



Hamstead Hall Academy Trust

FIRST AID POLICY

Updated	July 2026
Approved By	Hamstead Hall Academy Trust Board
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Next Review Date	July 2028

Monitoring and review	Trust Board
Links	Health and Safety Policy Staff Code of Conduct Policy Medical Conditions Policy Risk Management Policy Safeguarding Policy and procedures
Staff responsible	Executive Principals Office Managers First Aid School Nurse Estates and Compliance Manager Heads of School
Committee responsible	Trust Board

Rationale

The purpose of this Policy is to ensure there is appropriate first aid provision for all employees, pupils and visitors across the Trust at all times. The Health and Safety (First Aid) Regulations 1981 set out the essential aspects of first aid that employers have to address. As a preventative measure, the Trust will promote awareness of health and safety issues to prevent, where possible, any potential hazards or accidents. All Trust staff has a statutory obligation to follow and co-operate with the requirements of this Policy.

1. General

Hamstead Hall Academy Trust is required under the Health and Safety at Work Act (1974) to have a First Aid Policy. This policy contains the approaches and procedures to be used in this Academy.

2. Aim

- a) To ensure that the Academy has adequate and appropriate equipment, facilities and procedures to provide appropriate first aid to staff, students and visitors to the Academy.
- b) To ensure that the First Aid arrangements are based on a risk assessment of the Academy.

3. Responsibilities

- a) The Governing body has responsibility for the provision of First Aid in the Academy.
- b) The internal management responsibility for First Aid is delegated to the Headteacher who is responsible for developing detailed procedures. The Headteacher must ensure that parents are aware of the School's Health and Safety Policy and First Aid Policy. The Academy will appoint a First Aid School Nurse, to be in charge of first aid provision, who will:
 - Ensure that the first aid provision is adequate and appropriate
 - Carries out appropriate risk assessments in liaison with the Headteacher
 - Ensures that the equipment and facilities are fit for purpose
 - Regularly keeps the Headteacher informed on the implementation of the policy.
 - All nominated First Aiders within the Academy trust will have attended at First Aid Course and undertake a requalification course as appropriate, to retain competency.

Teachers' conditions of employment do not include giving First Aid. However, all staff in charge of students, including volunteer staff, must use their best endeavours at all times, particularly in emergencies, to secure the welfare of the pupils in the same way that parents would be expected to act towards children. Staff who regularly lead off-site activities will be encouraged and supported by the academy to gain a basic first aid qualification. Other staff must provide

first aid to the level of qualification or competence that they possess. All staff on becoming aware of a student in discomfort, distress or pain must seek the support of the First Aid School Nurse or another first aid trained member of staff. If able and appropriate to do so the member of staff should bring the student to the medical room. If the nature of the complaint is such that the student should not be moved or cannot move, then the member of staff should contact the First Aid School Nurse or another first aid trained member of staff directly by the most efficient means available e.g. using another student, phone or radio. In life threatening situations, the member of staff must immediately call the emergency services. Members of staff should proceed with extreme caution. Even in instances where there is a reasonable possibility that a student may have been injured but does not feel or show any immediate effects and may be making light of the situation, the member of staff must take the student to the medical room for them to be assessed by the First Aid School Nurse or another first aid trained member of staff.

4. Duties of the First Aid School Nurse and all First Aid Trained Staff

The First Aid School Nurse and all First Aid Trained Staff must:

- Hold a current first aid training qualification (minimum Emergency First Aid at Work) provided by a competent training.
- Give prompt help to casualties as requested and required
- Contact parents/carers to report serious injuries, injuries to the head and those leaving a visible mark to the body
- Contact parents/carers to make arrangements for their child to be collected from school
- Ensure that when necessary, an ambulance or other professional medical help is called
- Maintain accurate records of all instances where first aid support is required and given, including any additional medical advice given to the student. This is completed on the online medical tracker software.

5. Number, location and contents of first aid boxes

First aid boxes will be kept in strategic locations around the school sites.

The medical rooms have a large supply of first aid equipment. We also have eye wash stations in the medical room and all DT and Science classrooms/laboratories.

All staff should know where the First Aid boxes are kept.

The First Aid boxes must contain a “sufficient quantity” of First Aid material and nothing else and are compliant with the Health & Safety Executive (HSE) guidance. The designated person at both schools will check the contents of each first aid box each term, making good any deficiencies. Staff who use items from a first aid box must inform a First Aider who will re-stock the kit.

6. Students on crutches or with mobility issues

Students with mobility issues, who will often be using crutches, must be paired with a “buddy” in line with the PEEPs requirement. The appointed ‘Buddy’ can assist them moving around the school by carrying their bag and opening doors. These arrangements must be put in place by the form tutor or appropriate year leader as soon as they are aware of the student’s immobility. These students and their “buddy” must be allowed to leave lessons up to five minutes early although this will be dependent on the location of their next lesson. Locations of lessons will need to be assessed by year leader and the Senior Leadership Team. Parents/Carers will be contacted by year team to discuss their child PEEP and location of lessons. There will also be a discussion to plan a reintegration back to normal activities when student is physically able and medical professions are happy for the student to resume normal activities.

During a fire evacuation it is the responsibility of the teacher to ensure that the student safely evacuates the building and reaches the assembly point.

7. Students who have EpiPens

- Secondary school students who have an EpiPen will be required to have a pen on their person at all times during the school day including when participating in an off-site activity. Primary school students will have their EpiPen located safely with the class teacher.
- The school will keep an EpiPen together with a care plan for the student in the medical room.
- The site appointed person will remind parents when their child’s EpiPen is close to being out of date and needs to be replaced and will inform the Headteacher of any parents who do not replace their child’s out of date pen within a reasonable length of time.
- An EpiPen and care plan must be taken by the activity leader when the student participates in an off-site activity.
- The school have additional EpiPens in strategic locations across the sites.
- School staff are trained annually to be aware of signs/symptoms of anaphylaxis and allergies and how to administer EpiPens. Please see trust allergy policy.

8. Asthma salbutamol inhalers

The school has additional emergency salbutamol inhalers in strategic locations across the sites.

There are also inhalers that can be taken on school trips. These are to be used for pupils who do not have access to their own medication and where written parental consent has been provided.

School staff are trained annually to be aware of signs/symptoms of asthma attacks and how to support a student to use an inhaler. Staff are aware of the process to call for help if symptoms do not improve.

Parents/carers are advised to ensure that their child carries their inhaler with them in their school bag each day. Parents/carers are recommended to hand in a spare inhaler into school (to be stored in the medical room) in case their child's inhaler is left at home/lost/broken/empty.

9. Automated External defibrillators

An AED (automated external defibrillator) is a portable device that automatically diagnoses the life-threatening cardiac arrhythmias of ventricular fibrillation (VF) and pulseless ventricular tachycardia and is able to treat them through defibrillation, the application of electricity which stops the arrhythmia allowing the heart to re-establish an effective rhythm. The school defibrillators (AED) in strategic locations across the sites.

Maintaining a Defibrillator AED equipment and accessories necessary for support of medical emergency response shall be maintained in a state of readiness.

Monthly Monitor and System Checks:

There are monthly checks carried out by the site team This check shall include review of the following elements:

- AED battery life
- AED pads life and use by date
- AED operation and status

10. Educational visits & other off-site activities (inc residential and overseas)

- Leaders of educational visits will be required to take a first aid bag with them on the activity. The school will purchase a range of first aid bags suitable for use with a given number of students participating on the visit.
- Visit leaders must contact the nominated person to inform them of their need for a first aid box, at least 48 hours before the visit takes place. First aid boxes will be signed out and must be returned to the medical rooms within 24 hours of the return of the visit. It is the responsibility of the visit leader, on returning the first aid box to inform the nominated person, if any items have been used.
- On an educational visit the visit organiser or one of the accompanying adults must be First Aid trained. They must follow the requirements of this policy especially in instances of injuries and those circumstances where parents must be contacted at the earliest

possible opportunity (see Section 10: Communication with parents). The First Aider must have received an appropriate level of first aid training given the nature of the activity.

- It is the responsibility of the trip organiser, on the return of the trip, to report to the nominated person within 24 hours any incidents during the trip where first aid has been administered. It is the responsibility of the first aider on the trip to complete the medical tracker software online.
- A spare emergency EpiPen and inhaler will be included in each first aid kit taken on off site visits.
- As part of the off-site visits risk assessments, if a student on a trip have a care plan and or requires medication the First Aid School Nurse will ensure this is packed in the First Aid Kit and trip leads and first aiders are fully informed of the medical needs of students going on the trip.
- Each school mini-bus also carries an additional standard first aid kit.
- Any student attending a trip or visit who has a known medical condition has to be medically risk assessed as part of the planning and before approval by the EVC and Headteacher.

11. Communication with parents

The First School Nurse or member of staff will contact parents in all instances where a student has received:

- a blow to the head
- a cut to his head or face
- significant bruising to any part of the body
- a deep cut to any part of the body
- an injury that has resulted in the emergency services being contacted
- Any other scenario deemed appropriate for parents / carers to be contacted

Parents will also be contacted in instances where a student reports having chest pains.

If a student is not well enough to remain in lessons parents will always be contacted.

In all instance a cautious approach will be adopted.

Parents should inform the school if further medical attention was sought and what if any treatment, medical advice, or guidance given

12. Calling the emergency services

In most instances it will be the decision & judgement of the first aider whether to call the emergency services however in certain situations, especially during lessons and in other more remote areas of the school site, it will be necessary for the member of staff first making contact with the injured student to call the emergency services to avoid any further delay.

Where another member of staff calls the emergency services a First Aider should be informed as soon as is reasonably possible. The Headteacher or a member of SLT must be informed if the emergency services are called. Staff in the main office also need to be informed, so there is no delay in the ambulances arriving on site.

The emergency services will be called when necessary in the following situations

- Where the person is struggling to breathe or their breathing is impaired.
- Where the person is showing signs of shock or trauma e.g. slurred & incoherent speech, drowsiness etc.
- Where the person has been unconscious or becomes unconscious for any length of time.
- Where the person is unable to walk or move unaided.
- Where the person has suffered a significant cut to any part of their body.
- Where the person has suffered a cut that will not stop bleeding.
- Where the person has inhaled or ingested a harmful substance.
- Where to move the person may cause further injury or exacerbate an existing injury.
- Where the person has suffered a burn the area of which is larger than a fifty pence piece.
- When an emergency adrenaline auto-injector (AAI) has been administered.

While the school is mindful that a 999 call should only be made in instances of genuine emergency. A cautious approach will be adopted especially when in the judgement of the first aider or member of staff the extent of the injury suffered by the student is not obvious and unclear but from which the student could suffer serious consequences. In all of the above situations, until the arrival of the emergency services, the person will not be left unattended for any length of time. Parents will always be contacted if the emergency services have been contacted in relation to an incident involving their child.

Overall Key duties

- The Trust and its headteachers will ensure every school:
- undertakes a first aid risk assessment annually.
- Appoints an appropriate number of suitably trained personnel as first aiders.

- Provides sufficient first aid facilities, training and resources.
- Keeps accident records and reports to the Trust Health and Safety Representative as required.
- Fulfills reporting requirements under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013.
- Provides adequate and appropriate first aid provision as part of the arrangements for all out of school activities.
- Keeps a record of accidents relating to each occasion any member of staff, pupil or other person reports an accident or receives first aid treatment either on the school premises or as part of a school related activity. This will be completed on the medical tracker software.
- Sends a copy of all serious accident reports requiring an individual to receive treatment from the emergency services or results in an absence for 3 days or more to the Director of Estates, currently Martin Godfrey and the Trust's Office Managers, currently Ross Whitehouse at Hamstead Hall and Samantha Bailey at Grestone Primary, for review and reporting to the HSE as required under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013.
- The Trust will review this Policy every two years to ensure the health, safety and welfare of pupils, staff and visitors is always of paramount importance. A full review would be triggered immediately following any serious accident or event.
- Please note Hamstead Hall Academy has the First Aid School Nurse on site supported by other trained first aiders. Other schools in the Academy Trust have trained first aid staff.
- This policy will be reviewed every 2 years unless there are operational changes requiring a review.