# Medical Policy
# & First Aid in Schools

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| **Policy Originator** | Ferry Lane Primary School |
| **Status** | Statutory |
| **Governor Responsible** | Catherine Nicholls |
| **Ratified on** | 01.12.25 |
| **Review period** | Annual |

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| **Policy Origin** | Ferry Lane Primary School |
| **Changes since last version** | First Aiders Qualifications, page 11 |



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We believe this policy should be a working document that is fit for purpose, represents the school ethos, enables consistency and quality across the school and is related to the following legislation:

- Health and Safety (First Aid) Regulations 1981
- Occupiers' Liability Acts 1957 and 1984
- Health and Safety at Work, etc Act 1974
- Workplace (Health Safety and Welfare) Regulations 1992
- Education (School Premises) Regulations 1999
- Management of Health and Safety at Work Regulations 1999
- Education Act 2002
- Health and Safety (Miscellaneous Amendments) Regulations 2002
- Equality Act 2010
- School Premises (England) Regulations 2012
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013

The following documentation is also related to this policy:

- Equality Act 2010: Advice for Schools (DfE)
- Race Disparity Audit - Summary Findings from the Ethnicity Facts and Figures Website (Cabinet Office)

We have a duty of care under The Health and Safety (First Aid) Regulations 1981 to promote the health, safety and welfare of all pupils, school personnel and school visitors by providing adequate first aid equipment, facilities and school personnel qualified in first aid.

Annually we carry out an assessment of medical and first-aid needs which involves consideration of workplace hazards and risks, the size of the school and the number of people on site in order to determine what first-aid equipment we should provide.

We will ensure that under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR) that all accidents resulting in death, major injury or the prevention of the injured person undertaking their normal work for more than three days will be reported to the Health and Safety Executive (HSE).

We will ensure that first aid provision is up to date and available at all times in school and for all off-site educational visits and sporting events. Pupils and school personnel with specific health needs and disabilities will be given specific consideration.

We ensure adequate school personnel:

- are trained in first aid (see Appendix A);
- will attend periodic first aid refresher training;
- are trained in how to administer medication in the case of a severe allergic reaction;
- are familiar with the Individual Health Care Plans of pupils in their care;



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- know what to do in an emergency;
- are aware that allergy management strategies are incorporated into risk assessments for all school events, educational visits and sporting events.

We work hard to have in place and to maintain a system that ensures all medical care plans are kept up to date and are available at all times to school personnel who may need them in an emergency. It is vital that all medical care plans clearly indicate whether a pupil needs emergency medication such as asthma inhalers or epipens.

Those members of the school personnel who have volunteered to administer or supervise the taking of medication attend regular refresher training and are up to date with the medical care plans for those pupils with specific medical needs or emergency medication.

We are aware that following a change in the law, we are allowed to purchase spare adrenaline auto-injectors such as EpiPen, Jext or Emerade for use on children with serious allergies in emergencies.

We acknowledge that these spare devices can only be used on pupils at risk of anaphylaxis (a life-threatening allergic reaction) where consent from doctors and parents has already been obtained.

We believe that parents will now feel more confident about their children's safety during school time knowing that we have in place spare adrenaline auto-injectors.

We wish to work closely with the School Council and to hear their views and opinions as we acknowledge and support Article 12 of the United Nations Convention on the Rights of the Child that children should be encouraged to form and to express their views.

We as a school community have a commitment to promote equality. Therefore, an equality impact assessment has been undertaken and we believe this policy is in line with the Equality Act 2010.

We all have a responsibility to ensure equality permeates in to all aspects of school life and that everyone is treated equally irrespective of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation. We want everyone connected with this school to feel safe, secure, valued and of equal worth.

We acknowledge the findings of the Race Disparity Audit that clearly shows how people of different ethnicities are treated across the public services of health, education, employment and the criminal justice system.

The educational section of the audit that covers: differences by region; attainment and economic disadvantage; exclusions and abuse; and destinations, has a significant importance for the strategic planning of this school.



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We believe it is essential that this policy clearly identifies and outlines the roles and responsibilities of all those involved in the procedures and arrangements that is connected with this policy.

## Aims

- To provide adequate first aid provision and medical care for pupils and school personnel.
- To have in place qualified first aid personnel who are aware of hygiene and infection control procedures.
- To have in place adequate first aid equipment.
- To have in place excellent lines of communication with the emergency services and other external agencies.
- To ensure compliance with all relevant legislation connected to this policy.
- To work with other schools and the local authority to share good practice in order to improve this policy.

## Responsibility for the Policy and Procedure

## Role of the Governing Body

The Governing Body has:

- nominated a member of staff to take charge of first aid arrangements;
- delegated powers and responsibilities to the Headteacher to ensure the school complies with The Health and Safety (First Aid) Regulations 1981 and the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR);
- delegated powers and responsibilities to the Headteacher to ensure all school personnel and visitors to the school are aware of and comply with this policy;
- responsibility for ensuring that the school complies with all equalities legislation;
- nominated a designated Equalities governor to ensure that appropriate action will be taken to deal with all prejudice related incidents or incidents which are a breach of this policy;
- responsibility for ensuring funding is in place to support this policy;
- responsibility for ensuring this policy and all policies are maintained and updated regularly;
- responsibility for ensuring all policies are made available to parents;
- the responsibility of involving the School Council in:

  - ☐ determining this policy with the Governing Body;
  - ☐ discussing improvements to this policy during the school year;
  - ☐ organising surveys to gauge the thoughts of all pupils;
  - ☐ reviewing the effectiveness of this policy with the Governing Body

- nominated a link governor to:

  - ☐ visit the school regularly;
  - ☐ work closely with the Headteacher and the coordinator;



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- ☐ ensure this policy and other linked policies are up to date;
- ☐ ensure that everyone connected with the school is aware of this policy;
- ☐ attend training related to this policy;
- ☐ report to the Governing Body every term;
- ☐ annually report to the Governing Body on the success and development of this policy.

- responsibility for the effective implementation, monitoring and evaluation of this policy.

## Role of the Headteacher

The Headteacher will:

- undertake an assessment of first-aid needs which involves consideration of workplace hazards and risks, the size of the school and the number of people on site in order to determine what first-aid equipment that is required;
- ensure risk assessments are:

  - ☐ in place and cover all aspects of medical and first aid;
  - ☐ accurate and suitable;
  - ☐ reviewed annually;
  - ☐ easily available for all school personnel.

- ensure the school complies with The Health and Safety (First Aid) Regulations 1981 and the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR);
- ensure adequate first aid equipment, facilities and school personnel qualified in first aid are in place;
- ensure that the nominated person is suitably trained, has sufficient time to undertake their role and an adequate budget to purchase first aid equipment;
- purchase and have in place spare adrenaline auto-injectors such as EpiPen, Jext or Emerade for use on children with serious allergies in emergencies;
- work in conjunction with the Senior Leadership Team to ensure all school personnel, pupils and parents are aware of and comply with this policy;
- work closely with the link governor and coordinator;
- provide leadership and vision in respect of equality;
- provide guidance, support and training to all staff;
- monitor the effectiveness of this policy by speaking with pupils, school personnel, parents and governors;
- annually report to the Governing Body on the success and development of this policy.

## Role of the Nominated Person

The nominated person will:

- ensure all school personnel are trained in first aid arrangements and hold a valid certificate of competence that is valid for three years;



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- ensure all school personnel receive refresher training every three years;
- organise and maintain the medical room as suggested by HSE:

    - ☐ a sink with hot and cold running water;
    - ☐ drinking water and disposable cups;
    - ☐ soap and paper towels;
    - ☐ a store for first-aid materials;
    - ☐ foot-operated refuse containers, lined with yellow, disposable clinical waste bags or a container suitable for the safe disposal of clinical waste;
    - ☐ an examination/medical couch with waterproof protection and clean pillows and blankets;
    - ☐ a chair;
    - ☐ a telephone or other communication equipment; and
    - ☐ a record book for recording incidents attended by a first-aider or appointed person.

- ensure that there are adequate stocks of first aid equipment;
- ensure first aid kits are British Standard BS 8599 and contain the following as suggested by HSE:

    - ☐ a leaflet giving general guidance on first aid;
    - ☐ individually wrapped sterile plasters (assorted sizes), appropriate to the type of work (hypoallergenic plasters can be provided if necessary);
    - ☐ sterile eye pads;
    - ☐ individually wrapped triangular bandages, preferably sterile;
    - ☐ safety pins;
    - ☐ large sterile individually wrapped unmedicated wound dressings;
    - ☐ medium-sized sterile individually wrapped unmedicated wound dressings;
    - ☐ disposable gloves.

- position and maintain first aid containers at appropriate locations around the school;
- conduct with the Health and Safety coordinator annual risk assessments;
- ensure all accidents and injuries are recorded and reported;
- ensure that pupils and school personnel with specific health needs and disabilities are given specific consideration;
- ensure the appropriate medical resources (asthma inhalers, insulin, epipens) are available for those pupils with specific health needs at all times;
- ensure school personnel are aware of the specific health needs and disabilities
- determine the level of provision:

    - ☐ at breaktimes and lunch times
    - ☐ when school personnel are absent
    - ☐ for all educational visits and sporting activities
    - ☐ for curriculum activities

- ensure first aid kits are taken on educational visits or off-site sporting activities;
- ensure there is a designated medical room that is kept well stocked and free from clutter;



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- ensure school personnel follow basic hygiene procedures and have access to disposable gloves and hand washing facilities;
- inform parents of any accident especially head injuries and of any first aid administered;
- ensure first aid notices are displayed in the appropriate places;
- ensure first aid information is provided in the staff handbook;
- provide guidance and support to all school personnel;
- keep up to date with new developments and resources;
- review and monitor;
- annually report to the Governing Body on the success of this policy.

## Role of the Health and Safety Coordinator

The coordinator will:

- carry out regular inspections of premises and school activities;
- assist in carrying risk assessments;
- investigate potential hazards, employee complaints, accidents and dangerous occurrences;
- make representation to employers and others on health and safety matters arising;
- provide information and guidance to school personnel;
- lead the development of this policy throughout the school;
- work closely with the Headteacher and the nominated governor;
- provide guidance and support to all staff;
- provide training for all staff on induction and when the need arises regarding;
- keep up to date with new developments and resources;
- review and monitor;
- annually report to the Governing Body on the success and development of this policy.

## Role of School Personnel

All school personnel must:

- be aware of first aid arrangements;
- be suitably trained in identifying pupils with expected medical problems;
- report any concerns they have on the medical welfare of any pupil;
- undertake training in first aid, administration of medicines and awareness of medical problems in pupils;
- report and record all accidents and first aid treatment administered;
- teach basic first aid to their pupils;
- implement the school's equalities policy and schemes;
- report and deal with all incidents of discrimination;
- attend appropriate training sessions on equality;
- report any concerns they have on any aspect of the school community.

## Role of Parents/Carers



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Parents/carers will:

- be aware of and comply with this policy;
- inform the school of their child's medical history that may be a cause for concern;
- complete the necessary paper work before the school administers any medication to a child;
- be encouraged to work in school as volunteers;
- be asked to take part periodic surveys conducted by the school;
- support the school Code of Conduct and guidance necessary to ensure smooth running of the school.

## Role of Pupils

Pupils:

- be aware of and comply with this policy;
- must report all accidents;
- listen carefully to all instructions given by the teacher;
- ask for further help if they do not understand;
- treat others, their work and equipment with respect;
- support the school Code of Conduct and guidance necessary to ensure the smooth running of the school;

## Recording Accidents and Injuries

All accidents and injuries will be:

- recorded in the Accident Book with all details given;
- reported to parents in person, by letter or phone

All accidents involving the loss of life, major injury or preventing the injured person undertaking their normal work for more than three days must be reported to the Health and Safety Executive (HSE).

## Raising Awareness of this Policy

We will raise awareness of this policy via:

- School Handbook/Prospectus;
- School website;
- Staff Handbook;
- Meetings with parents such as introductory, transition, parent-teacher consultations and periodic curriculum workshops;
- School events;
- Meetings with school personnel;
- Headteacher reports to the Governing Body;
- Email



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## Training

All school personnel:

- have equal chances of training, career development and promotion
- receive training related to this policy on induction which specifically covers:

  - ☐ Health and Safety
  - ☐ Basic first aid
  - ☐ Medical care
  - ☐ Dealing with emergencies
  - ☐ Safeguarding and Child Protection
  - ☐ Administering Medicines
  - ☐ Hygiene
  - ☐ Risk management and risk assessment

- receive periodic training so that they are kept up to date with new information
- receive equal opportunities training on induction

## Equality Impact Assessment

Under the Equality Act 2010 we have a duty not to discriminate against people on the basis of their age, disability, gender, gender identity, pregnancy or maternity, race, religion or belief and sexual orientation.

This policy has been equality impact assessed and we believe that it is in line with the Equality Act 2010 as it is fair, it does not prioritise or disadvantage any pupil and it helps to promote equality at this school.

## Monitoring the Implementation and Effectiveness of the Policy

The practical application of this policy will be reviewed annually or when the need arises by the coordinator, the Headteacher and the nominated governor.

A statement of the policy's effectiveness and the necessary recommendations for improvement will be presented to the Governing Body for further discussion and endorsement.

## Linked Policies

- Health and Safety
- Safeguarding and Child Protection



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## Appendix A School First Aiders



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| Fully Qualified first aiders (at work) | | |
|---|---|---|
| Name | Qualified date | Renewal date |
| All Staff | 01.09.25 | 31.08.2028 |

## COVID19 related updates (HSE Guidance)

### 1.1 First aid in non-healthcare settings

This guidance will help employers ensure first aiders are confident that they can help someone injured or ill at work during the coronavirus (COVID-19) outbreak.

Employers and their first aiders should take account of the specific guidance on giving cardiopulmonary resuscitation (CPR) from the Resuscitation Council UK.

#### 1.1.1 Guidance for first aiders

Try to assist at a safe distance from the casualty as much as you can and minimise the time you share a breathing zone.

If they are capable, tell them to do things for you, but treating the casualty properly should be your first concern. Remember the 3P model – preserve life, prevent worsening, promote recovery.

##### 1.1.1.1 Preserve life: CPR

- Call 999 immediately – tell the call handler if the patient has any COVID-19 symptoms
- Ask for help. If a portable defibrillator is available, ask for it
- Before starting CPR, to minimise transmission risk, use a cloth or towel to cover the patient's mouth and nose, while still permitting breathing to restart following successful resuscitation
- If available, use:
    - a fluid-repellent surgical mask
    - disposable gloves
    - eye protection
    - apron or other suitable covering
- Only deliver CPR by chest compressions and use a defibrillator (if available) – **don't** do rescue breaths (for pediatric advice see appendix D)

##### 1.1.1.2 Prevent worsening, promote recovery: all other injuries or illnesses

- If you suspect a serious illness or injury, call 999 immediately – tell the call handler if the patient has any COVID-19 symptoms



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- If giving first aid to someone, you should use the recommended equipment listed above if it is available
- You should minimize the time you share a breathing zone with the casualty and direct them to do things for you where possible

#### 1.1.1.3 After delivering any first aid

- Ensure you safely discard disposable items and clean reusable ones thoroughly
- Wash your hands thoroughly with soap and water or an alcohol-based hand sanitiser as soon as possible.

**Resuscitation Council UK Statement on COVID-19 in relation to CPR and resuscitation in first aid and community settings**

**This statement is for anyone who is performing CPR/defibrillation in an out-of-hospital setting.**

**Whenever CPR is carried out, particularly on an unknown victim, there is some risk of cross infection, associated particularly with giving rescue breaths. Normally, this risk is very small and is set against the inevitability that a person in cardiac arrest will die if no assistance is given. The first things to do are shout for help and dial 999.**

Watch what to do in an emergency.

- First responders should consult the latest advice on the NHS website ( https://www.gov.uk/government/publications/novel-coronavirus-2019-ncov-interim-guidance-for-first-responders/interim-guidance-for-first-responders-and-others-in-close-contact-with-symptomatic-people-with-potential-2019-ncov).
- Those laypeople and first responders with a duty of care (workplace first-aiders, sports coaches etc.) that may include CPR should be guided by their employer's advice.
- This guidance may change based on increasing experience in the care of patients with COVID-19.
- Healthcare workers should consult the recommendations from the World Health Organization and Department of Health and Social Care for further information, and advice by nation is at the conclusion of this statement.

Resuscitation Council UK Guidelines 2015 state "If you are untrained or unable to do rescue breaths, give chest compression-only CPR (i.e. continuous compressions at a rate of at least 100–120 min-1)".

Because of the heightened awareness of the possibility that the victim may have COVID-19, Resuscitation Council UK offers this advice:

- Recognise cardiac arrest by looking for the absence of signs of life and the absence of normal breathing. Do not listen or feel for breathing by placing your ear and cheek



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close to the patient's mouth. If you are in any doubt about confirming cardiac arrest, the default position is to start chest compressions until help arrives.

- Make sure an ambulance is on its way. If COVID 19 is suspected, tell them when you call 999.
- If there is a perceived risk of infection, rescuers should place a cloth/towel over the victims mouth and nose and attempt compression only CPR and early defibrillation until the ambulance (or advanced care team) arrives. Put hands together in the middle of the chest and push hard and fast.
- Early use of a defibrillator significantly increases the person's chances of survival and does not increase risk of infection.
- If the rescuer has access to any form of personal protective equipment (PPE) this should be worn.

- After performing compression-only CPR, all rescuers should wash their hands thoroughly with soap and water; alcohol-based hand gel is a convenient alternative. They should also seek advice from the NHS 111 coronavirus advice service or medical adviser.

**Pediatric advice**

We are aware that pediatric cardiac arrest is unlikely to be caused by a cardiac problem and is more likely to be a respiratory one, making ventilations crucial to the child's chances of survival. However, for those not trained in pediatric resuscitation, the most important thing is to act quickly to ensure the child gets the treatment they need in the critical situation.

For out-of-hospital cardiac arrest, the importance of calling an ambulance and taking immediate action cannot be stressed highly enough. If a child is not breathing normally and no actions are taken, their heart will stop and full cardiac arrest will occur. Therefore, if there is any doubt about what to do, this statement should be used.

It is likely that the child/infant having an out-of-hospital cardiac arrest will be known to you. We accept that doing rescue breaths will increase the risk of transmitting the COVID-19 virus, either to the rescuer or the child/infant. However, this risk is small compared to the risk of taking no action as this will result in certain cardiac arrest and the death of the child.

**Each of our first aid kits allocated to a fully qualified first aider in school contains a resuscitation mask. Spare masks are also kept in the first aid stock cupboard.**



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