPC/5	February 2021	3.0	Policy update, clarification around training requirements Referencing COVID-19 Risk Assessment Added procedure for dealing with bodily fluids
OPC/5	February 2022	4.0	Policy updates and some changes, such as: -Purpose -Policy aims -Appendices format - Appendix 3 Re: NHS Guidance - Urgent and emergency care services
OPC/5	April 2022	4.1	Policy updates, such as: -Head injury procedure and protocols -Concussion guidance from AfPE -First Aid checklist -Appendices format -NHS Guidance for parents on Head Injury. -Accident Reporting Procedure.

OPC/5	March 2023	5.0	Policy updates: - Replace Online Portal with Online Safety Portal (DoneSafe) - Review of Accident Reporting procedure - Replacement of First Aid Notice to enable public reporting on DoneSafe.
OPC/5	Feb 2024	6.0	Policy updates: - Deleted references to COVID-19 RA. - Replace non-working links. - Reference to random checks to reported records and actions. - Updated references to DP with RP. - Clarification added to RIDDOR Reporting is process (NSO Only)
OPC/5	April 2024	6.0	- Creation of a Contents list. - Removal of links that may affect the functionality of the link and the information and referral for medical guidance such as NHS. - Clarification added to RIDDOR reporting and procedure. - Clarification around incident reporting and the First Aid notice with Public link allowing the submission of incident reporting by all.

[APPENDIX 1 – FIRST AID NOTICE](#)

[APPENDIX 2 – GUIDANCE AND PROTOCOLS FOR SPECIFIC MEDICAL CONDITIONS](#)

[APPENDIX 3 – HELPFUL GUIDANCE WHEN TO CALL AN AMBULANCE](#)

[APPENDIX 4 – HEAD INJURY PARENT LETTER & NHS GUIDANCE](#)

[APPENDIX 5 – HEAD INJURY PROCEDURE](#)

- [HEAD INJURY CHECKLIST FOR FIRST AIDERS](#)

[APPENDIX 6 – GUIDANCE FROM ASSOCIATION FOR PHYSICAL EDUCATION REGARDING HEAD CONCUSSION](#)

- [AFPE – POCKET CONCUSSION RECOGNITION TOOL](#)

[APPENDIX 7 - ACCIDENT REPORTING PROCEDURE](#)