EQUA Mead
Learning Trust
Every Child, Every Chance

Policy name	**First Aid**
Policy Lead	**CFO**
Adopted by Trust Board	**February 2020**
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Contents:

Statement of intent

1. Legal framework
2. Roles and responsibilities
3. First aid provision
4. First aiders and appointed persons
5. Automated external defibrillators (AEDs)
6. First Aid rooms and designated First Aid areas
7. Emergency procedures
8. Informing parents/carers, reporting accidents and record keeping
9. Offsite visits and events
10. Storage of medication
11. Illnesses and allergies
12. Consent
13. Monitoring and review

Statement of intent

EQUA Mead Learning Trust is committed to providing emergency first aid provision in order to deal with accidents and incidents affecting its staff, pupils and visitors. The arrangements within this policy are based on the results of a suitable and sufficient risk assessment carried out by EQUA Mead schools in regard to all staff, pupils and visitors.

The trust will take every reasonable precaution to ensure the safety and wellbeing of all staff, pupils and visitors.

This policy aims to:

- Ensure that all trust schools have adequate, safe and effective first aid provision for every pupil, member of staff and visitor to be well looked after in the event of any illness, accident or injury, no matter how major or minor.
- Ensure that staff and pupils are aware of the procedures in the event of any illness, accident or injury.
- Ensure that medicines are only administered at schools when express permission has been granted for this.
- Ensure that all medicines are appropriately stored.
- Promote effective infection control.

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 with ambulance services on the school site.

1. 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 Road Vehicles (Construction and Use) Regulations 1986
- The Management of Health and Safety at Work Regulations 1999
- The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013
- DfE (2017) 'Supporting pupils at school with medical conditions'
- DfE (2022) 'First aid in schools, early years and further education'
- DfE (2025) 'Statutory framework for the early years foundation stage'
- DfE (2025) 'Automated external defibrillators (AEDs): a guide for maintained schools and academies'

The policy is implemented in conjunction with the following trust or school policies/procedures:

- Health and Safety Policy
- Supporting Pupils with Medical Conditions Policy
- Pupils with Additional Health Needs Attendance Policy
- Allergy and Anaphylaxis Policy
- Sharps
- Record Retention Policy
- Behaviour Policy
- Safeguarding and Child Protection Policy
- Lone Working Policy
- Administering Medication procedure
- Educational Visits and School Trips procedures

2. Roles and responsibilities

The trust board is responsible for:

- The overarching development and implementation of this policy and all corresponding procedures.
- Ensuring that the relevant risk assessments, and assessments of the first aid needs of the schools specifically, have been conducted.
- Ensuring that there is a sufficient number of appointed first aiders within the school based upon these assessments.

The local governing body is responsible for:

Commented [HS1]: Merge this with the above section?

- Ensuring there are procedures and arrangements for first aid during off-site or out-of-hours activities, e.g. educational visits or parents' evenings.
- Ensuring insurance arrangements provide full cover for any potential claims arising from actions of staff acting within the scope of their employment.

- Ensuring appropriate and sufficient first aid training is provided for staff, and ensuring that processes are in place to validate that staff who have undertaken training have sufficient understanding, confidence and expertise in carrying out first aid duties.
- Ensuring adequate equipment and facilities are provided for the school site.
- Ensuring first aid provision for staff does not fall below the required standard and that provision for pupils and others complies with the relevant legislation and guidance.
- Ensuring an 'appointed person' is selected from amongst staff to take the lead in first aid arrangements and procedures for the school.

Headteachers are responsible for:

- The implementation of this policy and its related procedures.
- Ensuring that an appropriate number of appointed persons and/or trained first aid personnel are present in the school at all times, based on the annual First Aid Risk Assessment. There should be a first aider on each school trip or sports activity off site, while ensuring there is adequate cover back in school.
- Ensuring that all staff and parents are made aware of the trust's policy and arrangements regarding first aid.
- 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 the identities of the school first aiders and how to contact them if necessary.
- Reporting any notifiable accidents or incidents to the Health & Safety Executive (HSE).
- Reporting cases to Ofsted and child protection agencies if appropriate.

Commented [HS2]: Check one is completed every year?

Staff are responsible for:

- Ensuring they follow first aid procedures.
- Ensuring they know who the First Aiders in school are.
- Completing accident reports for all incidents they attend to where a First Aider is not called.

Informing the Headteacher or their manager of any specific health conditions or first aid needs.

First aid staff 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.
- 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.
- Making appropriate arrangements with parents through recognised school procedures if the student needs to be sent home.
- 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.

It is emphasised that the qualified First Aiders are NOT trained doctors or nurses.

Schools will have at least one 'appointed person' to oversee first aid provision. The appointed person is not the same as a first aider, and therefore must not conduct any first aid for which they have not been trained. The appointed person should, at least, be trained in emergency procedures as outlined below.

Commented [HS3]: Not the case in all schools at the moment

The appointed person is responsible for:

- Overseeing the school's first-aid arrangements.
- Reviewing and monitoring the first aid book and reporting any concerns/patterns to the Headteacher.
- Reporting more serious cases of accident or incident to the Headteacher.
- Looking after the first-aid equipment, e.g. restocking the first aid container.
- Monitoring the injury and illness records as required.
- Partaking in an appointed persons course, emergency first aid training, first aid at work, and refresher training where appropriate, to ensure they have knowledge of:
  - What to do in an emergency.
  - How to assess and monitor a casualty.
  - First aid for the unconscious casualty.
  - First aid for someone who is having a seizure.
  - Maintaining injury and illness records as required.
  - Paediatric first aid.

Commented [NR4]: Consider if AP is the head

3. First aid provision

Schools will routinely re-evaluate their first aid arrangements through a risk assessment, at least **annually**, to ensure that these arrangements continue to be appropriate for hazards and risks on the school premises, the size of the school, the needs of any vulnerable individuals onsite, and the nature and distribution of pupils and staff throughout the school.

Commented [HS5]: Link needs updating

A review may also be needed after an incident requiring the provision of first aid so that lessons can be learned.

Factors to be considered in assessing the First Aid needs of the school:

- history of incidents – accident stats can indicate the most common types of injuries, times and locations
- the nature, age and number of pupils and staff
- the size of the school and layout
- hazards present eg labs, sports facilities, kitchens and DT rooms
- the remoteness of the site from emergency medical services
- other groups of people on a shared site
- school trips
- annual leave and other absences of first aiders
- the consequences of teaching staff having to leave classes to administer first aid
- the risks involved in a specific activity, e.g. PE, science, D&T, food technology
- out of hours activities i.e. sports activities, clubs, breakfast and after school club

The local authority has produced recommended minimum levels of first aid cover that should be in place:

Type of school	Number of people on site (Staff & Pupils)	Number of first aiders
Nursery/Primary	0 - 100	1 first aid at work qualified and 1 relief to provide cover for absences. Thereafter 1 additional first aid at work qualified for every 100 persons on site. Plus 1 qualified paediatric first aider and 1 relief to provide cover for absences where children under five years of age are present.
Secondary	0 - 100	1 first aid at work qualified and 1 relief to provide cover for absences. Thereafter 1 additional first aid at work qualified for every 100 persons on site. Plus 1 qualified first aider and 1 relief for each high-risk area i.e. Science, D&T, PE, Food Technology.
Special	0 - 100	1 first aid at work qualified and 1 relief to provide cover for absences. Thereafter 1 additional first aider for every 100 persons on site.
NB. Appropriate numbers of additional first aider at work qualified should be established based on each school's specific needs and staffing arrangements to cover absences.		

Signage

Notices and signs giving the name, contact details, location and directions to the nearest first aider must be prominently displayed and kept up to date throughout the school eg reception area, kitchen and staff room.

First aid kits

Schools will have suitably stocked first aid boxes in line with the assessment of needs. There is no legal fixed content list that must be provided. Where there is no special risk identified in the assessment of needs, the school will maintain the following minimum provision of first aid items:

- A leaflet giving general advice on first aid
- 20 individually wrapped sterile adhesive dressings, of 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-sized individually wrapped sterile unmedicated wound dressings
- 3 pairs of disposable gloves

No medication is kept in first aid kits.

First aid kits and resources are stored in locations around school based on a dynamic risk assessment completed by the school. Locations will vary across school sites depending upon need and requirement.

Typically, first aid kits are stored in:

- First Aid room or designated area
- Reception / main entrance areas
- Staffrooms
- Science labs
- Design and technology labs
- P.E. Department
- School kitchens
- School mini-bus

All first aid containers will be identified by a white cross on a green background.

High risk areas

The practical subjects – Art, Design & Technology, Physical Education, Food Technology and Science present special risks and ideally each of these areas should have adequate first aid facilities and first aider cover (plus relief first aider to cover absences). Suitable eye irrigation arrangements should be in place in Art, Design & Technology and Science.

Travelling First Aid Kits

Travelling first aid kits must be available on all coaches, minibuses and vehicles used to transport pupils and staff.

Restock

The appointed person will routinely examine the contents of first aid boxes, including any mobile first aid boxes for offsite use – these will be frequently checked and restocked as soon

as possible after use. Items will be safely discarded after the expiry date has passed, and replaced.

The main office in each school has a list of locations of their first aid provisions and kits.

4. First aiders and appointed persons

The main duties of first aiders will be to administer immediate first aid to pupils, staff or visitors, and to ensure that an ambulance or other professional medical help is called when necessary.

Schools will ensure that all first aiders hold a valid certificate of competence, issued by a HSE-approved organisation, and that refresher training and retesting of competence is arranged for first aiders within the school before certificates expire.

Schools will be mindful that many standard first aid at work training courses do not include resuscitation procedures for children, and will consequently ensure that appropriate training is secured for first-aid personnel where this has not already been obtained.

Each classroom's first aiders will be responsible for ensuring all first aid kits are properly stocked and maintained. The appointed person will be responsible for maintaining supplies.

First aid notices will be clearly displayed throughout the school with information on the names and locations of first aiders to ensure that pupils and staff know who they must contact in the event of illness or injury.

The appointed person will keep a register of all trained first aiders, what training they have received and when this is valid until. First aiders will ensure that their first aid certificates are kept up to date.Schools will ensure that there is always a sufficient number of first-aid personnel available on site at all times to provide adequate cover to all areas of the school.

For Early Years Foundation Stage only: In line with government guidance, and considering staff to child ratios, schools will ensure that there is at least **one** member of staff with a current and full Paediatric First Aid (PFA) certificate on the premises and available at all times when pupils are present, and accompanying pupils on any and all outings taken.

All staff members will be made aware that agreeing to become a first aider for their school is strictly on a voluntary basis and that they should never feel pressured to take on this role.

When selecting first aiders, schools will follow the criteria laid out in government guidance, considering the individual's:

- Reliability and communication skills.
- Aptitude and ability to absorb new knowledge and learn new skills.
- Ability to cope with stressful and physically demanding emergency procedures.
- Availability to respond immediately to an emergency.

Schools will ensure that first aid training courses cover mental health in order to help them recognise the warning signs of mental ill health and to help them develop the skills required to approach and support someone, while keeping themselves safe. Pupils will be supported in the light of social, emotional and mental health issues.

5. Automated external defibrillators (AEDs)

All schools are aware of the location of their nearest AEDs in case of emergency.

Commented [NR6]: Add that all schools have a defib on site + appointed person to check when directed

6. First Aid rooms and designated First Aid areas

Schools' first aid rooms or designated areas will be suitable to use as and when needed, and any additional medical accommodation will be available in accordance with the school's first aid needs assessment.

The first aid room/designated area will be used to enable the first aid examination and treatment of pupils and for the short-term care of sick or injured pupils. Where possible, the first aid room includes a wash basin and is situated near a toilet.

The first aid room will not be used for teaching purposes.

The first aid room or designated area will, where possible:

- 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 when employees are at work.
- Have a sink with hot and cold running water.
- Display a notice on the door which advises the names, locations and, if appropriate, the contact details of first aiders.

7. Emergency procedures

If an incident, illness or injury occurs, the member of staff in 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 called, a first aider will assess the situation and take charge of first aider administration. 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 injured person to access appropriate medical treatment without delay.

For incidents involving allergic reactions or suspected anaphylaxis, staff will follow the detailed procedures outlined in the Trust's Allergy and Anaphylaxis Policy, including the administration of adrenaline auto-injectors and emergency response steps.

Where an initial assessment by the first aider indicates a moderate to serious injury has been sustained, or the individual has become seriously unwell, a responding staff member will call 999 immediately.

Where necessary, a trained staff member will administer emergency help and first aid to all injured persons. The purpose of this is to keep the victim alive and, if possible, comfortable, before professional medical help arrives. In some situations, immediate action can prevent the accident from becoming increasingly serious, or from involving more victims.

Where the seriously injured or unwell individual is a pupil, the following process will be followed:

- A responding staff member calls 999 immediately and follows the instructions of the operator – this may include the administering of emergency first aid.
- Where an ambulance is required, a staff member accompanies the pupil in the ambulance and calls the pupil's parent as soon as possible to inform them of the course of action taken. The staff member remains with the pupil at the hospital until a parent arrives.
- Where an ambulance is not required, but medical attention is needed, the pupil is taken to a hospital or doctor in a staff car, accompanied by at least **two** staff members – one to drive the car, and one who is a first aider, to sit with the pupil in the back seat and attend to their medical needs. The pupil's parent is called as soon as possible to inform them that this course of action has been taken, and at least one of the staff members remains with the pupil at the hospital or doctor's office until a parent arrives.
- The school will ensure that no further injury can result from any incidents that occur, either by making the scene of the incident safe, or, if they are fit to be moved, by removing injured persons from the scene.
- Responding staff members will see to any pupils who may have witnessed the incident or its aftermath and who may be worried or traumatised, despite not being directly involved. These pupils will be escorted from the scene of the incident and comforted. Younger or more vulnerable pupils may need parental support to be called immediately.

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

- The headteacher.
- The parents or carers of the victim(s).

Responding to an incident can be stressful for the first aider. Following the incident, the first aider may require support such as a debrief from any ambulance crew on scene, an appointment with their GP, or mental health support from external helplines and websites located at the bottom of the government page '[Promoting and supporting mental health and wellbeing in schools and colleges]'.

8. Informing parents/carers, reporting accidents and record keeping

Informing parents / carers

In the event of incident or injury to a pupil, a parent will be informed as soon as practicable. In the event of a serious injury or an incident requiring emergency medical treatment, the pupil's class teacher will telephone the pupil's parent as soon as possible.

Bumps on the head

A qualified first aider will know the procedure for dealing with a child who has a bump to the head and in any serious case professional medical attention must be sought and the parents should be notified immediately.

However, sometimes the effects only become noticeable after a period of time - perhaps several hours - and so all bumps to the head will be recorded and the school will have a procedure in place with a system for monitoring the injured child.

Each teacher whose lesson the child attends will be asked to keep a look out for signs of drowsiness or distress.

For head injuries—whether minor or major—parents will be contacted by phone or text as soon as possible and provided with written guidance on signs and symptoms to monitor at home. This ensures parents can act promptly if symptoms develop. We acknowledge that putting a note in a book bag or giving a child a sticker is not always sufficient to get the message home to parents.

A list of emergency contacts will be kept at the school office.

Monitoring patterns and trends

The appointed person is responsible for ensuring that all injuries, accidents, illnesses, and any first aid treatment provided are accurately recorded in the First Aid and Accident Record Book, even if it is a minor incident. These entries must be completed by the first aider on the same day of the incident or at the earliest possible opportunity, with as much detail as practicable. The appointed person will monitor these records to ensure they are of high quality and include:

- The date, time and place of the incident.
- The name and class of the injured or ill person.
- Details of the injury or illness and what first aid was given.
- Details of what happened to the person immediately afterwards, e.g. whether they were sent home, went back to class or went to the hospital.
- The name and signature of the first aider or person dealing with the incident.

Reporting an incident to the Health and Safety Executive (RIDDOR process)

In the event that an incident is required to be reported to the Health and Safety Executive, the Headteacher will do this within 10 days of the incident.

Reportable injuries, diseases and dangerous occurrences (regulations) (RIDDOR) include:

- Death
- Fractures (other than fingers, thumbs and toes)
- Amputations
- Injuries relating to permanent loss sights
- Injuries relating to partial or reduction or sight
- Any crush injury to the head or torso causing damage to the brain or internal organs
- Serious burns (including scalding)
- Any scalping requiring hospital treatment
- Any loss of consciousness caused by head injury or asphyxia
- Hypothermia or head-induced illness whereby admittance to hospital is over 24 hours
- Injuries where an employee is away from work or unable to perform their normal work duties for more than 7 consecutive days (not including the day of the incident)
- An accident leading to somebody being taken to hospital

- Near misses that have not related in injury, but could have done, for example the collapse or failure of lifts, accidental release of biological agents, accidental release of a harmful substance and an electrical short circuit or overload causing a fire or explosion.

The headteacher will ensure that any injury or accident that must be reported to the HSE or LA under RIDDOR obligations is reported in a timely and detailed manner.

Reporting to Ofsted and child protection agencies:

The Headteacher or a D/DSL will contact the relevant party in the event of a serious accident or incident in school.

All records will be filed and stored in line with the Records Management Policy.

9. Offsite visits and events

Before undertaking any offsite visits or events, 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 school will take a first aid kit on all offsite visits which contains at a 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.

Additionally, the school will ensure that all large vehicles and minibuses have a first aid box readily available and in good condition which contains:

- 10 antiseptic wipes, foil packed.
- 1 conforming disposable bandage that is not less than 7.5cm wide.
- 2 triangular bandages.
- 1 packet of 24 assorted adhesive dressings.
- 3 large sterile unmedicated ambulance dressings that are not less than 15x20cm.
- 2 sterile eye pads, with attachments.
- 12 assorted safety pins.
- 1 pair of non-rusted blunt-ended scissors.

For more information about the school's educational visit requirements, please see the Educational Visits and School Trips procedure.

Off-site first aid procedures are as follows:

When taking students off school premises, staff will always ensure that they have the following:

- A school mobile phone or access to a personal mobile phone for emergency contact. It is good practice to have a school pay as you go mobile phone for off-site activities.
- A portable first aid kit
- Information relating to students with a medical condition (see 'Students with Medical Conditions' Policy)
- The contact details for the member of staff who will have rapid access to parents' contact details (including 24-hour contact in the case of a residential visit). If parents have given their permission for the visit lead to take their contact details with them, they can carry these. This consent should be sought as part of the visit preparation.

Risk assessments will be completed by the trip organiser and approved through the Evolve system, prior to any educational visit that necessitates taking students off school premises.

In the event of an incident or a person falling unwell, staff will follow the first aid procedures as above.

Commented [HS7]: Check if covered by the relevant policy

10. Storage of medication

Medicines will be stored securely and appropriately in accordance with individual product instructions, save where individual pupils have been given responsibility for keeping such equipment with them. Medicines will be stored in the original container in which they were dispensed, together with the prescriber's instructions for administration, and properly labelled, showing the name of the patient, the date of prescription and the date of expiry of the medicine.

Medicine brought in by pupils will be returned to their parents for safe disposal when they are no longer required or have expired.

An emergency supply of medication will be available for pupils with medical conditions that require regular medication or potentially lifesaving equipment, e.g. an EpiPen.

Parents will advise the school when a child has a chronic medical condition or severe allergy so that an IHP can be implemented and staff can be trained to deal with any emergency in an appropriate way. Examples of this include epilepsy, diabetes and anaphylaxis. A disclaimer will be signed by the parents in this regard.

Commented [HS8]: Not sure whether it's legal for schools to ask parents to sign a disclaimer, change to consent form?

Pupils will have any medication stored and, where appropriate administered, in accordance with their EHC plans and the school's Administering Medication Policy.

11. Illnesses and allergies

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

A quiet area will be set aside for withdrawal and for pupils to rest while they wait for their parent to pick them up. Pupils will be monitored during this time.

Where a pupil has an allergy, this will be addressed via the Trust's Allergy and Anaphylaxis Policy.

The school will manage any emergencies relating to illnesses and allergies in accordance with the Emergency procedures section of this policy.

See also our Allergy and Anaphylaxis Policy.

12. Consent

Parents will be asked to complete and sign a medical consent form when their child is admitted to the school, which includes emergency numbers, alongside details of allergies and chronic conditions – these forms will be updated at the start of each school year.

Staff will not act 'in loco parentis' in making medical decisions as this has no basis in law. 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 the pupil in mind – guidelines will be issued to staff in this regard.

13. Monitoring and review

This policy will be reviewed annually by the Trust Board, and any changes will be communicated to all members of staff. A review may also be needed after an incident requiring the provision of first aid so that lessons can be learned.

Staff will be required to familiarise themselves with this policy as part of their induction programme. Staff will be informed of the arrangements that have been made in connection with the provision of first aid, including the location of equipment, facilities and personnel.