First Aid Policy

This Policy, which applies to the whole school, including Boarding and the Early Years, is publicly available on the school website and, upon request, a copy (which can be made available in large print or other accessible format if required), may be obtained from the School Office.

Information Sharing Category	Public Domain
TASIS England Document Reference (Org, Doc, Version, date)	TASIS_HCP_V9.0_30092026
Version	V9
Date Published	30 September 2026
Date ratified by Head of School	30 September 2026
Review/Update Date	30 September 2027
Responsible Area	Health Centre, Director of Inclusion, Wellbeing and Compliance

Agreed by:

Head of School	**Chair of the Board**
Bryan Nixon	David King
30 September 2026	30 September 2026

TASIS England is committed to safeguarding and promoting the welfare of students and expects all staff and volunteers to share this commitment. It is our aim that all students fulfil their potential.

1. Monitoring and Review

This policy is subject to continuous monitoring, refinement and audit by the Director of Inclusion, Wellbeing and Compliance, who will seek to identify trends and understand issues of concern and to take steps to improve systems to manage these. The Board of Directors will undertake a full annual review of this policy and procedures, inclusive of its implementation and the efficiency with which the related duties have been discharged. Any deficiencies or weaknesses recognised in arrangements or procedures will be remedied without undue delay. All staff will have access to the latest version of this policy in either hard copy or electronically via the school website. Furthermore, the Lead Nurses will conduct semesterly reviews of the protocols pertaining to the management of particular medical conditions and the appropriate responses to specific types of medical incidents, in accordance with the guidelines set forth by the National Health Service (NHS).

Everyone involved in our school, whether they work, volunteer, or provide services, shares an equal responsibility to comprehend and execute this policy and its procedures. This responsibility extends beyond regular school hours and encompasses activities conducted outside of the school premises.

This First Aid Policy is not a training manual. Staff will follow their training in the event of first aid being required. If there are any changes regarding specific procedures for administering first aid before the expiry date on their certificate, they will be updated in writing by a Lead Nurse. If necessary, interim training will be provided.

2. Policy Statement

This policy sets out the TASIS England principles for administering first aid and should be read in conjunction with the TASIS England Health and Wellbeing Centre Policy, Health and Safety Policy, Administration of Medication and Medical Needs Policy, and the Safeguarding and Child Protection Policy. These policies can be found on the TASIS England website policy page. The separate Allergy Safety Policy sets out the school's allergy management and anaphylaxis arrangements.

This policy is based on advice from the Department for Education (DfE) on first aid in schools, the Health and Safety (First Aid) Regulations 1981, the Management of Health and Safety at Work Regulations 1999, and the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013. The Education (Independent School Standards) Regulations 2014 (Schedule, Part 3, paragraph 13 and Part 5, paragraph 24) and the current EYFS safeguarding and welfare requirements also apply. The school's allergy arrangements are informed by the DfE's Allergy safety in schools guidance (July 2026).

Provision in this policy is set by the school's First Aid Needs Assessment, reviewed annually and after any significant change.

Age phase terminology and EYFS scope. TASIS England refers to students aged approximately 3–10 as PreK–Grade 4. The school has opted out of the EYFS learning and development requirements; however, the EYFS

Safeguarding and Welfare Requirements continue to apply to children in the EYFS age range (until 31 August following their fifth birthday).

In this policy, therefore:

- 'Children in the EYFS age range' means children until 31 August following their fifth birthday (typically PreK and Kindergarten).
- 'PreK–Grade 4' is the school phase name; EYFS is referenced only where the safeguarding and welfare duties apply to children in the EYFS age range (e.g., paediatric first aid, ratios, medicines, premises).

3. Aim

The objective of this policy is to administer first aid promptly and effectively, with the overall goal of safeguarding the wellbeing of all students.

4. Training standards for First Aiders

The school recognises the following first-aid qualifications and professional training:

- Emergency First Aid at Work (EFAW) (≈1 day/6 hrs)
- First Aid at Work (FAW) (≈3 days/18 hrs)
- Full Paediatric First Aid (PFA) (12 hours)
- Nurses trained in Basic Life Support (BLS) (adult & paediatric).

5. Training

The school maintains a list of staff members who hold a valid first aid certificate. This list is held by the Health and Wellbeing Centre and Human Resources. Any staff members who administer medication will undergo accredited training. All first aiders must renew their qualifications every three years. Where required, trained first aiders may undertake an annual skills refresher between 3-year re-certifications.

Staff counted in ratios with children in the EYFS age range must hold a current Paediatric First Aid (PFA) certificate that meets EYFS safeguarding & welfare criteria; other PreK–Grade 4 staff hold EFAW/FAW as determined by the first aid needs assessment.

6. First Aid Facilities

There is a central clinic called the Health and Wellbeing Centre, which serves as the central medical facility in the school where first aid equipment is available. First aid kits are also placed in important areas across the school, including within each boarding house. Additionally, portable first aid kits are provided for use during off-site activities.

7. Roles and responsibilities

The Head of School is responsible for ensuring adequate first aid provision, including the maintenance of first aid kits, the presence of trained first aiders on site, and the compliance with reporting requirements under RIDDOR. All faculty and staff members are responsible for familiarizing themselves with the location of first aid equipment and the identity of trained first aiders.

First aid needs assessment. The Head of School (as the employer's representative) will maintain a written first aid needs assessment (reviewed at least annually and after any significant change) covering: site layout (including boarding houses), high-risk curriculum areas (PE, Science, DT), lone/remote work, after-hours activities, off-site visits, student numbers/age profile, and foreseeable major-incident risks. Provision of trained personnel, equipment, rooms and response times will be set against this assessment in line with HSE L74 (2013 amended 2024).

Our first aid needs assessment includes students, parents and visitors, in line with HSE advice for schools.

The agreed assessment is maintained by the Director of inclusion, Wellbeing and Compliance, with controlled copies at the Security Lodge and Health & Wellbeing Centre, and a digital copy kept in the school risk Assessment Repository .

8. Practical Arrangements at the Point of Need

- All boarding staff and a representative proportion of academic staff (depending on the department) are offered and encouraged to undergo first aid training.
- All staff in departments considered to be higher risk, such as PE and Science, will be trained in first aid.
- Children in the EYFS age range (PreK/Kindergarten). When EYFS children are on site, there is at least one person with a current 12-hour Paediatric First Aid (PFA) certificate on the premises at all times, and a full PFA certificate holder accompanies EYFS children on outings (EYFS safeguarding & welfare duty).
- PreK–Grade 4 (wider phase). Beyond the EYFS requirement above, PreK–Grade 4 maintains appropriate first aider coverage (EFAW/FAW) based on the first aid needs assessment (see Section 7).
- A first aider, including a paediatric trained individual when necessary, will accompany students on off-site visits, following government guidelines and our Educational Visits Policy.
- First aid should normally be provided by qualified first aiders. Any member of staff should summon urgent help and may give immediate assistance within their competence and training, including following 999 instructions, without delaying emergency care. A current list of first aiders is held with the Health and Wellbeing Team and Human Resources. The location of first aid kits is displayed around the campus.
- Faculty members should familiarise themselves with the nearest first aider and first aid kit in their teaching area.
- A system is in place for reporting incidents, accidents, and near misses, and informing parents or guardians where applicable.
- Hygiene procedures for dealing with the spillage of body fluids are established.
- Guidance on when to call an ambulance is provided.

- Reference is made to RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations, 2013), which requires schools to report to the Health and Safety Executive.
- First aid kits are readily accessible.
- First aid supplies are kept in the Health and Wellbeing Centre.
- Arrangements are made for students with specific medical conditions.
- Regular checking and restocking of the first-aid containers are performed by nursing staff.
- Medications, such as inhalers and EpiPens, are regularly checked by nursing staff to ensure they are not expired, and new medication is requested to replace any that are due to expire.
- Lists of student allergies are available, and faculty and catering staff have access to medical alerts for each class and student.
- Students who feel unwell or sustain an injury at school have access to an on-duty nurse at the Health and Wellbeing Centre during opening hours. A nurse will be on-call outside opening hours.
- In the event of an accident resulting in injury, the nearest faculty or staff member will assess the severity of the injury and seek the assistance of a qualified first aider if necessary. If an ambulance is required, parents/carers should be informed immediately, and the staff member must stay with the injured person until help arrives.

9. Policy on First Aid in School

Students who sustain injuries while on campus should be dealt with by the nearest first aider. The student should be sent to the Health and Wellbeing Centre for a further assessment by the nurse if deemed necessary. An online 'Incident, Accident or Near Miss report form' (available on the staff LMS) should be completed by the member of faculty or staff who witnesses the incident, and this system is managed by the Health Centre Team if the student presents to the Health Centre following an incident. All details will be completed by the nurse in the online medical database, including any treatment/advice given. Details of each reported accident, incident or near miss are collated automatically into a spreadsheet database managed by the Operations Manager. If an incident occurs and there are no first aiders present, the following should take place;

- call for the nurse/first aider to assess the situation and treat any injured student
- support the nurse/first aiders in calling for an ambulance or contacting relatives in an emergency

Notices will be displayed in prominent locations throughout the school identifying how to summon first aid and how to access first aid kits in the event of an emergency.

The arrangements for first-aid provision will be adequate to cope with all foreseeable incidents, including major trauma. This is determined by risk assessments and/or local authority or central government guidance.

10. Mental Health First Aid

For more information on our approach to Mental Health First Aid and for a list of our mental health first aiders, please see our Mental Health and Wellbeing Policy.

11. Contractors

The Director of Inclusion, Wellbeing and Compliance and Estates Manager on advice from Lead Nurses will ensure contractors have suitable or sufficient first aid provision, or that the contract may include their use of the school's first aid facilities.

12. Nurse/First Aiders' Responsibilities

- To summon an ambulance when necessary.
- Attend casualties when requested to do so and treat the casualty to the best of their ability in the safest way possible.
- Assist other medical professionals and first aiders at an incident, provide post-incident support where required.
- To insist that **any** casualty who has sustained a head injury that fails the concussion protocol is seen by professionals at a hospital, walk-in centre or GP, depending on severity of injury.
- The Health and Wellbeing Centre will keep an online record of medications with dates, times and treatment given.
- To inform the Health and Wellbeing Centre or relevant School Office when students are too unwell to stay at school. When required, the Health and Wellbeing Centre will contact parents to collect their child and, if applicable, inform them of the accident and the hospital to which their child is being taken.

13. The Director of Inclusion, Wellbeing and Compliance will:

- Provide adequate first aid cover as outlined in the Health & Safety Regulations 1981.
- Ensure relevant insurances are in place and that all staff are made aware of first aid procedures in school.
- Ensure that the Health Centre has implemented measures to acquire students' medical history when they are unwell and communicate pertinent details to relevant staff members regarding conditions such as asthma, anaphylaxis, diabetes, epilepsy, or any other significant illnesses.
- Ensure up to date medical consent forms are filed and available for every student.

14. Accident Prevention

First aid provision is reviewed annually, or whenever there is a relevant change concerning those for whom the school is responsible or the hazards to which they are exposed.

15. The Nurse/First Aiders' Procedure for Dealing with Sick or Injured Students

- Ascertain by inspection and discussion with the student or staff member the nature of the child's injury or illness.
- Comfort or advise as necessary. This may be sufficient, and students may return to class or break. Inform a staff member of the nature of any concerns if appropriate.

- The nurses will treat the injury or illness if required. Clean the wound with antiseptic wipe or running water and cover with a plaster if the wound is still bleeding and no allergy exists.
- The nurse will record the actions taken on the medical database. The member of staff who witnessed the accident should record on the online Accident, Incident or Near Miss report form as necessary.
- The nurse will check that an Accident, Incident or Near Miss form has been completed and prompt its completion if not. If there were no witnesses, the nurse will complete the form.
- If the student is then well enough, they may return to class.
- If the problem persists or there are doubts as to the seriousness of any injury, then, for day students, parent(s) and/or guardian(s) will be telephoned and asked what they would like to do. If parent(s) wish to collect their child, appropriate arrangements are made. If they are boarding students, the nurse will make the decision about when parent(s) and/or guardian(s) are informed.
- If a severe illness or injury is suspected, then the most appropriate member of staff available will take the student to hospital or the emergency services will be called, and nursing or on-call administrative staff will contact the parent(s) and/or guardian(s) to inform them. No student will travel in an ambulance unaccompanied.
- If any issue arises during treatment or discussion with the student that the nurse feels should be taken further, they will telephone or speak to the parent(s) and/or guardian(s).

N.B. The first aiders will have up to date Emergency First Aid training and some will have a full and current First Aid at Work Certificate. They are not, however, medically qualified and hence cannot give medical advice. Only qualified nursing staff can provide medical advice at school.

16. Guidance on how to call an ambulance: Follow the steps below:

From all landlines in the school, phone 999**.** From a mobile phone 112/999.

- They will ask you what service you require. Say **'ambulance'**
- They will ask where you are located. Be as precise as possible: The school postcode (for Satnav) is TW20 8TE or TW20 8SJ for the Security Lodge. Provide as much detail as possible about where you are on campus.
- They will ask you how many casualties. If the casualty is a child, make this clear to the operator.
- They will ask what is wrong with the casualty. Tell them what you are sure of. They are likely to ask for further information such as the casualty's name, date of birth, GP surgery etc. If the casualty is not near a telephone, you will find it helpful to enlist another member of staff to help you with making the call and relaying details.
- They will give you a reference number, note this down in case you need to call back and update them.
- They will ask if other services are required, you may need the police or fire service.
- After you hang up you must wait with the casualty until the ambulance arrives and, if possible, send someone to direct the ambulance to your location.
- Contact Security to advise them that an ambulance is on its way and let them know exactly where on campus you are so that they can direct the ambulance crew.
- If possible, send a member of staff to meet and guide the crew from the site entrance and confirm AED/PAcT locations enroute.

17. Hygiene/Infection control/HIV Protection/Flu and other infectious illnesses

Staff should take precautions to avoid infection and cross contamination and must follow basic hygiene procedures. Staff should take care when dealing with bodily fluids and should dispose of any used dressings or equipment appropriately.

18. Respiratory Illness

The safety of students and staff is our utmost priority at all times. If a student develops symptoms of a respiratory or other infectious illness, we will take immediate action to ensure their wellbeing. In such cases, the student may be provided with isolated accommodation, which may not be within the Health Centre for boarders. Additionally, day students will be isolated until their parents/guardians can collect them. To ensure the safety of everyone involved, appropriate personal protective equipment (PPE) will be provided to those who are caring for the affected students. It is crucial that anyone providing first aid to an individual with suspected or confirmed symptoms of a respiratory infection or any other infectious illness wears the recommended PPE. For further details, please refer to our Whole School Living with Respiratory and other Transmissible Infections information.

19. Disposal of contaminated products

Body-fluid spillages and contaminated materials must be handled using suitable PPE and the school's infection-control procedures. Waste must be assessed and segregated into the appropriate waste stream (including offensive or infectious clinical waste, as applicable) using the specified containers and the school's licensed waste contractor arrangements. Reusable equipment must be cleaned and disinfected in accordance with the manufacturer's instructions and the infection-control procedure. Soiled linen must be securely contained and referred to Housekeeping, and staff must wash their hands thoroughly after handling contaminated materials.

Where the waste classification or cleaning method is uncertain, staff must seek advice from the Health and Wellbeing Centre before disposal. Laundry must be washed in accordance with the fabric care label and the school's infection-control procedure.

20. Confidentiality

Information given by parents/guardians regarding their child's health will be treated in confidence and only shared with other staff when necessary or appropriate.

21. First Aid Boxes and Emergency Medical Bags

- First aid kits are provided in zones of the schools set out in Appendix 1 below. Kits are numbered.
- The contents of the first aid kits will be checked for completeness and expiry dates at the frequency specified in the First Aid Needs Assessment, after use and whenever replenishment is needed; trip kits must also be checked before departure.

- First aiders should familiarise themselves with the location of these kits. Locations not based near the Health Centre should have first aid kits within their departments.

22. Public Access Trauma (PAcT) First Aid Kit

PAcT kits are held in the Security Lodge and the Health and Wellbeing Centre. The kit contains military-grade wound dressings, tourniquets, and other vital components that are available in the event of a significant event. Kits comply with PAcT good-practice guidance, are sealed, clearly labelled and signposted; contents cover catastrophic bleeding control (e.g., trauma dressings, tourniquets) pending emergency services. Locations and checks are recorded in the first-aid inventory.

23. Emergency Equipment

A portable medical oxygen cylinder is held in the Health and Wellbeing Centre, only to be used by staff who are trained to administer it.

AEDs are located at these locations. Devices are checked to manufacturer schedules; staff are briefed on their location and use; and units are registered on The Circuit (UK defibrillator network). The Health and Wellbeing Centre will keep the linked location list and the first-aid inventory current, and ensure that access arrangements cover boarding hours.

24. Location of First Aid Kits (Green Boxes)

- Qualified staff should familiarise themselves with these locations of the first aid kits.
- Biohazard kits are available in the Health and Wellbeing Centre, and there is one in the boarding office, which can be accessed by any staff member in an emergency.
- Any use of contents should be reported to the nurses, so that kits can be re-stocked.
- Members of staff on duty and out on the field, during games lessons, cross country running, athletics clubs etc must take a first aid kit with them. A kit must always be taken on to off-campus school trips.
- Medications should only be administered by those authorised to do so, and all required procedures for the distribution and recording of medication as set out in the Administration of Medication and Medical Needs Policy must be followed.

25. Contents of First Aid Kits (Green Boxes)

- Sling/ triangular bandage x2
- Large Dressing x2
- Medium Dressing x2
- Bandage x2
- Assorted Plasters x20
- Eye pad x2
- Eye wash x2
- Finger dressing x2

- HSE document
- Foil Blankets x2
- Ice Pack Scissors
- Sterile wipes x10
- Clinical Waste Bag
- Vomit bag x2
- Gloves
- Face Masks
- Hand gel
- Resuscitator Tissues
- Gauze

26. Medications

The first aid supplies for trips and off-campus activities, signed for by the Trip Leader, are carefully organised in red backpacks and include a medication bag. This medication bag contains essential items such as the Salbutamol Inhaler (also known as Ventolin), which is to be used only in emergency situations for individuals with known asthma. Additionally, it includes the Adrenaline Auto Injector, available in both adult and junior sizes (also known as EpiPen), which should only be used in emergencies, with immediate medical attention sought thereafter. The bag also contains anti-sickness chewable tablets, lozenges, antihistamines in oral (tablets or liquid) and topical (cream) forms, as well as Paracetamol in 500mg tablets or liquid sachets.

The following medications may be added for overseas trips or longer trips in remote locations

- Loperamide – only where age-appropriate and authorised by the Health and Wellbeing Centre, administered in accordance with the Administration of Medication and Medical Needs Policy
- Re -hydrating sachets (dioralyte)

27. Arrangements for Students with Particular Medical Conditions

It is important for all staff members to become acquainted with the identity of students who have specific medical conditions such as asthma, epilepsy, and diabetes. Additionally, they should be aware of the emergency procedures applicable to students they interact with. For each trip, lists are provided containing information about known student medical conditions, medications, food, drug, and environmental allergies, as well as intolerances. When travelling internationally, individual student immunisation records are provided to the Trip Leader, as needed

28. Allergies

The Health Centre Team produces an up-to-date illness and allergy list, containing the name and grade of those students who may need immediate medical treatment, e.g., for diabetes or epilepsy, so that staff know which students are at risk. This is distributed to relevant departments. The Catering team is aware of students' allergies and dietary requirements and provides meals free of relevant allergens for each student on a daily basis.

29. Auto Injectors (EpiPens)

Students prescribed adrenaline auto-injectors must have two in-date prescribed devices immediately accessible. Independent carriage depends on age and capability and must be recorded in the student's Individual Healthcare Plan; where a child cannot carry them, trained staff must be able to access them without delay. Spare EpiPens are kept in the Health and Wellbeing Centre and also around campus, at these locations. The Lead Nurses check regularly that all EpiPen's are within date and order replacements as required. A list of students who require EpiPens for allergies is maintained and distributed to departments as required. School-held spare devices provide additional emergency cover and do not replace the student's own prescribed devices.

30. Asthma

The nursing team compiles a list of students who suffer with Asthma and distribute it to the relevant departments as required. All such students are to carry their own inhalers. Spare inhalers are available in the Health and Wellbeing Centre.

31. Procedure in the Event of an Accident or Injury

To ensure proper care for minor injuries requiring first aid, it is important to involve a qualified first aider. In the case of young children, a qualified paediatric first aider should be called upon. Within the boarding houses, staff members must promptly notify a nurse if the injury requires more than immediate first aid. If necessary, a student may be directed to the Health and Wellbeing Centre. However, if the student is unable to walk, it is crucial to request medical assistance from the Health and Wellbeing Centre. In the event of a medical emergency or if the first aider is unable to handle the situation, they should assess whether it is appropriate to contact the nurse and/or immediately call for an ambulance.

32. Deciding to Call an Ambulance

Where time permits, staff should consult a nurse; in an emergency they must call 999 without delay. It is important to call an ambulance in the following medical emergencies:

- Significant head injury
- Fitting, unconsciousness, or concussion
- Difficulty in breathing and/or chest pains
- Exhaustion, collapse, or signs of an asthma attack
- Suspected anaphylaxis: administer an adrenaline auto-injector promptly, call 999 immediately and follow the individual emergency plan; use a second auto-injector if symptoms have not improved after five minutes
- Excessive blood loss
- Severe burns or scalds

- Suspected serious fracture

However, in cases where there is a significant medical emergency requiring immediate ambulance assistance, staff should prioritise calling an ambulance without delay. They can then inform the nurse afterwards.

It may also be necessary to call an ambulance as a precautionary measure in certain situations, such as head injuries where it is considered best practice to have a hospital visit.

- If an ambulance is called, a member of staff, preferably someone familiar to the student (especially for young children), should accompany the child in the ambulance.
- If a student feels unwell, they should be taken to the Health and Wellbeing Centre (or sent if the child is not at risk of fainting and is in the Middle or Upper School).
- Staff should not attempt to handle bodily fluids without seeking advice from medical professionals and using appropriate personal protective equipment, such as single-use, non-latex gloves, eye protection, or a resuscitation mask. They should avoid contact with any potentially hazardous substances and the risk of skin penetration injuries. Any necessary cleaning should be performed using proper biohazard precautions and disposed of appropriately. The area should be cordoned off until cleaned, and proper disposal measures should be followed. Contacting Housekeeping for this type of cleaning is recommended.

33. Reporting and Recording

For any accident, on or off site, an Accident, Incident or Near Miss report form should be filled in by the member of staff responsible for the child/student at the time of the injury or as soon as practicable. An electronic blank version is accessed via the LMS staff portal. The detail behind these forms is stored electronically for subsequent analysis. Any witness statements and follow-up details must be recorded on the same form. First aiders and medical staff will add their details for any child/student treated by them.

In cases of illness or accident other than involving a child in the PreK/Kindergarten setting, a judgement will be made by an appropriate person about the need to contact parents, e.g., medical personnel, senior boarding staff, senior pastoral staff.

Accident records will be discussed with the Executive Director of Finance and Operations, who will assess the need for a follow up investigation or RIDDOR reporting, where appropriate. These records will be retained for a minimum of three years. For incidents that fall under RIDDOR, the Executive Director of Finance and Operations will ensure they are reported to the HSE within the required timeframe.

RIDDOR – HSE schools' clarification:

- Employees: report specified injuries, over-7-day incapacitation, occupational diseases and dangerous occurrences within statutory timescales.
- Students/visitors: report a death arising out of or in connection with work, or an injury arising out of or in connection with work where the person is taken directly from the scene to hospital for treatment (not merely for diagnostic tests); specified dangerous occurrences must also be reported.
- The Executive Director of Finance & Operations is the "responsible person" for RIDDOR submissions.

RIDDOR records are retained at least 3 years. Student accident/incident records are retained in line with our retention schedule (normally until the student's 25th birthday).

34. Children in the EYFS age range (PreK/Kindergarten)

First aid kits are readily available in multiple areas, including the PreK/Kindergarten, where EYFS Safeguarding and Welfare requirements apply to children in the EYFS age range, and during educational visits or offsite activities. To ensure the safety of the children, there will always be at least one person with a current full paediatric first-aid (PFA) certificate present on the premises. Additionally, a PFA will accompany the PreK/Kindergarten children during the use of any specialised facilities, participation in off-site activities or educational visits.

It is mandatory for level 2/3 staff members within PreK/Kindergarten to possess a valid PFA certificate. This requirement enables them to be included in the child-to-adult ratios of the class. The PFA course taken by staff members must meet the necessary standards and should be renewed every three years. The person providing mandatory EYFS on-site and outing cover must hold a full PFA certificate meeting Annex A of the current EYFS statutory framework; an emergency PFA course alone does not meet that coverage requirement.

First aid kits are easily accessible to adults while being kept out of reach of children. No medication, unless prescribed, is administered to children, parents, or staff. During the admission process to the PreK/Kindergarten program, parents are required to provide written permission for emergency medical advice or treatment. Upon registration, parents sign a consent form authorising the staff to take their child to the nearest Accident and Emergency unit if necessary, with the understanding that the parents have been informed and are on their way to the hospital. Specific forms are used by staff members based on the age group of the children.

Parents will be promptly informed on the same day or as soon as reasonably practicable about any accidents, injuries, or first aid treatment provided to their child in the PreK/Kindergarten program. Staff members are responsible for documenting such incidents in the confidential in-house log. In case of any serious accident, injury, or death of a PreK/Kindergarten child while under the school's care, the school will notify the relevant local child protection agency using the referral arrangements in the Safeguarding and Child Protection Policy and follow any advice provided.

35. School trips

There should be a first aider on every trip out of school, and a first aid kit must be available. The level of first-aider competence will be appropriate to the activity and group**;** on trips that include children in the EYFS age range (PreK/Kindergarten), at least one accompanying adult holds a current full PFA certificate. Staff taking medication must be aware of possible side-effects, and, where relevant to their ability to carry out their duties or to adhere to the Faculty and Staff Code of Conduct, must inform their line manager and Trip Leader. In cases of strong medication, a risk assessment will be made, to ensure that the safety of students and staff

is not compromised. Where there is any doubt, staff may be asked to obtain confirmation of fitness to work from a medical practitioner. Any personal medication must be securely stored, away from access by students or young children, and must be separate from medication to be dispensed to students in their care. As with storage instructions, medication must be in its original packaging, clearly labelled.

The school policy on smoking, alcohol and misuse of drugs clarifies the TASIS England stance on the use of substances, and, as indicated in the Faculty and Staff Code of Conduct, where staff are found to be misusing substances, this may constitute gross misconduct and may also include, where appropriate, notifying the police.

36. Related Policies

Safeguarding Child Protection Policy, Administration of Medication and Medical Needs Policy, Health Centre Policy, Allergy Safety Policy, Health and Safety policies and procedures, including emergency procedures, School Visits and Accident Reporting, Smoking, Alcohol and Misuse of Drugs, any and all relevant TASIS England disciplinary procedures. Available on our school website or upon request from the School Office.

Appendix 1: Location of First Aid kits Across Campus

AED's locations	IT
Auto injectors locations	US Kitchen
PAcT kits at: Security Lodge; Health & Wellbeing Centre	LS Kitchen
Science UG02	PE Office kit 1
Science department office (Upper Ground Floor)	PE Office kit 2
Science FF01	Small Gym
Science FF02	
Science RS01	
Science RS02	
Maintenance Workshop	
Security	
Business office	
Admissions ground floor	
Attic (upstairs Admissions)	
Magna Carta	
Coach House	
Oak Court	
Large Gym	
Art Room upstairs Kit 1	
Art Room upstairs Kit 2	
Theatre Stage	
Theatre Office	
Fitness Centre	
LS Office	
PreK/Kindergarten Classrooms	
MS Office	
MS Art	
MS Science RH19	
MS Science RH20	
MS Science RH21	
Teen Hollow	
MS Room 22	
Music Room	
Science LG01	
Science LG02	
Science UG01	
Boarding office	
Tudor	
TP1-2	
TP3-4	
TP 5	
Cloisters	
Cloisters Basement (Housekeeping)	
Orchard	
Vicarage Mews	