

Policy Title: First Aid and Medical Policy	Effective Date:	November 2023
LT Member Responsible: School Business Manager	Review Date:	November 2026
Governors' Committee Responsible: Culture & Community		

AUTHORITY FOR ISSUE

This document is issued by [Sheldon School](#) as the employer of staff and with the responsibility for safeguarding children and young people in its care and for the safety and health of all visitors.

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1 Introduction

- 1.1 First aid is an intervention to save life and maintain health until a sick or injured person can get to full medical help.
- 1.2 We recognise that first aid is part of the care and support of children and adults with medical conditions because they are a part of the population likely to need urgent help. In practice good support (see section 4 above) along with medicine or medical devices (section 5 above) will reduce the need for first aid by reducing the risk of a serious incident.
- 1.3 First aid arrangements are required for adults and for children. Employees have legislation for their first aid within the First Aid at Work Regulations. Children are provided with first aid as part of the duty of care educational establishment have to keep children safe.
- 1.4 Visitors to establishments including contractors are provided with first aid care because there is an assumed responsibility. It may be based on the Health and Safety at Work etc Act 1974 if an injury or ill-health is caused by a work related hazard. In other cases there is a duty to not allow harm to occur by omission –that is by not helping a sick person.

2 Duty to report deaths, certain injuries and ill-health under statutory requirements

- 2.1 **Reporting of injuries, diseases, dangerous occurrences regulations 2013 (RIDDOR 2013)**
- 2.2 We must report to the Health and Safety Executive (HSE) deaths, certain injuries, certain occupational diseases and certain dangerous occurrences. **Failure to do so can result in enforcement action from the HSE.** This applies to all employees suffering in the circumstances and non-employees such as pupils or visitors.
- 2.3 In a few cases where a contractor has staff working on our sites the contractor is responsible for the RIDDOR reports. They may need to be reminded of this by our people.
- 2.4 Self-employed employed people on our sites will have any incidents reported by us.

Reporting to OFSTED regarding injuries and ill-health to children

- 2.5 We must report cases of death or serious injury or ill-health to children to OFSTED. **Failure to do so can result in enforcement action from OFSTED.**
- 2.6 **Reporting of death, injuries or ill-health suspected of being related to child protection or safeguarding issues.**
- 2.7 Any suspect cases must be reported through our child protection and safeguarding procedures. See the Child Protection and Safeguarding Policies or Adult Safeguarding Policy.

3 Numbers of first aiders required

- 3.1 We will carry out a first aid needs assessment (the equivalent of a risk assessment) to identify the number of trained people needed, their level of training to manage the likely problem we have identified and the resources such as first aid rooms and equipment they will need. **An example is given in the Appendices below.**
- 3.2 We will follow the Health and Safety Executive guidance and the DfE guidance and the advice available from our health and safety advisors and first aid trainers.

HSE visit: <https://www.hse.gov.uk/firstaid/are-you.htm>

DfE visit: <https://www.gov.uk/government/publications/first-aid-in-schools/first-aid-in-schools-early-years-and-further-education>

St John Ambulance visit: <https://www.sja.org.uk/>

Outdoor advisors website (for off-site trips and educational visits) go to:

<https://oeapng.info/downloads/good-practice/> Section 4.4b refers to first aid and there are other sections on for example medicine and also on allergies.

Teaching first aid as part of the curriculum:

<https://www.gov.uk/government/publications/teacher-training-basic-first-aid>

- 3.3 We will provide first aid cover for our employees, non-employees on site including all pupils, visitors and contractors. We will also provide first aid cover for our off-site trips and events. Special events such as concerts and car boot sales will be assessed and cover provided through our staff or alternatives as we decide most effective.
In some cases we will provide help for incidents other than on our sites. For example road accidents, ill-health or criminal attacks that are close to our premises. We realise that these may involve members of the school community or other people.
- 3.4 The cover for pupils will be appropriate for their age with staff trained in first aid for younger children (called paediatric first aid) where we need this.

Guidance is available from the DfE at: <https://www.gov.uk/government/publications/early-years-foundation-stage-framework--2>

The cover for adults will be as needed for the number of people and any conditions notified to us that may need special help at some time. All adults will be recommended to tell us if they are vulnerable due to any conditions.

- 3.5 The cover for pupils will be adequate to support any with a medical condition that may give rise to an emergency. These potential emergencies will be identified when we gather medical information from parents and carers when children start with us and updated through the year.

General guidance is available from the DfE at:

<https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3>

Appendix A of our First Aid Policy: First aid needs risk assessment

We are aware that this needs risk assessment links to other management practice such as the implementation of our health, safety and wellbeing policy, safeguarding policy, site management and inspections, curriculum safety within schemes of work.

The lead person for this needs risk assessment is: [School Business Manager who will work with First Aiders, staff trained to support medical needs, one to carers etc](#)

What are the hazards?	Who is mainly affected?	When are they more likely to be affected?	Control measures: First aid and medical assistance	Remaining risk level
<p>a. There are two classes of first aid need. One is life-saving which will need action within the time a person may die from e.g. a heart attack, choking or electrocution. This is only a few minutes. Such situations are uncommon, usually unexpected (though often predictable in a general way) but need first aider action at once;</p> <p>The second class is where action is needed to prevent further worsening of a situation pending either expert medical help or where the injury or ill-health is mitigated aids return to nearly normal activities.</p>	<p>All adults and children can be affected by life threatening situations.</p> <p>Similarly anyone can have a less serious or a minor injury or bout of ill-health.</p>	<p>a. If there is pre-existing condition known or unknown to the person;</p> <p>b. When circumstances occur that create a trigger for accident or ill-health,</p> <p>c. If there is human causation which may be malicious or it may be non-malicious.</p>	<p>a. Information on medical conditions is given to us so that we can plan prevention and action if needed as far as it reasonably practicable.</p> <p>b. We will manage the premises and our activities in line with best practice for health, safety and wellbeing, complying with statutory requirements or better; in line with guidance from DfE, OFSTED and other regulators.</p> <p>c. We will try and reduce hazards from human causation as far as this is possible e.g. within our security policy, street safety, vehicles and highway safety etc.</p>	<p>a. Low</p> <p>b. Low</p> <p>c. Low</p>
<p>b. Site hazards list and plan of the site, location of staff who will be first aiders etc, time to reach critical cases.</p>	<p>The people most at risk –that is those who may suffer a life threatening condition and have to wait whilst help arrives.</p>	<p>We need to consider the circumstances including activities, time of day, location, if they are on or off site.</p>	<p>A task and finish group may assist in planning and generating the required data</p>	<p>Low</p>
<p>c. On our establishment property: Typical childhood activity hazards such as falling over, bumping into</p>	<p>Children of all ages.</p>	<p>0815-15:30 hours approx</p>	<p>Staff trained in first aid on duty. All staff and children given basic first aid training as life skills.</p>	<p>Low</p>

another person, football bruises.				
d. Likely if uncommon incidents such as choking on food, allergic reactions.	Children of all ages. Some adults.	0815-1530hours approx	Staff trained first aid on duty. Staff trained in emergency first aid for certain circumstances such as lunch times. Epi-pen® trained Identification of vulnerable children by photo, bracelet etc.	Low
e. Vehicle related collisions in the car park or near the establishment.	Children mainly due to lack of awareness and small size.	Start and finish of the day.	Vehicle and parking management, supervision, enforcement. Plus first aid as above. Vehicle movements restricted to reduce conflict e.g. main entrance gates closed at peak times, signage etc.	Medium
f. Accidents whilst on establishment trips.	Children and adults.	Anytime.	Risk assessment done as part of trip planning.	Low
g. Illness or accident whilst playing sport on or off site.	Mainly children. Some adults.	During the sporting activity.	Risk assessment done as part of the planning for the lesson or activity. PLUS: See health, safety and wellbeing arrangements.	Low
h. Medical need occurrence or crisis.	Mainly children. Some adults	0815-1530hours approx.	Information held by us to plan in advance best practice. Staff trained in administering medicine or related support. First aid as above.	Low
i. Unexpected illness or accident near to the establishment (or to a establishment party on an off-site activity)	A member of the community of any age.	0815-1530hours approx	First aid as above. This may include community facilities such as a defibrillator.	Low
j. Well-being issues including mental health and mental illness.	Staff, pupils	Any time.	Address work-load issues, use HSE Stress guidance, support such as mindfulness training.	Medium

Appendix B of our First Aid Policy: Outline of people resources needed for first aid and related provision

The resources needed arise once the **needs** assessment is done. Below is an outline framework.

This might be for a school with up to 800 pupils and 100 staff and described as mainstream provision.

Resource	Recommended ratio (Actual number to staff the school day on site, trips and we can improve this if we wish) of at least:	cover staff holidays and any staff sickness absence.
Appointed persons	At least one if there is no first aid cover	We will provide first aid cover and the role of the non first aid trained appointed person is in our view not needed.
First Aiders on the staff qualified to give help to adults as “First Aid at Work” as required by the First Aid at Work Regulations.	1:50 staff Note: the regulations only consider employees.	4 required (circa 8 trained in First Aid at Work) (
First Aiders with Adult and Paediatric training on the staff to give help to adults and young children.	1:50 staff and pupils.	No younger years (1-5) so Paediatric training not required Refer to the Early Years requirements to ensure compliance with staff: child ratios.
Adult staff trained in emergency first aid.	No ratio.	Aspiration: All staff eventually through a rolling programme over 3 years. Training available on National College
Parent/carers or other relatives, volunteer helpers, Church staff etc with basic life-saving skills.	No ratio	Aspiration: All eventually through a rolling programme over three years.
Staff trained to give medicine and help with medical support.	1:50	The number will depend greatly on the number of pupils or other people requiring support.
Parent/carers or other relatives, volunteer helpers, Church staff etc.	No ratio	Not specified at this time.
Pupils trained in First Aid as a life-skill.	No ratio	Aspiration: All eventually with skills developing over their academic career.
Pupils trained in medical support issues as a life-skill.	No ratio	All eventually with skills developing over their academic career.
Who can carry out the role of a first-aider?		First-aiders may be volunteers however it is increasingly being part of a contract of employment. Payment for the duty is then put in the terms and conditions. First aiders who are volunteers are paid an allowance subject to them remaining available and qualified to be first aiders. We welcome first aiders from all parts of the school community but the needs risk assessment may require a selection of those who are chosen so that there is sufficient coverage (in space and time) over all the establishment and its activities.

<p>What are the physical and psychological demands on a first aider?</p>		<p>First-aiders need to be able to manage their feelings when dealing with injuries and people being ill. We recognise that not everyone person will know until they do training or attend an incident.</p> <p>Some first aid does require physical strength and stamina and the capability to move people and equipment. We will discuss with anyone considering being a first aider the potential issues.</p>
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Appendix C of our First Aid Policy: Outline of the tasks, roles and responsibilities of First Aiders.

1	1	<p>The primary and critical role of the first aider is to administer life-saving first aid in the event of a serious injury or ill-health. The secondary role is to provide help so that less serious injuries or ill-health are managed until medical aid arrives. A third role is to treat minor injuries or ill-health that appear not to require treatment by a medical practitioner.</p>
	2	<p>Life-threatening incidents are uncommon and we recognise that many first aiders will rarely deal with them.</p> <p>First-aiders are expected to do the best they can within the limits of their training.</p>
	3	<p>Records of incidents should be kept in the electronic system we use.</p> <p>Some incidents may require records under our safeguarding protocols.</p>
	4	<p>Incidents should be discussed with the Deputy Head in charge of Curriculum H&S or the School Business Manager and investigated as necessary with RIDDOR or other reports made where required by law. Internally all incidents will be followed up and acted on; with reports to leadership team and governing body as part of managing health, safety and wellbeing and managing safeguarding and child protection.</p> <p>If appropriate then discussion with Lead Safeguarding Officer should be initiated.</p>
	5	<p>Hygiene procedures such as clearing and sanitising areas where body fluids have spilt should be carried out in liaison with the Premises Manager</p>
	6	<p>First aid rooms, boxes, pouches and off-site kits should be kept stocked with purchases arranged with the Lead First Aiders</p>
	7	<p>First-aiders should report any illness or injury they themselves are suffering if this means they cannot perform their duties.</p>
	8	<p>First aiders in liaison with the School Business Manager should ensure their vaccinations status is maintained to the NHS recommended level.</p>
	9	<p>In a case where the first-aiders is affected personally and psychologically by any incidents they can seek support through the organisation's wellbeing system.</p>
	10	<p>First Aiders must ensure their qualifications and those of the team are kept up to date by liaising with the lead person School Business Manager to plan refresher courses and updates as needed.</p>

Appendix D of our First Aid Policy: equipment and other physical resources for first aid (and this may be shared with administering medicines and the support of pupils and adults with medical needs.

Resource	Number and location
First aid and medical room (FA&M room)	One room, properly equipped will be available on the main establishment site. The Lead First Aiders will manage stocking and maintenance in conjunction with the team.
First aid equipment boxes, bags etc. Contents based on commercially available items using BS 8599 supplemented if necessary	First aid boxes will be provided in the first aid room, all faculty areas and the school mini buses to give ready access quickly. Kits are also available for collection from the First Aid room for trips and visits.
Trips and sporting events first aid	Additional equipment in bags to go with trips.
Trips and sporting events medical support e.g. for asthma, heart conditions etc.	Personal medical equipment taken by the individual if necessary for critical incidents. Other items can be put in a suitable pack with staff member. Depending on the requirements additional bags or boxes including cool boxes if needed will be provided for trips.
Medicines cabinet	A secure medicines cabinet and fridge will be available in the FA&M room or nearby. Records forms and identification of people needing medical support along with contact details for further advice.
Personal medicines and equipment: non-critical	A secure cabinet will be available for items that may be needed but do not have to be carried on the person.
Personal medicines and equipment: critical	These will be carried by the individual. Care Plan will be drafted and used.
Adrenaline injectors	Located at suitable places to cover site depending on who needs them.
Defibrillator	Located in Reception and the Sixth Form area.
Bleed kits	Not currently held in school

Appendix E of our First Aid Policy: contents of a first aid box

There is no mandatory list of what must be in a first aid box within establishments. Commercially available packs tend to follow the basic list suggested by the Health and Safety Executive as described below.

The first aid needs risk assessment is the starting point for provision and identifying where extra or special equipment or support may be needed. First aid bags, pouches or haversacks may be used where the best item for a given situation.

First aiders should be supported by good communications and so may be radio /walkie-talkie users or via other systems.

1	1	<ul style="list-style-type: none"> • Basic provision • 20 individually wrapped sterile adhesive dressings (assorted sizes) • two sterile eye pads • four individually wrapped triangular bandages (preferably sterile) • six safety pins • six medium sized (approximately 12cm x 12cm) individually wrapped sterile unmedicated wound dressings • two large (approximately 18cm x 18cm) sterile individually wrapped unmedicated wound dressings, and • one pair of disposable gloves.
1	2	<p>Before undertaking any off-site activities, the headteacher should assess what level of first-aid provision is needed.</p> <p>Refer to: https://oeapng.info/downloads/good-practice/ The HSE recommend that, where there is no special risk identified, a minimum stock of first-aid items for travelling first-aid containers is:</p>

		<ul style="list-style-type: none"> • six individually wrapped sterile adhesive dressings • one large sterile unmedicated wound dressing approximately 18cm x 18cm • two triangular bandages • two safety pins • individually wrapped moist cleansing wipes and • one pair of disposable gloves.
1	3	<p>Transport Regulations require that all minibuses and public service vehicles used either as an express carriage or contract carriage have onboard a first aid container with the following items:</p> <ul style="list-style-type: none"> • ten antiseptic wipes, foil packaged • one conforming disposable bandage (not less than 7.5 cms wide) • two triangular bandages • one packet of 24 assorted adhesive dressings • three large sterile unmedicated ambulance dressings (not less than 15 cm x 20 cm) • two sterile eye pads, with attachments • twelve assorted safety pins and • one pair of rustless blunt-ended scissors. <p>This first-aid container shall be:</p> <ul style="list-style-type: none"> • maintained in a good condition • suitable for the purpose of keeping the items referred to above in good condition <ul style="list-style-type: none"> • readily available for use and prominently marked as a first-aid container.
1	4	We will consider extra equipment for infection control such as eye protection and aprons, masks and gloves depending on the needs risk assessment.

Appendix F of our First Aid Policy: Training providers

Due to the generally safe environment in our establishment first aiders will only rarely deal with serious incidents and loss of skills is a significant issue. We encourage ongoing study if this is possible within a person's continuing professional development.

1	1	First aiders (of all types) should be trained and in possession of a current certificate. We prefer that they have an annual update and refreshers and renew certificates as required.
1	2	Due to the generally safe environment in our establishment first aiders will only rarely deal with serious incidents and loss of skills is a significant issue. We encourage ongoing study if this is possible within a person's continuing professional development.
2	1	<p>The Health and Safety Executive publishes guidance on how to choose a first aid training provider. Visit: https://www.hse.gov.uk/pubns/geis3.pdf</p> <p>We will use external providers that we have decided meet the criteria in the above advice.</p>

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