

First Aid Policy

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1. Introduction

The health and safety of all members accessing provision across the Voyage Education Partnership (the Trust) is of utmost importance. This first aid policy ensures that all staff, visitors, pupils and parents are aware of the procedures to be followed in the event of illness, accident or injury.

This policy reflects current Department for Education (DfE) guidance on supporting pupils with medical conditions and incorporates updated statutory expectations for allergy management and anaphylaxis response.

The Trust recognises its duties under Section 100 of the Children and Families Act 2014 to support pupils with medical conditions. Individual Healthcare Plans (IHCPs) are developed in consultation with health professionals, pupils and parents to ensure needs are met and that pupils are not excluded from full access to education.

This policy must be read alongside the Trust's Management of Learners with Medical Needs Policy.

In a serious emergency, staff must always call 999 immediately before implementing internal procedures.

2. Roles and Responsibilities

2.1 Trust Board

The Trust Board is responsible for ensuring:

- An up-to-date first aid policy is in place
- Adequate first aid provision, equipment and trained personnel
- Appropriate arrangements for pupils with medical conditions

The Trust Board will ensure that effective assurance arrangements are in place to monitor compliance across academies.

2.2 The Headteacher

The Headteacher is responsible for:

- Ensuring first aid provision is effective on a day-to-day basis
- Ensuring risk assessments for first aid provision are undertaken and reviewed
- Appointing a named Medical Needs Coordinator responsible for overseeing medical provision
- Ensuring sufficient trained staff are available at all times

The Headteacher will also:

- Ensure Individual Healthcare Plans are reviewed at least annually
- Ensure staff are aware of pupils' medical needs
- Monitor incidents and escalate significant concerns to the Trust

2.3 First Aiders

First aiders must:

- Hold valid Ofqual regulated First Aid certification
- Maintain up-to-date training (minimum every 3 years)
- Provide immediate care to staff, pupils and visitors
- Call emergency services where required

There will be a sufficient number of appropriately trained first aiders available at all times, based on risk assessment, including:

- Breaktimes and lunchtimes
- Educational visits and off-site activities
- Contingency arrangements

2.4 All Staff

All staff are responsible for:

- Understanding this policy and basic first aid procedures
- Reporting incidents and concerns
- Ensuring activities are risk assessed
- Supporting pupils with medical conditions appropriately

All staff will receive:

- Induction training
- Regular refresher awareness training

This includes recognising serious conditions such as:

- Anaphylaxis
- Asthma-related emergencies

3. First Aid Equipment

Each academy will determine the required level of provision through risk assessment.

Academies must ensure that:

- First aid equipment is appropriate, accessible, and regularly checked
- Responsibility for equipment oversight is clearly assigned

4. Management of Anaphylaxis and Adrenaline Auto-Injectors (AAIs)

The Trust recognises that anaphylaxis is a life-threatening emergency requiring immediate action.

In line with statutory guidance from September 2026, all academies will:

- Hold spare, in-date adrenaline auto-injectors (AAIs) on site
- Ensure staff are trained to recognise and respond to anaphylaxis
- Maintain robust arrangements for managing allergies, including Individual Healthcare Plans

Spare AAIs may be used where:

- An individual is showing signs of anaphylaxis; and
- Their prescribed AAI is unavailable, ineffective, or additional medication is required

In exceptional circumstances, an AAI may be administered where staff reasonably believe an individual is experiencing anaphylaxis, even where no prior diagnosis is known.

Following administration:

- Emergency services (999) must be contacted immediately
- The individual must be monitored continuously
- Parents/carers must be informed without delay

Academies must ensure that:

- AAIs are clearly labelled and easily accessible
- Staff know their location and emergency procedures
- Training is provided regularly
- All incidents are recorded and reviewed

5. Information on Pupils

Parents must provide:

- Accurate and up-to-date medical information
- Necessary consent for treatment in line with Trust procedures

Academies must maintain:

- A current record of pupils with medical conditions
- Clear identification of pupils at risk (e.g. allergies, asthma)

6. Procedures in the Event of Illness, Accident or Injury

6.1 Illness

If a pupil falls ill while in a lesson, they should immediately tell the member of staff in charge, who will assess the situation and decide the best course of action. Pupils who are clearly in pain, are distressed, or are injured will never be required to go to seek support from a first aider unaccompanied.

The first aider will administer the appropriate first aid, and parents will be called to pick up their child if they are too unwell to complete the rest of the school day. If a parent or carer is unable to get to the academy to pick up the child, the child will remain in the office/medical room until they are able to get there at the end of the school day or arrange for another family member or carer to collect them.

If a child who is sent home early is still too unwell to attend school the next day, parents should follow the procedure outlined under the subheading below. The Trust aims to reduce the risk of a spread of infection or illness and asks parents to keep their child at home where there is risk. Staff will work with pupils who have missed classes to ensure that they are able to catch up on all the classwork that has been done in their absence.

If a member of staff is unwell, he or she may visit a first aider throughout the school day but should ensure that their manager is aware of class cover that has been arranged or needs to be arranged either for a single lesson or for a prolonged period of time.

6.2 Accident or Injury

In the case of an accident or injury, the member of staff in charge should be informed immediately. They will assess the situation and determine whether or not emergency services need to be called. A first aider should be called for as soon as possible and should be informed of the injury. First aiders are not paramedics, and if the first aider feels they cannot inadequately deal with the injury, then they should arrange for access to appropriate medical care without delay.

6.3 Emergency Services

An ambulance should always be called by staff in the following circumstances:

- a significant head injury
- fitting, unconsciousness, or concussion
- difficulty in breathing and/or chest pains
- a severe allergic reaction
- a severe loss of blood
- severe burns or scalds
- the possibility of a serious fracture
- in the event that the first aider does not consider that they can adequately deal with the presenting condition by the administration of first aid, or if they are unsure of the correct treatment.

If an ambulance is called, the member of staff in charge should ensure that access to the site is unrestricted and that the pupil/staff member can be easily accessed by emergency services when they arrive.

Pupils who are taken to hospital in an ambulance will be accompanied by a member of staff unless parents are able to reach the site in time to go with their child themselves. Ambulances will not be delayed for waiting for parents to arrive at the site. Parents will be informed immediately of any medical emergency and told which hospital to go to.

Staff must not delay calling emergency services while seeking internal support.

All accidents and injuries must be reported. (Refer to Section 8 Reporting Accidents).

7. Procedure in the Event of Contact with Blood or Other Bodily Fluid

The Trust understands the importance of ensuring that the risk of cross-contamination is reduced as far as is reasonably practicable, and the training that staff and first aiders undertake outlines the best practice for this. It is important that the first aider at the scene of an accident or injury takes the following precautions to avoid risk of infection to both them and other pupils and staff:

- cover any cuts and grazes on their own skin with a waterproof dressing
- wear suitable disposable gloves when dealing with blood or other bodily fluids
- wash hands after every procedure.

If the first aider suspects that they or any other person may have been contaminated with blood and/or other bodily fluids that are not their own, the following actions should be taken without delay:

- wash splashes off skin with soap and running water
- wash splashes out of eyes with tap water or an eye wash bottle
- wash splashes out of nose or mouth with tap water, taking care not to swallow the water
- record details of the contamination
- arrange for the proper containment, clear-up and cleansing of the spillage site
- report the incident to the Trust's Health and Safety Manager and take medical advice if appropriate.

In addition, infection prevention and control will align with current UK Health Security Agency (UKHSA) guidance where applicable.

8. Reporting Accidents, Emergencies and First Aid Administration

All incidents must be recorded using the Trust-approved incident reporting system.

- Records must include:
- Date, time and location
- Nature of injury/illness
- Action taken

In addition:

- Incident data will be reviewed regularly at academy and Trust level
- Trends will be analysed to inform risk management and improvement

A written record should also be kept of all medicines that are administered to children, including those prescribed for pupils with individual healthcare plans.

The first aider is also responsible for ensuring that parents are kept up to date as is appropriate regarding the health of their child in school, injuries that they have sustained, and medical treatment that they are receiving. In an emergency situation or in the case of a serious injury, parents will be informed as soon as is practicably possible.

8.1 Serious Incidents

Serious incidents will be:

- Reviewed at Trust level
- Overseen by the Executive Team
- Reported through governance structures including Health & Safety forums and, where appropriate, the Trust Board

8.2 Reporting to HSE (RIDDOR)

The Trust is legally required to report certain injuries, diseases and dangerous occurrences to the HSE under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR). Where there is a death or major injury this should be reported by calling the Incident Contact Centre (ICC) on 0845 300 9923 (opening hours Monday to Friday 8.30am to 5pm). All other reportable injuries should be reported online [<http://www.hse.gov.uk/riddor/report.htm>].

It is the responsibility of the Trust's Health and Safety Manager to report to the HSE when necessary. Incidents that need to be reported include but are not limited to the following:

Incidents involving staff:

- Work related accidents resulting in death or major injury (including as a result of physical violence) must be reported immediately (major injury examples: dislocation of hip, knee or shoulder; amputation; loss of sight; fracture other than to fingers, toes or thumbs).

- Work related accidents that prevent the injured person from continuing with his/her normal work for more than seven days must be reported within 15 days (note that even though over-three-day injuries do not need to be reported, a record must still be retained).
- Cases of work-related diseases that a doctor notifies the school of (for example: certain poisonings; lung diseases; infections such as tuberculosis or hepatitis; occupational cancer).
- Certain dangerous occurrences (near misses – reportable examples: bursting of closed pipes;
- electrical short circuit causing fire; accidental release of any substances that may cause injury to health).

Incidents involving pupils, parents, or visitors:

- Accidents which result in the death of a person that arose out of or in connection with the school's activities.
- Accidents which result in an injury that arose out of or in connection with the Trust's activities and where the person is taken from the scene of the accident to hospital for treatment.

For most types of incidents, including accidents resulting in the death of any person, accidents resulting in specified injuries to workers, non-fatal accidents requiring hospital treatment to non-workers and dangerous occurrences, the responsible person must notify without delay, in accordance with the reporting procedure in Schedule 1 of RIDDOR. A report must be received within 10 days of the incident. For accidents resulting in the over-seven-day incapacitation of a worker, the school will notify the enforcing authority within 15 days of the incident, using the appropriate online form.

The Trust will keep a record of any reportable injury, over-seven-day injury, disease or dangerous occurrence. This will either be a copy of the submitted RIDDOR report OR a separate record which will include: the date and method of reporting; the date, time and place of the event; personal details of those involved and a brief description of the nature of the event or disease.

All reporting will be undertaken in line with current **Health and Safety Executive (HSE) guidance**.

8.3 Incident Investigations

An investigation may be launched by the Trust's Health and Safety team in the case of accidents or incidents that fall under RIDDOR. Accident reports will be reviewed, and witnesses may be interviewed.

Senior managers may decide to conduct internal investigations into less serious incidents to ensure that policy and procedure are being used correctly and effectively, and that future incidents of a similar nature can be avoided.