

Policy H8 – First Aid and medical

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1 Aims

1.1 The aims of our first aid 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 arranging first aid provision, responding to an incident and recording and reporting the outcomes

2 Legislation and guidance

2.1 This policy is based on the [Statutory Framework for the Early Years Foundation Stage](#) (for academies with Early Years provision) advice from the Department for Education on [first aid in schools](#) and [health and safety in schools](#) and the following legislation:

- [The Health and Safety at Work etc Act 1974](#)
- [The Health and Safety \(First-Aid\) Regulations 1981](#), which state that employers must provide adequate and appropriate equipment and facilities to enable first aid to be administered to employees, and qualified first aid personnel
- [The Management of Health and Safety at Work Regulations 1999](#), which require employers to carry out risk assessments, make arrangements to implement necessary measures, and arrange for appropriate information and training

- [The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations \(RIDDOR\) 2013](#), which state that some accidents must be reported to the Health and Safety Executive (HSE), and set out the timeframe for this and how long records of such accidents must be kept
- [Social Security \(Claims and Payments\) Regulations 1979](#), which set out rules on the retention of accident records
- [The Education \(Independent School Standards\) Regulations 2014](#), which require that suitable space is provided to cater for the medical and therapy needs of pupils

2.2 This policy complies with our funding agreement and articles of association.

3 Roles and responsibilities

3.1 The Principal must assess the levels of risk and circumstances of the academy and determine the level of first aid provision which is suitable. Many of the factors listed below will influence the Principal's decision:

- the distance of the academy from a casualty department
- type and level of risk of activities being undertaken (eg PE, DT and Science would be considered high risk activities)
- if an employee is isolated
- whether academy is split site and distance between the sites
- the size of the academy (*eg numbers of staff and students/pupils*)
- the number of visitors, contractors and rental parties

3.2 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.

3.3 Depending on 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 the assessment of need has taken into account the nature of employees' work, the number of staff, and the layout and location of the academy. The appointed person does not need to be a trained first aider.

3.3 Appointed person(s) and first aiders

3.3.1 They are responsible for:

- Taking charge when someone is injured or becomes ill
- Ensuring there is an adequate supply of 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
- First aiders are trained and qualified to carry out the role (see section 10) 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
 - Filling in an accident report on the same day, or as soon as is reasonably practicable, after an incident
 - Keeping their contact details up to date

3.3.2 The level of first aid provision available in academies is shown below:

Appointed Person (AP)	<p>Where an assessment identifies that a designated first-aider is not required, the minimum requirement is an AP.</p> <p>Role:</p> <ul style="list-style-type: none"> • Take charge of first aid arrangements, including looking after equipment and facilities • Take control of an emergency situation, eg calling the emergency services; sending a responsible person to open gates and direct an ambulance crew to the injured person if necessary; ensuring children and onlookers are kept away from the scene; obtaining details from the ambulance crew regarding where the injured person will be taken. <p>They do not provide first aid treatment or need to be first aid trained to fulfil their role. However where the AP has undertaken the Emergency First Aid at Work (EFAW) qualification, they may assume both roles.</p>
Emergency First Aid at Work (EFAW)	<p>The 1 day EFAW certificate is generally suitable for low risk environments such as offices and shops.</p> <p>Role:</p> <ul style="list-style-type: none"> • Provide emergency first aid treatment only (eg resuscitation, control of bleeding, treatment of burns and unconscious casualties). • In the absence of an AP, take control of an emergency situation (see above) • in the absence of an AP, take charge of first aid arrangements, including looking after equipment and facilities <p>They have far less training than qualified first aiders and cannot, therefore, be considered as substitutes for first aiders.</p>
First Aid at Work (FAW)	<p>The 3 day FAW Certificate is generally suitable for medium to high risk environments such as educational establishments, manufacturing and construction.</p> <p>Role:</p> <ul style="list-style-type: none"> • Provide emergency first aid • Apply first aid treatment to a range of specific injuries and illnesses (eg diabetic emergency, heart attack, asthma attack and severe allergic reactions). • In the absence of an AP and/or an EFAW, take control of an emergency situation (see above) • in the absence of an AP and/or an EFAW, take charge of first aid arrangements, including looking after equipment and facilities
Paediatric First Aid (PFA)	<p>The PFA certificate is a requirement for all early years settings.</p> <p>Role:</p> <ul style="list-style-type: none"> • Respond efficiently to an ill or injured child or infant prior to the arrival of the emergency services.

3.4 The Board of Trustees

3.4.1 The Board of Trustees has ultimate responsibility for health and safety matters in each academy, but delegates operational matters and day-to-day tasks to the Principal and staff members.

3.5 The Principal

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

- Ensuring that an appropriate number of appointed persons and/or first aid trained personnel are present in the academy at all times
- Ensuring that first aiders have an appropriate qualification, keep training up to date and remain competent to perform their role
- Ensuring all staff are aware of first aid procedures
- Ensuring appropriate risk assessments are completed and appropriate measures are put in place
- Undertaking, or ensuring that managers undertake, risk assessments, as appropriate, and that appropriate measures are put in place
- Ensuring that adequate space is available for catering to the medical needs of pupils
- Reporting specified incidents in line with Trust accident and incident reporting guidance

3.6 Staff

3.6.1 Academy staff are responsible for:

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

3.7 Visitors, contractors and letting of premises

3.7.1 It is reasonable for the academy's first aid arrangements to include **visitors** who may be on the premises, eg parents.

3.7.2 Where a **contracting firm** is working on the site for a period of time, it is reasonable to expect that their employer has made arrangements for their first aid cover. This should be confirmed with the contractor or the member of technical services staff responsible for the contract during the pre-work liaison meetings. It would be reasonable, however, to provide first aid if required in an emergency.

3.7.3 First aid is an important consideration when **letting** academy premises. It is the decision of the principal whether first aid equipment will be provided. However, it is essential that the hirer has access to a telephone for use in an emergency and that the hirer is informed of its position and any instructions for its use. The arrangements for first aid are included in any conditions specified by the academy when hiring the premises and any contract agreed. These conditions are as follows:

- The Hirer is responsible for providing First Aid cover appropriate to the activity. The nominated person must be trained in First Aid to a suitable level.
- The Hirer must have a method of contacting the emergency services, i.e. a mobile phone or ensure access to a landline phone is available.

4 First aid procedures

4.1 In-school procedures

4.1.1 In the event of an accident resulting in injury:

- The closest member of staff present will assess the seriousness of the injury and seek the assistance of a qualified first aider, if appropriate, who will provide the required first aid treatment
- The first aider, if called, will assess the injury and decide if further assistance is needed from a colleague or the emergency services. They will remain on the scene until help arrives
- The first aider will also decide whether the injured person should be moved or placed in a recovery position

- If the first aider judges that a pupil is too unwell to remain in school, parents will be contacted and asked to collect their child. Upon their arrival, the first aider will recommend next steps to the parents
- If emergency services are called, the academy will contact parents immediately
- The first aider will complete an accident report form within 72 hours as per Incident Reporting guidance.

4.2 Transporting injured pupils/students

Use of an ambulance

- 4.2.1 An ambulance should normally be called in the event of a serious injury/illness. However, if there is any doubt, staff should not hesitate to call an ambulance. The ambulance service is always ready to respond in these circumstances.
- 4.2.2 Serious injuries include a suspected bone fracture, a probable injury to a joint; severe wounds with bleeding or shock or where the wound is grossly contaminated with dirt; burns and scalds, except for very small areas; head and eye injuries.
- 4.2.3 The distinction between these groups cannot be clearly defined and injuries mentioned are only given as guides. The Principal must, therefore, decide on the appropriate action to be taken in each case.
- 4.2.4 It is recommended that a member of staff accompany the student to hospital. This could be a suitably qualified and experienced member of support staff but in cases where emergency treatment of a student is required and the parents cannot be contacted (or on an academy visit, have not given their earlier consent), then the decision on authorising treatment remains with the senior professional member of staff e.g. Principal. The member of staff should take a copy of all relevant contact details and addresses with them.

Use of a taxi

- 4.2.5 If a taxi is used, a member of staff must accompany a student. Use of a taxi would require only one member of staff. The taxi could be used in circumstances to take a student home where the parent/carer does not have transport or dental emergencies.

Use of a car belonging to a member of staff

- 4.2.6 Members of staff may use their car to take a student home, to a doctor or to hospital, provided they are authorised to do so and their insurance cover entitles the driver to use their car on academy business. A mileage allowance may be payable from the academy budget. Use of a car will require a second member of staff to care for the injured/ill student.

4.3 Off-site procedures

- 4.3.1 When taking pupils off the academy premises, staff will ensure they always have the following:
- An academy mobile phone
 - A portable first aid kit including, at minimum:
 - A leaflet giving general advice on first aid
 - 6 individually wrapped sterile adhesive dressings
 - 1 large sterile unmedicated dressing

- 2 triangular bandages – individually wrapped and preferably sterile
 - 2 safety pins
 - Individually wrapped moist cleansing wipes
 - 2 pairs of disposable gloves
 - Information about the specific medical needs of pupils
 - Parents' contact details
- 4.3.2 When transporting pupils using a minibus or other large vehicle, the school will make sure the vehicle is equipped with a clearly marked first aid box containing, at minimum:
- 10 antiseptic wipes, foil packed
 - 1 conforming disposable bandage (not less than 7.5cm wide)
 - 2 triangular bandages
 - 1 packet of 24 assorted adhesive dressings
 - 3 large sterile unmedicated ambulance dressings (not less than 15cm × 20 cm)
 - 2 sterile eye pads, with attachments
 - 12 assorted safety pins
 - 1 pair of rustproof blunt-ended scissors
- 4.3.3 Risk assessments will be completed by the Educational Visit Coordinator prior to any educational visit that necessitates taking pupils off academy premises.
- 4.3.4 For academies with Early Years provision, there will always be at least 1 first aider with a current paediatric first aid (PFA) certificate on school trips and visits, as required by the statutory framework for the Early Years Foundation Stage.
- 4.3.5 For academies without Early Years provision, there will always be at least 1 first aider on school trips and visits.

5 First aid equipment

- 5.1 A typical first aid kit in the academy will include the following:
- A leaflet giving general advice on first aid
 - 20 individually wrapped sterile adhesive dressings (assorted sizes)
 - 2 sterile eye pads
 - 2 individually wrapped triangular bandages (preferably sterile)
 - 6 safety pins
 - 6 medium-sized individually wrapped sterile unmedicated wound dressings
 - 2 large sterile individually wrapped unmedicated wound dressings
 - 3 pairs of disposable gloves
- 5.2 A first aid box may contain an **emergency inhaler for asthma sufferers** and may be used by pupils who have been diagnosed as asthmatic by a medical doctor. If a first aid box contains an emergency inhaler it must also contain a list of those pupils who are noted as asthmatic at the academy. Parents/guardians must provide consent for their child to use the emergency inhaler (see

appendix 1), and must be notified in writing the day that the inhaler is used (see appendix 2: Letter to inform parents of emergency salbutamol inhaler use).

- 5.3 The wide variety of establishments in terms of size, distribution of buildings and hazardous areas etc means that precise guidance in the numbers of first aid boxes required is not possible. Principals should take the following into account:
- all staff should be able to reach a first aid box within approximately 3 minutes at all times whilst they are on the premises
 - boxes should be located in or close to hazardous areas e.g. laboratories, gymnasias, workshops and food preparation areas. Where possible, it is recommended that the box be located near to hand washing facilities.
 - only authorised users should use first aid materials except in an emergency
 - containers should be made of a suitable material to protect contents from dirt, damp or dust. The container must be identified by means of a white cross on a green background in accordance with the Safety Signs and Signals Regulations 1996.

6 Adrenaline Auto-Injector devices (AAI)

- 6.1 Academies are allowed to obtain, without a prescription, adrenaline auto-injector (AAI) devices, if they wish, for use in emergencies. This will be for any pupil who holds both medical authorisation and parental consent for an AAI to be administered. The AAI(s) can be used if the pupil's own prescribed AAI(s) are not immediately available (for example, because they are broken, out-of-date, have misfired or been wrongly administered).
- 6.2 If an academy decides to hold spare AAIs then these should be stored as part of an emergency anaphylaxis kit which should include:
- 1 or more AAI(s).
 - Instructions on how to use the device(s).
 - Instructions on storage of the AAI device(s).
 - Manufacturer's information.
 - A checklist of injectors, identified by their batch number and expiry date with monthly checks recorded.
 - A note of the arrangements for replacing the injectors.
 - A list of pupils to whom the AAI can be administered.
 - An administration record.
- 6.3 If an academy has made the decision to keep spare AAIs on the premises then all First Aid trained staff must be familiar with, and follow, the guidance [Adrenaline Auto-injectors in schools](#), and be trained to use an AAI device.

7 Automated External Defibrillators (AED)

- 7.1 An AED is a machine used to give an electric shock to restart a patient's heart when they are in cardiac arrest (heart has stopped beating). If this happens, quick action (in the form of early CPR and defibrillation) can help save lives. AEDs are easy and safe to use and academies may consider purchasing one as part of their first aid equipment. This decision would be based the academy's first aid risk assessment. If an academy installs an AED for general use they should notify the local NHS ambulance service of its location.
- 7.2 Further guidance on buying, installing and maintaining an AED is available [Automated External Defibrillators \(AEDs\) in Schools](#)

8 Administration of medicines to children

- 8.1 Medicines should only be administered at an academy when it would be detrimental to a child's health or school attendance not to do so. When administering medications to pupils/students academies must ensure the following:

Primary/infant academies

- In the trusts' primary academies, only prescription medicines will be administered. Prescriptions must have been issued by a doctor, nurse, dentist or pharmacist. However in *exceptional* circumstances an academy may administer non-prescription medication with written parental consent, when it would be detrimental to a child's health or school attendance not to do so e.g. where a pupil/student has a long term condition that is treated by non-prescription medication.
- Non-prescription medicines will not normally be administered to nursery children in the trust's academies. In *very exceptional* and *one off* circumstances, non-prescription medicines may be administered to nursery children with written parental consent. This will be entirely at the principal's discretion whose decision is final.
- Any non-prescription medicines must be in the original packaging, in date, and age appropriate. The parent must provide written confirmation of the dosages administered during the previous 24 hours, and that the child has used the medicine before with no adverse reactions.

Secondary academies

- In the Trust's secondary academies, non-prescription medicines (for example, paracetamol) can be administered if written permission is received from the student's parent/carer.
- The administering of pain relief is only carried out after checking what the maximum dosage is and when the previous dose was taken. Parents must be informed. NB – academies or staff members must not provide pain relief medication to pupils/students; they may administer pain relief provided by parents/carers only in accordance with the points above.
- Prescription and non-prescription medicines are only administered with written parental consent

All medicines

- Medicine containing aspirin is never administered unless prescribed by the student's GP
- All medicines brought to an academy for administration to pupils/students are: provided in the original container as dispensed by a pharmacist, in date, clearly labelled, with name of pupil/student, instructions for administration, dosage and time of medication. It should be noted that, in the event of an asthma attack, academies will instead follow [emergency advice](#) from Asthma UK and this course of action is reflected in the Individual Health Care Plan for the child.
- Medicines are handed to the first aid room on arrival at the academy, with the exception of inhalers. In a secondary academy, if the student is able to manage their asthma themselves they should keep their inhaler on them, and if not, it should be easily accessible to them. In a primary academy, inhalers should be easily accessible to pupils.
- If staff have medication in the academy, they are responsible for ensuring it is locked in a secure place
- All medicines are kept in the refrigerator or locked in the medical cabinet
- All medication given in the academy will be administered in the first aid room, or the room designated for the purpose, by authorised trained staff only. In secondary, or large primary academies, consideration should be given to ensuring that a key member of staff is responsible for managing the administration of medicine procedure
- Staff members administering medication will record all medication given immediately, and in full, on the relevant academy recording system.
- When no longer required, medicines should be returned to the parent to arrange for safe disposal. Sharps boxes must always be used for the disposal of needles and other sharps

9 Medication errors

9.1 A medication error is when the administration deviates from the instruction of the medical professional and parent. Medication errors typically occur when an academy has more than one pupil with the same name. Some examples of medication errors include administration of:

- A medication to a wrong pupil
- The wrong medication to a pupil
- The wrong dosage of medication to a pupil
- The medication via the wrong route
- The medication at the wrong time

- 9.2 Each medication error must be reported to the Principal, Designated Safeguarding Lead and the parents. The incident must also be reported via the Trust online incident reporting system, Parago. Procedures are in place to minimize the risk of medication errors.

10 Record keeping

10.1 Records should be kept for the following:

- All first aid administered. This can be a book, a form or an online system and should include the following: name of person who had an accident, occupation, date of entry, date and time of accident, place and circumstances, type of injury - treatment given, ambulance/ hospital, parents informed, signed
- all accidents that occur on the premises (entered in the first aid book or the online Incident Reporting System)
- all medicines administered
- allergies that a person may have, eg plasters
- stock control (first aid boxes)
- COSHH assessments carried out for hazardous substances used for first aid (bleach)
- Details of staff who are first aid trained, including the type of qualification and certification dates

10.2 Records must be maintained and kept appropriately according to the Trust Retention Schedule. Such records may be useful for investigations and insurance claim purposes. Records will be audited during the annual Health and Safety Audit conducted by the Trust's Estates and Facilities Management team

10.3 Academies with Early Years Foundation Stage provision should also be aware of additional notification requirements:

- **Notifying parents**

The relevant staff member 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. This notification may be by telephone, in person, or using an online notification system such as Medical Tracker.

- **Reporting to Ofsted and child protection agencies**

The relevant member of staff must notify the Trust Safety & Compliance Manager who 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 Trust Safety & Compliance Manager will also notify the relevant Local Authority's child protection agencies of any serious accident or injury to, or the death of, a pupil while in the academy's care.

11 Training

11.1 All school staff are able to undertake first aid training if they would like to.

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

11.3 The academy will arrange for first aiders to retrain before their first aid certificates expire. In cases where a certificate expires, the academy will arrange for staff to retake the full first aid course before being reinstated as a first aider.

11.4 For academies with Early Years Foundation Stage provision, at all times, at least 1 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. The PFA certificate will be renewed every 3 years.

12 Links with other policies

This first aid policy is linked to the:

- Health and safety policy
- Policy on supporting pupils with medical conditions
- Accident and Incident reporting

13. Policy status and review

Written by:	Head of Governance and Admissions
Owner:	EFM Director
Status:	Approved
Approval date:	V2 = HAT BoD 9/3/17; UoBAT BoD = 22/3/17 V2a – Merger editorial changes 1 September 2017 V3 = R&A December 2017 V4 = Link to guidance for AED added 8/2/18 V5 = RAC 27-06-18 V6 = RAC (Chairs action) 25-08-2020 V6a = Minor procedural amendments only V7 = RAC 07-06-2022
Review Date:	July 2023
Summary of changes	V7 = Reviewed for ongoing compliance with relevant legislation and Trust procedures.

Appendix 1: Consent form: Use of emergency salbutamol inhaler

Name of academy	
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1. I can confirm that my child has been diagnosed with asthma / has been prescribed an inhaler [delete as appropriate].
2. My child has a working, in-date inhaler, clearly labelled with their name, which they will bring with them to school every day.
3. In the event of my child displaying symptoms of asthma, and if their inhaler is not available or is unusable, I consent for my child to receive salbutamol from an emergency inhaler held by the school for such emergencies.

Signed	
Date	
Parent / carer's name	
Child's name	
Class	
Parent / carer's address and contact details	
Telephone	
Email	

Appendix 2: Letter to inform parents/carers of emergency salbutamol inhaler use

Name of academy	
Child's name	
Class	
Date	

Dear.....,

This letter is to formally notify you that.....has had problems with his / her breathing today. This happened when.....(*give details*).....
A member of staff helped them to use their asthma inhaler.

They did not have their own asthma inhaler with them, so a member of staff helped them to use the emergency asthma inhaler containing salbutamol. They were given puffs.

or

Their own asthma inhaler was not working, so a member of staff helped them to use the emergency asthma inhaler containing salbutamol. They were given puffs.
[Delete as appropriate]

Although they soon felt better, we would strongly advise that you have your seen by your own doctor as soon as possible.

Yours sincerely,

Appendix 3: Procedure for Dealing with Dental Emergencies in Academies

Dental emergencies are likely to fall into two categories:

- the child who attends the academy with dental pain or sepsis, or develops either of these during the time s/he is at the academy
- injuries to the teeth and mouth which occur during academy hours.

Where a child attends academy with dental pain or sepsis, headteachers should firstly endeavour to contact parents or guardians to establish whether they have taken, or will be taking, appropriate action. The Community Dental Service will always try to help a child who is a dental emergency, but it should be noted that treatment is not normally possible unless parental consent has been obtained. If headteachers are unable to contact parents, or would like advice on a particular dental condition, then they should contact the relevant District Dental Officer or the NHS Helpline by dialing 111.

In cases of dental accident at the academy such as teeth being fractured or knocked out, headteachers should again endeavour to contact parents to ascertain whether there is a family dentist a child can attend. If it is not possible to contact parents, or if headteachers wish to obtain advice on how best to proceed, they should ring the District Dental Officer or the NHS Helpline by dialing 111.

In any cases where teeth are fractured, every effort should be made to find missing teeth or parts of teeth. On no account should anyone attempt to put back in a child's mouth a tooth or part of a tooth. These should be stored immediately in fresh milk or water and taken quickly to the dentist for professional advice.

Contact details:

NHS Helpline - 111

East Sussex – 01323 440022

Crawley area – 01293 518541

Haywards Heath area – 01444 440695

Appendix 4: Recognition and management of an allergic reaction/anaphylaxis

Signs and symptoms include:

Mild-moderate allergic reaction:

- Swollen lips, face or eyes
- Itchy/tingling mouth
- Hives or itchy skin rash
- Abdominal pain or vomiting
- Sudden change in behaviour

ACTION:




- Stay with the child, call for help if necessary
- Locate adrenaline autoinjector(s)
- Give antihistamine according to the child's allergy treatment plan
- Phone parent/emergency contact



Watch for signs of **ANAPHYLAXIS** (life-threatening allergic reaction):

AIRWAY:	Persistent cough Hoarse voice Difficulty swallowing, swollen tongue
BREATHING:	Difficult or noisy breathing Wheeze or persistent cough
CONSCIOUSNESS:	Persistent dizziness Becoming pale or floppy Suddenly sleepy, collapse, unconscious

IF ANY ONE (or more) of these signs are present:

1. Lie child flat with legs raised:
(if breathing is difficult, allow child to sit)   
2. Use Adrenaline autoinjector* without delay
3. Dial 999 to request ambulance and say ANAPHYLAXIS

***** IF IN DOUBT, GIVE ADRENALINE *****

After giving Adrenaline:

1. Stay with child until ambulance arrives, do NOT stand child up
2. Commence CPR if there are no signs of life
3. Phone parent/emergency contact
4. If no improvement after 5 minutes, give a further dose of adrenaline using another autoinjector device, if available.

Anaphylaxis may occur without initial mild signs: **ALWAYS** use adrenaline autoinjector **FIRST** in someone with known food allergy who has **SUDDEN BREATHING DIFFICULTY** (persistent cough, hoarse voice, wheeze) – even if no skin symptoms are present.