All Saints Infant School First Aid Policy

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Date of next review:	March 2027
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Policy owner:	Headteacher
Location of policy	School website
Policy control record updated by Clerk to Governors	Yes
Date of last amendments	March 2025

Introduction

The Health and Safety policy sets out the requirement regarding First Aid arrangements in school. Schools should develop a school First Aid Policy and procedures, detailing how First Aid works in their school. This should include the monitoring arrangements of accidents and incidents.

First Aid arrangements in schools must be clearly on display in prominent areas and high-risk areas such as workshops and kitchens. The process for summoning a First Aider must be clearly defined and communicated to all staff, pupils and visitors.

First Aid assistance must be provided at all times during core school hours by nominated and qualified members of staff. Schools must consider the arrangements for First Aid for any staff who work outside of the core hours (such as cleaners and Site Managers). First Aid arrangements for people working when the school is shut should be covered in the Lone Working Policy.

Aims

The aims of this policy are to:

- Ensure the health and safety of all staff, pupils and visitors
- Ensure that staff are aware of their responsibilities with regards to health and safety
- Provide a framework for responding to an incident and recording and reporting the outcomes

Legislation and guidance

This policy is based on the Statutory Framework for the Early Years Foundation Stage and Early years foundation stage: coronavirus disapplications guidance, advice from the Department for Education on first aid in schools, health and safety in schools and actions for schools during the coronavirus outbreak, and the following legislation:

Roles and responsibilities

In schools with Early Years Foundation Stage provision, at least 1 person who has a current paediatric first aid (PFA) certificate must be on the premises at all times. If after taking all possible steps in your power you're still unable to secure a staff member with a full PFA certificate, you must carry out a written risk assessment and ensure someone with a current first aid at work or emergency PFA certification is on site at all times when these children are.

Beyond this, in all settings – and dependent upon an assessment of first aid needs – employers must usually have a sufficient number of suitably trained first aiders to care for employees in case they are injured at work. However, the minimum legal requirement is to have an 'appointed person' to take charge of first aid arrangements, provided your assessment of need has taken into account the nature of employees' work, the number of staff, and the location of the school. The appointed person does not need to be a trained first aider.

Section immediately below sets out the expectations of appointed persons and first aiders as set out in the 1981 first aid regulations and the DfE guidance listed in 'Legislation and guidance' section

above. If you do not have an appointed person you will need to re-assign the responsibilities listed below accordingly.

All schools should adapt this section to reflect their circumstances, in line with their assessment of first aid needs.

First Aid Lead(s)

The school's appointed Daniela Murphy. They are responsible for:

- Making a formal assessment of First Aid requirements using the Assessment of First Aid Provision document (Appendix 4), maintaining the completed form and monitoring the adequacy of the provision including specific health conditions a/first aid needs.
- Reviewing the assessment annually in the light of significant changes or validity.
- Taking charge when someone is injured or becomes ill.
- Ensuring there is an adequate supply of in-date medical materials in first aid kits and replenishing the contents of these kits.
- Ensuring that an ambulance or other professional medical help is summoned when appropriate.
- Ensuring that first aiders have an appropriate qualification, keep training up to date and remain competent to perform their role.
- Ensuring all staff are aware of first aid procedures.
- Reporting specified incidents to the HSE when necessary.
- Ensuring that an appropriate number of trained staff are present in the school at all times.

First Aiders

First Aiders are trained, competent and qualified to carry out the role and are responsible for:

- Acting as first responders to any incidents; they will assess the situation where there is an injured or ill person and provide immediate and appropriate treatment.
- Sending pupils home to recover, where necessary with the explicit agreement of the Headteacher.
- Filling in an appropriate accident report on the same day, or as soon as is reasonably practicable, after an incident (see the template in Appendix 2).
- Inform First Aid Lead.

Our school's First Aid Lead and First Aiders are listed in Appendix 1. Their names will also be displayed prominently around the school.

The Governing Body

The Governing Body has ultimate responsibility for health and safety matters in the school, but delegates operational matters and day-to-day tasks to the Headteacher and staff members.

Reading's Local Authority insurers confirm that the employer's liability insurance policy provides indemnity for staff acting as First Aiders or Emergency Aiders as defined in this policy. Treatment must be given in accordance with the training received. Whether or not employees receive payment for acting as first aiders is irrelevant in this respect and has no effect on the provision of insurance cover.

The Headteacher

The Headteacher is responsible for the implementation of this policy, including:

- Ensuring appropriate risk assessments are completed and appropriate measures are put in place.
- Ensuring that adequate space is available for catering to the medical needs of pupils.

Staff

School staff are responsible for:

- Ensuring they follow First Aid procedures.
- Ensuring they know who the First Aiders in school are.
- Completing minor incident reports (see Appendix 2) for all incidents they attend to where a First Aider is not called.

NB staff can deal with minor cuts and grazes without the need for a First Aider. Head injuries require the assistance of a First Aider.

First Aid procedures

The school has a designated area for the treatment of injuries and for First Aid. It contains a sink and is located near a toilet. A temporary bed can be put up if necessary. Bins for blood waste are clearly marked and First Aid equipment is stored in clean, clearly labelled, easily accessible containers or cupboards.

Infection control

First Aid Staff must:

- Ensure all own injuries are covered with waterproof dressings before commencing treatment.
- Wash their hands before and after applying dressings.
- Only use mouth pieces when administering mouth-to-mouth if trained to do so.
- Use disposable gloves whenever blood or other bodily fluids are handled.
- Use disposable materials such as paper towels and sanitizing powder to clear up spills of bodily fluid.
- Dispose of blood and bodily waste in a way that does not allow others to come into contact with it. (Seek medical advice if contact is made with any other person's bodily fluids).

In-school procedures

In the event of an accident resulting in injury:

- The closest member of staff present will assess the seriousness of the injury and seek the assistance of a qualified First Aider, if appropriate, who will provide the required First Aid treatment. *NB Minor cuts and grazes can be treated by any member of staff. First Aiders will always deal with major injuries.*
- The First Aider, if called, will assess the injury and decide if further assistance is needed from a colleague **or the emergency services**. They will remain on scene until help arrives.

NB: Where an auto-adrenaline pen has been used for a severe allergic reaction, an ambulance must be called, and the word anaphylaxis must be used when calling emergency services.

NB. Where an asthma attack does not abate following treatment with a salbutamol inhaler, an ambulance must be called, and the word asthma must be used when calling the emergency services.

The decision will vary from case to case, but it is strongly advised to administer First Aid and **call an ambulance if someone**:

- Appears not to be breathing.
- Is having chest pain, difficulty breathing or experiencing weakness, numbness or difficulty speaking.
- Experiencing severe bleeding that you are unable to stop with direct pressure on the wound.
- Is struggling for breath, possibly breathing in a strange way appearing to 'suck in' below their rib cage as they use other muscles to help them to breathe.
- Is unconscious or unaware of what is going on around them.
- Has a fit for the first time, even if they seem to recover from it later.
- If they are having a severe allergic reaction accompanied by difficulty in breathing or collapse – get an ambulance to you, rather than risk things getting worse whilst you are in the car.
- If a child is burnt and the burn is severe enough that you think it will need dressing – treat the burn under cool running water and call an ambulance. Keep cooling the burn until the paramedics arrive and look out for signs of shock.
- If someone has fallen from a height, been hit by something travelling at speed or has been hit with force.
- If you suspect that someone may have sustained a spinal injury – do not attempt to move them and keep them still whilst awaiting an ambulance.

This is guidance, not an exhaustive list.

- The First Aider will also decide on what treatment and whether the injured person should be moved or placed in a recovery position.
- If the First Aider judges, in discussion with leadership, that a pupil is too unwell to remain in school, parents will be contacted by office staff and asked to collect their child. Upon their arrival, the First Aider will recommend next steps to the parents.
- If emergency services are called, the parents will be contacted immediately by office staff who will keep leadership informed.
- In the case that a child/student needs to be assessed at hospital, but the child's/student's contact cannot be reached, then a member of senior staff and a first aider will transport the child to hospital whilst the office team continue to attempt to contact family members. (See protocol for taking children out on visit).
- The member of staff who treated the incident will complete the appropriate minor incident book or School Incident Report Form on the same day, as soon as is reasonably practical after an incident resulting in an injury. A copy of this form will be given to the parents and a copy kept on file in school. (See Reporting and Recording section for further guidance.)
- There will be at least 1 person who has a current paediatric first aid (PFA) certificate on the premises at all times.
- **During coronavirus**: we will use our 'best endeavours' to ensure 1 person with a full PFA certificate is on site when children aged 2 to 5 are present. If, after taking all possible steps in our power, we're still unable to secure a staff member with a full PFA certificate, we will carry out a written risk assessment and ensure someone with a current first aid at work or emergency PFA certification is on site at all times when these children are.

NB see flowchart (Appendix 6) for guidance as to which form to complete and who, if anyone, to contact.

Off-site procedures

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

- A mobile phone
- A portable First Aid kit
- Information about the specific medical needs of pupils
- Parents' contact details
- Risk assessments will be completed by the visit leader prior to any educational visit that necessitates taking pupils off school premises, in accordance with the Educational Visits Policy.

There will always be at least one First Aider with a current paediatric First Aid certificate on school trips and visits, as required by the statutory framework for the Early Years Foundation Stage.

Record-keeping and reporting

First Aid and accident record book

- An accident form or minor incident form will be completed by the First Aider on the same day, as soon as possible after an incident resulting in an injury that is managed within school (See Appendix 6 - flowchart for clarity).
- As much detail as possible should be supplied when reporting an accident, including all the information included.
- A copy of the accident report form will also be added to the pupil's educational record by the office staff.
- Records held in the First Aid and accident book will be retained by the school in accordance with the Retaining Records Policy.

Reporting to the Governing Body

The First Aid Lead will report to the Governing Body using the Matrix (Appendix 3) and Incident Investigation document for guidance.

Reporting to the HSE

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

They will report these to the Health and Safety Executive as soon as is reasonably practicable and in any event within 10 days of the incident.

Reportable injuries, diseases or dangerous occurrences include:

- Death.
- Specified injuries, which are:
    - fractures, other than to fingers, thumbs and toes ○ amputations ○ dislocation of shoulder, hip or knee
    - any injury likely to lead to loss of sight (temporary or permanent) ○ a chemical or hot burn or any penetrating injury to the eye ○ any injury resulting from electric shock or electrical burn

- any crush injury to the head or torso causing damage to the brain or internal organs
- serious burns (including scalding)
- any scalding requiring hospital treatment
- any loss of consciousness caused by head injury or asphyxia
- any injury arising from working in an enclosed space leading to hypothermia or heat induced illness, or requires resuscitation or admittance to hospital for more than 24 hours
- absorption of any substance by inhalation, ingestion or through the skin causing acute illness requiring medical treatment or loss of consciousness.

- Injuries where an employee is away from work or unable to perform their normal work duties for more than seven consecutive days (not including the day of the incident).
- Where an accident leads to someone being taken to hospital.
- Near-miss events that do not result in an injury but could have done. Examples of near-miss events relevant to schools include, but are not limited to:
  - the collapse or failure of load-bearing parts of lifts and lifting equipment
  - the accidental release of a biological agent likely to cause severe human illness
  - the accidental release or escape of any substance that may cause a serious injury or damage to health
  - an electrical short circuit or overload causing a fire or explosion.

Information on how to make a RIDDOR report is available at How to make a RIDDOR report, HSE

Notifying parents

The class teacher/appropriate adult will inform parents of any accident or injury sustained by a pupil, and any First Aid treatment given, on the same day, or as soon as reasonably practicable.

Reporting to Ofsted and child protection agencies

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

The First Aid Lead will also notify the LADO of any serious accident or injury to, or the death of, a pupil while in the school's care.

Training

Staff will be trained in accordance with the outcomes of the Assessment of First Aid Provision, including whether there is an Early Years Foundation Stage in school.

All First Aiders must have completed a training course and must hold a valid certificate of competence to show this. The school will keep a register of all trained First Aiders, what training they have received and when this is valid until.

Staff are encouraged to renew their First Aid training when it is no longer valid. (Most training is valid for three years).

At all times, at least one staff member will have a current paediatric First Aid (PFA) certificate which meets the requirements set out in the Early Years Foundation Stage statutory framework and is updated at least every three years.

Monitoring arrangements

This policy will be reviewed every two years by the Headteacher .

Links with other policies

- Health and Safety Policy
- Educational Visits Policy
- Administering Medicines and Supporting Pupils with Medical Conditions Policy
- Retention Policy

Other useful documentation/links

HR 53 Infection Control Policy and Strategic Health and Safety Service

Guidance on First Aid for Schools:
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/306370/guidance_on_first_aid_for_schools.pdf http://www.hse.gov.uk/firstaid/index.htm

Appendix 1: List of First Aiders

Our school has an Early Years Foundation Stage and so we have 3 trained in Paediatric First Aid.

Our schools First Aid Lead is: Daniela Murphy

The person who calls the emergency services is: Any member of staff

The people who contact parents (in discussion with the Head) are: Susannah Daniel or Kathleen Wathey

All Saints Infants School First Aiders

Staff Member	Role	Information
Daniela Murphy	**Paediatric First Aider Lead**	**Expiry Date: March 2027**
Lucy Wright	**Paediatric First Aider**	**Expiry Date: October 2028**
Iva Butler	**Paediatric First Aider**	**Expiry Date: November 2027**

Appendix 2: Model minor incident report form

Name of child	Date/time of incident	Where the incident took place	Details of injury/illness	First Aid given	What happened after (went back to class/play, went to hospital etc)	Name and signature of First Aider	Parents contacted or not

Appendix 3: Incident Matrix

Health and Safety Policy – Appendix A (incident category matrix)

Category	Example	Actions to consider
1. Death and serious injury	**Death** **Major injuries – these are defined as:** • Any fracture, other than to fingers, thumbs or toes. • Any amputation. • Dislocation of shoulder, hip or knee. • Loss of sight (Temporary or permanent). • A chemical or hot burn to the eye or any penetrating injury to the eye. • Any injury resulting from an electric shock or electrical burn (including any electrical burn caused by arcing or arcing products) leading to unconsciousness or requiring resuscitation or admittance to hospital for more than 24 hours. **Any other injury:** • leading to hypothermia, heat-induced illness or to unconscious • requiring resuscitation • requiring admittance to hospital for more than 24 hours • loss of consciousness caused by asphyxia or by exposure to a harmful substance. • Either of the following conditions which result from the absorption of any substance by inhalation, ingestion or through the skin: ▪ acute illness requiring medical treatment ▪ loss of consciousness. • Acute illness which requires medical treatment where there is reason to believe that this resulted from exposure to a biological agent or its toxins or infected material. **Safeguarding:** any safeguarding incident involving the loss, abduction or kidnap of a child. **Over 7-day absence:** members of staff, contractors or pupils away from work or school for seven consecutive days or more.	1. Call the emergency services. 2. Provide first aid. 3. Alert local management teams. 4. Cordon off the area where appropriate, do not disturb the scene. 5. Evacuate onlookers. 6. Refer to the Red section of the Critical Incident Plan. 7. Ask witnesses to remain on-site. 8. Follow guidance from emergency services and Anthem. 9. Alert parents, clients and other key stakeholders (e.g. Local Governing Body, Local Authority). 10. Complete the Anthem Incident Report Form report form and submit it to Anthem (enquiries@anthemtrust.uk) 11. Follow the incident investigation process and complete the relevant documentation.

Category	Example	Actions to consider
2. Dangerous occurrences	**Lifting machinery:** the collapse, overturning or failure of any load-bearing part of lifts or lifting equipment. **Overhead electric lines:** any unintentional incident in which plant, equipment or people come into contact with overhead power lines. **Electrical short circuit:** short circuit or overloading followed by fire or explosion. **Collapse of scaffold:** the complete or partial collapse of scaffold. **Collapse of building or structure:** any unattended collapse or partial collapse of any building: under construction, reconstruction, alteration or demolition. **Vehicle strike:** any vehicle striking a building that Anthem own, leases or occupies. **Explosion or fire:** an explosion or fire occurring in any plant or premises which results in the evacuation of the premises and the attendance of the fire service. **Escape of substances:** the accidental release or escape of any substance in a quantity sufficient to cause death, major injury or any other damage to the health of any person.	1. Evacuate the danger zone 2. Call the emergency services 3. Provide first aid 4. Alert local management teams 5. Cordon off the area where appropriate, do not disturb the scene 6. Follow guidance from emergency services and Anthem 7. Alert the insurance company (where applicable) 8. Alert parents, clients and other key stakeholders (e.g. Local Governing Body, Local Authority) 9. Complete the Anthem Incident Report Form report form and submit it to Anthem (enquiries@anthemtrust.uk)
3. Serious reportable incidents	**Staff or Pupil taken from school/Anthem to hospital:** any incident involving an individual being taken to hospital by ambulance or other means in connection with an incident that has occurred whilst in the care of Anthem. **Attendance of emergency services:** fire service, ambulance or police presence under emergency 'blue light' situation. **School trip incident:** any incident on a school trip involving the emergency services that is not covered within category one or two. **Emergency within a swimming pool:** any incident in a swimming pool. **Road traffic accident whilst driving on company business.**	1. Call the relevant emergency services; and deal with the incident (e.g. provide first aid). 2. Alert local management teams where necessary. 3. Alert parents where appropriate. 4. Complete the Anthem Incident Report Form report form and submit it to Anthem (enquiries@anthemtrust.uk) 5. Follow the incident investigation process and complete the relevant documentation.

Category	Example	Actions to consider
4. Security/ violence	**Security:** any incident involving the theft of equipment, assets and/or personal belongings in excess of £500. **Violence:** an incident involving serious violence towards staff, resulting in physical abuse or injury.	1. Call the Police 2. Alert local management teams where necessary 3. Separate witnesses and take statements 4. Complete the Anthem Incident Report Form report form and submit it to Anthem (enquiries@anthemtrust.uk)
5. General accidents	**Accidents:** requiring medical attention of a first aider, school nurse or the use of contents from a first aid box. **Manual handling:** any injury involving manual handling at work not by other categories.	1. Provide first aid. 2. Log the incident in the school's accident book and file on-site. 3. Replenish first aid box contents.
6. Minor accidents/ near misses	**Slips, trips and falls:** any slip, trip or fall not covered by other categories. **Minor accidents:** any other minor accident not covered by other categories. **Verbal abuse:** verbal abuse of staff, visitors and contractors by others. **Near miss:** any incident which could have resulted in physical harm or property damage.	1. Log the incident in the school's accident book and file on-site. 2. Report the incident to management.
7. Stress	**Report of stress:** staff, contractor or temporary staff reporting stress in the workplace.	1. Alert your Human Resources contact. 2. Complete an incident report form and file on-site.

Appendix 4: Assessment of First Aid Provision

School:

Name of Assessor(s):

Assessment of First Aid Factors

In order to assess the First Aid requirements, you should identify whether any of the following factors apply to the workplace or employees by ticking Yes or No in all cases:

Table 1

Assessment Factor	Apply (Y/N)?		Impact on First Aid provision
Have your risk assessments identified significant risks of injury and/or ill health?	☐	☐	If the risks are significant you may need to employ First Aiders.
Are there any specific risks such as working with hazardous substances, dangerous tools or machinery, and dangerous loads or animals?	☐	☐	You will need to consider: • specific training for first aiders • extra first-aid equipment • precise siting of first-aid equipment.
Are there parts of the establishment with different levels of risk?	☐	☐	You may need to make different levels of provision in different parts of the establishment.
Have you had any accidents or cases of ill-health in the past 12 months?	☐	☐	You will need to check your record of accidents and cases of ill health – what type they are and where they happened. You may need to: • locate your provision in certain areas • review the contents of the first aid box.
Are there inexperienced workers on site, or employees with disabilities or special health problems?	☐	☐	You will need to consider: • special equipment • local siting of equipment.
Are the premises spread out, e.g. are there several buildings on the site or multi-floor buildings?	☐	☐	You will need to consider provision in each building or on several floors.
Is there shift work or out-of-hours working?	☐	☐	Remember there needs to be First Aid provision at all times people are at work.

Is your workplace remote from emergency medical services?	☐	☐	You will need to:
			• inform local medical services of your location • consider special arrangements with the emergency services.
Do you have employees who travel a lot or work alone?	☐	☐	You will need to consider issuing personal First Aid kits and training staff in their use.
Do any of your employees work at sites occupied by other employers or is your site used by other occupiers?	☐	☐	You will need to make joint arrangements with the other site occupiers.
Do you have any work experience or other trainees?	☐	☐	Your First Aid provision must cover them.
Do members of the public visit your premises?	☐	☐	There is no legal responsibility for nonemployees however you are strongly recommended to consider them i.e. schools would consider and include their pupils and libraries their customers.
How many people are employed on site? less than 5? 5 to 49? 50 to 100? more than 100?	☐	☐	You may need to employ first aiders – see Table 2 below.
Is a First Aid room required?	☐	☐	

The following table offers suggestions on how many first aiders or appointed persons might be needed in relation to levels of risk and number of employees on site. Increased provision will be necessary to cover for absences. The table does not take into consideration any non-employees who may be affected so an allowance will need to be made in such circumstances.

Table 2

Type of Workplace	Numbers of First Aid Personnel Required

Lower risk: Shops, offices, libraries, schools and similar workplaces.	• Fewer than 50 employed at any location: at least one appointed person. (It may be appropriate to provide an Emergency First Aider (EFAW) if large numbers of the public visit the workplace.) • 50-100: at least one First Aider. • More than 100: one additional First Aider for every 100 employed.
Higher Risk: Light engineering and assembly work, food processing, warehousing extensive work with dangerous machinery or sharp instruments construction, chemical manufacture, work involving special hazards* such as hydrofluoric acid or confined spaces.	• Fewer than 5: at least one appointed person. • 5-100: At least one First Aider (FAW) per 50 employees or part thereof. **Additional training may be needed to deal with injuries resulting from special hazards.*

The minimum First Aid provision on any work site is:

- A suitably stocked First Aid box
- An appointed person to take charge of First Aid arrangements, at all times whilst people are at work

Appendix 5: Contents and location of First Aid Kits

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

- A leaflet with general first aid advice
- Regular and large bandages
- Eye pad bandages
- Triangular bandages
- Adhesive tape
- Safety pins
- Disposable gloves
- Antiseptic wipes
- Plasters of assorted sizes
- Scissors
- Cold compresses
- Burns dressings

No medication is kept in first aid kits.

First Aid kits are stored in:

- The library
- The grab trolley
- Each classroom (a small bum-bag first aid kit)
- The staff room

Appendix 6: Flowchart

Minor incident

- Graze
- Trip
- Bump
- Verbal abuse to staff
- Near misses

Category 6

Can be treated by any member of staff (not just First Aider)

Must be written on Minor Incidents form in file and sticker for child.

If bumped head, then Bumped Head form should be sent home. Completed by First Aider.

Major incident

Requires medical attention *specifically* from a First Aider or the use of contents from a First Aid box. Category 5

Major incident form should be completed in detail by the trained First Aider who administered treatment. One copy of the form should be given to parents and one copy kept in school file.

Parent to be notified as soon as possible then either 1,2,3 or 4:

1. Child can return to class under observation.

2. Child to go home with parent. Attending First Aider to stay with child until parent/carer arrives.

3. Child needs to go to hospital. Parent to be called but member of leadership AND First Aider to take if parent cannot be contacted. Office to keep trying contacts.
Category 3

4. If an ambulance is needed then First aider should clearly pass this message onto office staff, who will call for the ambulance straight away, and then inform leadership. The ambulance should be called before parents are contacted. A designated first aider should remain with the child until the ambulance arrives.
Categories 1, 2 and 3 (see matrix)

Regardless of which option, the Matrix must be consulted as to where form should be filed and who it must be shared with.

If Matrix determines a Category One, Two or Three incident then an Incident Investigation Form must be completed and sent to the Governing Body who will give further guidance. **This includes any incident in a swimming pool or a road traffic accident while driving on company business.**

If any incident that happens while under the care of the school (regardless of what category it falls under) results in absence of 7 days or more this must also be reported to the Governing Body.

Appendix 7: Model Head Injury Letter

Dear Parent/Carer,

Your child [insert name] received a bump on their head today whilst attending school.

[Description of how head injury occurred]

A School First Aider assessed your child. Although no problems were detected at the time, we request that you observe your child for the next 24 hours for any of the following symptoms:

- Blurred vision
- Drowsiness
- Nausea or vomiting
- Severe headache
- Confusion
- Slurred speech
- Unresponsiveness
- Clumsy, staggering or dizziness
- Bleeding from ears or nose

Contact your GP or the nearest Accident and Emergency Department if you notice any of the above symptoms.

On your child's return to school, please inform us whether signs of concussion occurred, so that we can provide appropriate support.

Yours faithfully,

[signatory's name and position]