



THE CONSORTIUM
ACADEMY TRUST

Shaping Positive Futures

First Aid Policy

The Consortium Academy Trust (TCAT)
An Exempt Charity Limited by Guarantee
Company Number 07665828

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**NB – This document can only be considered valid when viewed on The Consortium Academy Trust website. If the copy is printed or downloaded and saved elsewhere the Policy date should be cross referenced to ensure the current document is the latest version. The linked policies can be found at www.consortiumtrust.co.uk*

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1.0 Statement of intent

The Consortium Academy Trust (TCAT) is committed to providing emergency first aid provision in order to deal with accidents, incidents and mental health issues affecting children and adults in its schools. Individual schools will undertake a suitable and sufficient assessment of first aid needs by completing the Trust's Provision and Use of First Aid Risk Assessment to ensure compliance with this policy.

The Trust will take every reasonable precaution to ensure the safety and wellbeing of all staff, learners and visitors in accordance with the following Trust policies and guidance:

- Health and Safety Policy
- School Behaviour Policies
- Child Protection and Safeguarding Policy
- Supporting Learners with Medical Conditions Policy
- Educational Visits and Offsite Activities Policy
- Site- specific Lone Working Risk Assessment
- Records Management Policy

School Health and Safety Leads have overall responsibility for ensuring that their school has adequate and appropriate first aid equipment and facilities. The Lead will liaise with the school Operations Manager to ensure that school First Aiders attend approved training and refresher training as necessary to maintain adequate qualified First Aid cover and that the correct first aid procedures are followed.

School Health and Safety Leads will liaise with heads of higher-risk curriculum departments, i.e. Science; Technology; Physical Education to ensure any subject-specific risks are accounted for and appropriate control measures are in place.

This policy will be reviewed on a regular basis, more often if required but not less than annually, and any changes communicated to all members of staff and Trade Unions.

2.0 Legal framework

This policy has due regard to legislation and statutory guidance, including, but not limited to, the following:

- Health and Safety at Work etc. Act 1974
- The Health and Safety (First Aid) Regulations 1981
- The Management of Health and Safety at Work Regulations 1999
- DfE (2015) 'Supporting pupils at school with medical conditions'
- DfE (2000) 'Guidance on First Aid for Schools'
- DfE (2019) 'Automated external defibrillators (AEDs) a guide for schools
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013
- DfE (2021) Statutory Framework for the Early Years Foundation Stage
- DfE (2022) First Aid in Schools, Early Years and Further Education

3.0 Aims

All staff will be made aware of this policy and know who to contact in the event of any illness, accident or injury, and to ensure that the guidance in this policy is followed.

Staff will always use their best endeavours to secure the welfare of our learners and colleagues.

Anyone on the Trust's premises is expected to take reasonable care for their own and other's safety.

The aims of this policy are to:

- ensure that each school has adequate, safe and effective first aid provision for every learner, member of staff and visitor to be well looked after in the event of any illness, accident or injury, no matter how minor or major
- ensure that staff and learners are aware of the procedures in the event of any illness, accident or injury
- ensure that medicines are only administered at the school when express permission has been granted for this. The Trust recognises that there may be times when asthma inhalers or Adrenaline Auto-Injectors need to be used in an emergency without permission

Nothing in this policy will affect the ability of any person to contact the emergency services in the event of a medical emergency. For the avoidance of doubt, staff should dial 999 in the event of a medical emergency before implementing the terms of this policy and make clear arrangements for liaison between the emergency services and the designated person on the school site.

To achieve the aims of this policy each school, including their owned and operated vehicles, will have suitably stocked first aid kits in line with a site-specific assessment of needs. Refer to Appendix 2 for first aid kit minimum requirements.

Where there is no special risk identified, minimum provision of first aid items will follow guidance in Appendix 2 first aid kit requirements.

Each school will nominate and name a person or persons in the site specific first aid needs risk assessment responsible for examining the contents of first aid boxes, including any mobile first aid boxes for offsite use. These will be regularly checked and restocked as soon as possible after use, and these checks will be recorded.

4.0 Roles and Responsibilities

First aid, including adult mental health first aid, is the first and immediate medical care given to any person with either a minor or serious illness or injury. It includes initial intervention in a serious condition prior to professional medical help being available, such as performing CPR while waiting for an ambulance, as well as the complete treatment of minor conditions, such as applying a plaster to a cut.

The **policy owner** is responsible for:

The overarching development and implementation of this policy and how it links into corresponding procedures.

Ensuring that insurance arrangements provide full cover for any potential claims arising from actions of staff acting within the scope of their employment.

The school's Facilities Manager is the **Health and Safety Lead** for the school and is responsible for:

Ensuring the relevant risk assessments, including the Provision and Use of First Aid Risk Assessment specifically, have been conducted and are reviewed at least annually and that these risk assessments are available to all staff.

Ensuring that adequate first aid equipment and facilities are provided and maintained for the school site.

The **Headteacher** is responsible for:

The implementation of this policy and its related procedures in the school.

Identifying and recruiting suitable colleagues to train as First Aiders, ensuring that there are sufficient numbers of appropriately trained First Aiders, including Mental Health First Aiders, within the school to align with the Provision and Use of First Aid Risk-Assessment for the school.

Ensuring that there are procedures and arrangements in place for first aid during off-site or out-of-school-hours activities, e.g. educational visits or parents' evenings.

Ensuring that all staff are aware of the locations of first aid equipment and how it can be accessed, particularly in the case of an emergency.

Ensuring that all pupils and staff are aware of how to contact school First Aiders if necessary.

Ensuring that in the event of a first aider not being available in school, a suitable 'appointed person' is selected from amongst staff to take the lead in first aid arrangements and procedures for the duration

Staff are responsible for:

Ensuring that they have sufficient awareness of this policy and the outlined procedures, including making sure that they know who to contact in the event of any illness, accident or injury.

Securing the welfare of themselves and learners at school.

Making learners aware of the local procedures to follow in the event of illness, allergy, accident or injury.

5.0 Accommodation

The Trust acknowledge that in some cases schools may not have enough accommodation to designate a permanent first aid room. In the infrequent event of a casualty requiring privacy or a calm and safe environment, they will be attended to in the nearest suitable room. General use washrooms are not considered suitable and must only be used in the most exceptional cases, for example where a delay in treatment would negatively impact the casualty's condition. The casualty

should be moved to a more hygienic environment as soon as possible. The attending First Aider must arrange for the room to be hygiene cleaned after use. Where provided, the school's first aid room will be suitable and available for use as and when it is needed, and any additional medical accommodation will be available in accordance with the school's first aid needs assessment.

The first aid room will be used to enable the medical examination and treatment and for the short-term care of the sick or injured. The first aid room should be situated near a hand-wash basin and a toilet, if there isn't any provision in the room.

The first aid room will:

- Be large enough to hold an examination or medical couch.
- Have washable surfaces and adequate heating, ventilation and lighting.
- Be kept clean, tidy, accessible and available for use at all times.
- Ideally be positioned as near as possible to a point of access for transport to hospital.

6.0 First Aiders

First aid, including mental health first aid, should only be performed by someone who has undergone the relevant training. No member of staff without First Aider status is obligated to carry out first aid in any form. In the event that a First Aider is not present, non-trained staff should only treat an injury or issue if they feel capable to do so, for example applying a plaster to a cut; and should always call for a trained first aider or, where necessary, the emergency services when an incident occurs.

An up-to-date list of First Aiders, including Adult Mental Health First Aiders, their locations or contact details and locations of first aid kits and Automatic External Defibrillators is available on the employee portal, which will be signposted to at induction. These details will also be displayed on the school's health and safety noticeboard.

First Aiders will receive a site-specific induction, to familiarise them with the local procedures, locations of first aid kits and equipment, how to use the telephone system to call for emergency assistance, how to reorder supplies and to meet other school First Aiders.

The main duties of First Aiders will be to take charge of the casualty and administer immediate first aid; and to ensure that an ambulance or other professional medical help is called when necessary.

The schools Operations Manager will ensure all school First Aiders first aid qualifications and certificates of competence are kept up to date and refresher training and retesting is arranged before current certification expires.

Colleagues who fulfil the primary or duty first aider function, e.g. those who provide first aid on a regular basis must be trained to 3-day First Aid at Work syllabus and the requalifying 2-day course if taken before the expiry date of the original course and assessment. The number of colleagues qualified to 3-day First Aid at Work will be determined by the site-specific needs risk assessment which takes into consideration, holiday and sickness cover, higher risk curriculum departments, e.g. science and technology and large-scale events e.g. sports day.

Where the site-specific needs risk assessment identifies it, colleagues who provide supplementary cover e.g. lunchtime supervisors the 1 Day Emergency First Aid at Work Course provides an appropriate level of training and knowledge.

In Early Years Foundation Stage (EYFS) settings, there will be a minimum of two paediatric trained First Aiders on site during the school day. This will be the case other than in highly exceptional circumstances like partial closure for example.

First Aiders will be responsible for ensuring all first aid kits in their allocated area of responsibility are properly stocked after each use. The school's named responsible person is responsible for regular and recorded checks and maintaining supplies.

For children, medicines will be managed in line with the Supporting Learners with Medical Conditions Policy, for adults this will be as detailed in their individual care plan or any reasonable adjustments as applicable.

Wraparound services, such as out-of-school clubs, will have access to at least one person who holds a current first aid or paediatric first aid certificate on the premises and available at all times when children are present.

7.0 Adult Mental Health First Aiders (AMHFA)

The Trust is committed to providing competent and supportive staff in each of its schools who are trained to identify and understand mental ill-health symptoms and can support and reassure someone who is experiencing a mental health issue.

As part of their role, these staff will:

- know how to access and signpost to professional help as and when required and
- be able to act promptly, safely and effectively until that help is available.

An up-to-date list of AMHFA and their locations or contact details, is available on the employee portal, which will be signposted to at induction. These details will also be displayed on the school's health and safety noticeboard.

Schools are responsible for identifying and nominating suitable colleagues to train as AMHFA with the Central People Services Team responsible for procuring suitable and sufficient training, facilitating initial and refresher training sessions and maintaining the central training record.

8.0 Appointed Person

Where the First Aider is temporarily absent or under exceptional circumstances it is adequate and appropriate to appoint a person to take charge of the situation relating to an injured or ill person (i.e. seek medical advice, a first aider or summon an ambulance). This person or these people should be named in the site specific first aid needs risk assessment.

9.0 Automated External Defibrillators (AEDs)

Although AEDs are designed to be used by untrained personnel, to comply with the general principles of The Provision and Use of Work Equipment Regulations 1998, and as an aid to increasing staff confidence and competence in using this equipment, first aid qualified staff will be trained in their use.

Where the school has AEDs, their locations are to be communicated to all staff.

AEDs will be inspected by the facilities team in line with manufacturer's instructions, and these inspections will be recorded. Consumable elements such as the batteries and pads must be replaced when expired or after each use according to manufacturer's guidelines.

10.0 Emergency Procedures

Each school will deal with accidents, illnesses and allergies according to their own following agreed procedures, which will follow these agreed basic principles:

For children and adults

- If called, a First Aider will assess the situation and take charge of first aid administration.
- In the case of an accident, illness or injury, the member of staff taking charge will assess the situation and decide on the appropriate course of action, which may involve calling for an ambulance immediately or calling for a First Aider.
- If the First Aider does not consider that they can adequately deal with the presenting condition by the administration of first aid, then they will arrange for the casualty to access appropriate medical treatment without delay.

Where an initial assessment by the First Aider indicates a moderate to serious injury has been sustained, one or more of the following actions will be taken:

- Ensure that no further injury can result from the accident, either by making the scene of the accident safe, or (if they are fit to be moved) by removing injured persons from the scene.
- Administer emergency help and first aid to all casualties. The purpose of this is to keep the casualty alive and as comfortable as possible before professional medical help arrives. In some situations, immediate action can prevent the accident from becoming increasingly serious, or from involving more casualties.
- Call, or direct a responsible person to call for an ambulance or a doctor, or if appropriate, arrange for the casualty to be taken to a doctor or to a hospital. Moving the casualty to medical help is only advisable if the person doing the moving has sufficient knowledge and skill to move the casualty(s) without making the injury worse.
- Arrange for any learners who may have witnessed the accident or its aftermath and who may be worried, or traumatised, despite not being directly involved to be attended to. They will need to be escorted from the scene of the accident and comforted. Younger or more vulnerable learners may need parental support to be called immediately.

Once the above action has been taken, the incident will be reported promptly to:

- the casualty's home or In Case of Emergency (ICE) contact
- the Headteacher

In all instances of accidents, incidents and near-misses, staff will report and record the incident outlined in the Accident and Incident Recording and Reporting Policy.

11.0 Reporting to home contacts for children

When a learner becomes ill during the school day, their home contact will be contacted and asked

to pick their child up as soon as possible.

In the event of incident or injury to a learner, at least one of the learner's home contacts will be informed as soon as practicable. In a Primary setting, the school will provide information to be taken home at the end of the day. In a Secondary setting, the school may provide information to be taken home at the end of the day, depending on the nature of the injury

In all settings the home contact will be informed of any injury to the head, whether minor or major, and be advised to seek medical advice if symptoms develop.

In the event of a serious injury or an incident requiring emergency medical treatment, a member of staff will contact the learner's home contact as soon as possible.

A list of emergency contacts will be available on the school's management information system.

Reporting to home contacts for adults

When an adult has an accident, is injured or becomes ill during the school day, and can do so, they will make their own way home or to seek medical advice or care. In the event they are unable to do so, their home contact may be contacted and asked to arrange collection of the casualty as soon as possible.

12.0 Educational visits and offsite activities

Before undertaking any offsite visits or activities, the teacher organising the trip or event will assess the level of first aid provision required by undertaking a suitable and sufficient risk assessment of the visit or event and the persons involved. The current mechanism for this is using Evolve online system for the planning, approval and management of educational visits, sports fixtures and extra-curricular activities. All educational visits will have an appropriate number of first aiders deployed, based on the number of attendees and the guidance from Evolve.

For more information about the school's educational visits requirements, please see the Educational Visits and Offsite Activities Policy.

13.0 Illnesses

When a learner becomes ill during the school day, the home contact will be contacted and asked to pick their child up as soon as possible.

Wherever possible a quiet area should be set aside for withdrawal and for learners to rest while they wait for their parents/carers to pick them up. Learners will be monitored during this time.

When an adult becomes ill during the school day, and can do so, they will make their own way home or to seek medical advice or care. In the event they are unable to do so, their home contact may be contacted and asked to arrange collection of the casualty as soon as possible.

14.0 Consent

Schools are not required to gain consent from parents to administer any type of first aid to learners. However, schools should ensure that home contacts will be asked to complete and sign a medical consent form when their child is admitted to the school, which includes emergency numbers, details of allergies, medical and chronic conditions, and consent for the administration of emergency First aid.

These forms will be updated annually or when informed of at any change in circumstance. Parent/carer's will be reminded via school communications that it is their responsibility to ensure that they keep the school updated with any change in contact information or emergency contact

Staff do not act 'in loco parentis' in making medical decisions as this has no basis in law, however staff will always aim to act and respond to accidents and illnesses based on what is reasonable under the circumstances and will always act in good faith while having the best interests of our learners and colleagues in mind. DfE guidance states that, in general, the consequences of taking no action are likely to be more serious than those of trying to assist in an emergency.

Appendix 1: First Aid Procedures and infectious diseases

Statement of intent

The Trust aims to act in accordance with the First Aid Policy set out above as much as possible; however, we understand that we must remain compliant with the relevant first aid legislation while schools follow infection control guidelines.

The information in this appendix is under constant review and kept updated to reflect any changes to national or local guidance.

1. Informing staff, learners and visitors of new procedures

- The school's Health and Safety Lead carries out a risk assessment that is used to help inform any changes to first aid provision, including the number of First Aiders needed on site.
- The school's Operations Manager ensures that any changes to first aid procedures are communicated effectively to all staff and learners.
- Staff are reminded of their legal responsibilities regarding accident reporting, first aid and any changes to local procedures.
- First Aiders should be provided training time to read and review the First Aid Policy and procedures

The school acknowledges that where conflicts between the relevant legislation and government guidance on managing infectious diseases arise, the legislation outlined in the First Aid Policy must be followed.

2. Infection control measures

When administering first aid, the relevant staff are advised to:

- Wash their hands before and after administering first aid, using soap and water or hand sanitiser.
- Wear protective gloves and, when appropriate to do so, a face covering
- Dispose of any waste in a suitable bin.
- Ensure frequently touched surfaces and equipment have been cleaned and disinfected before and after use.
- Where possible interact side-by-side where administering first aid requires close interaction.
- Minimise the duration of face-to-face contact where side-by-side interaction is not possible.
- Limit the number of people administering first aid in each incident.
- Ensure that all recipients of first aid are kept socially distanced from others, e.g. other recipients.
- Ensure that first aid is administered in a designated location, where possible, to minimise the spread of infection and any cleaning requirements.
- Where the first aid is required at the learning space, the First Aider will wait outside and administer first aid in the corridor, taking due regard of touch surfaces and cleaning required.

- Where the patient cannot be moved the lead adult will remove the other learners to a contingency room and first aid will be administered in the classroom.
- The Trust acknowledges that the use of additional Personnel Protective Equipment is not required to administer first aid in most circumstances, with the exception of cases of ill health or infection.
- Where an individual must wait on the school premises to go home when showing symptoms of an infectious disease, staff must ensure that:
 - A suitably trained First Aid responder provides any basic care medication required on the express permission of the parent/carer only
 - The individual is isolated in a cool, well-ventilated, designated area.
 - They adhere to the school's social distancing and infection control measures.
 - Areas used by the individual are cleaned and disinfected once they leave, e.g. toilets.
- If a member of staff has helped care for a symptomatic individual and develops symptoms themselves, they are sent home immediately

3. Emergencies

A member of staff calls 999 immediately if a symptomatic individual becomes severely unwell or their life is at risk.

Home contacts who must collect their unwell child from the school must be informed that they must call 999 if their child becomes severely unwell or believe their life is at risk.

4. Monitoring and review

- 5.1. This appendix is reviewed by the policy owner in reaction to any new government advice.
- 5.2. The date of the next review of this appendix will be in line with the review date of this policy unless new information that informs this policy and guidance becomes available or an incident occurs that necessitates a review.

Appendix 2: Recommended First Aid kit contents

Static kits

There is no mandatory list of items to be included in a First Aid container. HSE recommends that where there is no special risk identified, a minimum provision of first aid items could be:

- a leaflet giving general advice on first aid – HSE information is available
- 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

This is only a guide as each first aid kit will be based on the individual schools first aid needs assessment (Provision and Use of First Aid Risk Assessment). This may include provision for eye wash and minor burns, a bleed kit and cooling packs for treating sprains and strains.

Travelling first aid kits

HSE recommends that the minimum travelling first aid kit should be:

- a leaflet giving general advice on First Aid – HSE information is available
- 6 individually wrapped sterile plasters
- 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

Minibus kits

The Road Vehicles (Construction and Use) Regulations 1986 (for minibuses) and/or the Public Service Vehicles (Conditions of Fitness, Equipment, Use and Certification) Regulations 1981 (for larger vehicles) advise that a suitable, clearly marked First Aid box should be readily available and in good condition, with the following minimum contents:

- 10 antiseptic wipes, foil packed
- 1 conforming disposable bandage (not less than 7.5 cm wide)
- 2 triangular bandages
- 1 packet of 24 assorted adhesive dressings
- 3 large sterile unmedicated ambulance dressings (not less than 15.0 cm × 20.0 cm)
- 2 sterile eye pads, with attachments
- 12 assorted safety pins
- 1 pair of rustless blunt-ended scissors
- 2 pairs of disposable gloves

In all cases it would be good practice to include a resuscitation face-shield or mask.