



L.E.A.D. Academy Trust

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# First Aid Policy

## Sir Edmund Hillary Academy

**Review frequency:** Annually

**Approval**<sup>[RH1]</sup>:

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Author	Rebecca Hyder
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## Aims:

The aims of our first aid policy are to:

- Ensure the health and safety of all staff, pupils and visitors
- Ensure that staff and governors are aware of their responsibilities with regards to first aid
- Provide a framework for responding to a first aid incident and recording and reporting the outcomes
- For EYFS specific elements please [click here](#)

## Legislation and Guidance:

This policy is based on advice from the Department for Education on [first aid in schools](#) and [health and safety in schools](#), and guidance from the Health and Safety Executive (HSE) on [incident reporting in schools](#), and the following legislation:

- [The Health and Safety \(First-Aid\) Regulations 1981](#), which states that employers must provide adequate and appropriate equipment and facilities to enable first aid to be administered to employees, and qualified first aid personnel.
- [The Management of Health and Safety at Work Regulations 1999](#), which require employers to carry out risk assessments, make arrangements to implement necessary measures, and arrange for appropriate information and training.
- [The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations \(RIDDOR\) 2013](#), which state that some accidents must be reported to the Health and Safety Executive (HSE), and set out the timeframe for this and how long records of such accidents must be kept.
- [Social Security \(Claims and Payments\) Regulations 1979](#), which set out rules on the retention of accident.
- [The Education \(Independent School Standards\) Regulations 2014](#), which require that suitable space is provided to cater for the medical and therapy needs of pupils.

This policy complies with the Trust's funding agreement and articles of association.

## Roles and responsibilities:

### Appointed person(s) and first aiders

First aiders are trained and qualified to carry out the role and are responsible for the above, as well as:

- 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
- Sending pupils home to recover where necessary
- Filling in an accident report on the same day as, or as soon as is reasonably practicable after, an incident requiring first aid.
- Keeping their contact details up to date.

All first aiders names will be displayed prominently around the academy site.

Appointed persons are responsible for the below in the absence of a first aider:

- 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

## Academy Governing Body (AGB)

The AGB has delegated responsibility from the Trust board for health and safety matters in the academy, but will assign operational matters and day-to-day tasks to the headteacher and staff members as appropriate.

## The Headteacher

The Headteacher is responsible for the implementation of this policy, including:

- Ensuring that an appropriate number of appointed persons and/or trained first aid personnel are present in the academy at all times.
- Ensuring that first aiders have an appropriate qualification, keep training up to date and remain competent to perform their role.
- Ensuring all staff are aware of first aid procedures.
- Ensuring a first aid needs assessment is completed and appropriate measures are put in place, or delegating such function to managers with oversight.
- Ensuring that adequate space is available for catering to the medical needs of staff and pupils
- Reporting RIDDOR reportable incidents to the HSE when necessary.

## Staff

Academy staff are responsible for:

- Ensuring they follow first aid procedures.
- Ensuring they know who the first aiders and/or appointed person(s) in the academy are.
- Completing accident reports for all incidents they attend to where a first aider/appointed person is not called.
- Informing the Headteacher or their manager of any specific health conditions or first aid needs.

## First Aid Provision and Training

When the academy is open the number of qualified first aiders will never fall below the minimum standard listed in [\[appendix 1\]](#), or 1 person on duty, whichever is greater.

When no pupils or visitors are present and there are less than 2 staff members working on site, a lone working procedure must be in place. [\[HT2\]](#) See the on-site Lone Working risk assessment for more details.

Contents of first aid boxes will be determined by the site's first aid needs assessment. Guidelines on minimum standards are available in [\[appendix 2\]](#).

A list of all on site first aiders, where possible with photographs, will be displayed, at a frequency and in locations determined by the site's first aid needs assessment around the academy, and stored on SharePoint. As a minimum, the list will be displayed in public in the main academy reception.

All staff training logs will be kept and recorded on the Trust training spreadsheet, or other Trust-wide logging system.

Certificates for all training received via the Trust first aid provision will be available on each academy's shared drive link. Copies of this link can be sent on request.

Guidance on specific numbers of first aid trained personnel are provided in [\[appendix 1\]](#).

At Sir Edmund Hillary Academy the Appointed Person and the After School Club Manager will undertake the First Aid at Work 3-day course. One member of each of the Early Years Foundation bases (Nursery, F1, F2), one member from each of the other Phase Bases. These need annual refresher training. All staff will have training on Emergency First Aid at Work (1day) undertaken every three years. As many staff as practicable will undertake this course.

## **First Aid Procedures**

Staff at the academy will deal with any incident promptly and effectively. Consideration will be given to the urgency of the situation, the nature of the injury and condition of the injured person in deciding where and how to treat them.

Precautions will be taken where possible and practical to protect staff, pupils, visitors and injured people from the risk of infection, following the academy decontamination procedure.

In the event of an incident resulting in injury:

- The closest member of staff present will assess the seriousness of the injury and if appropriate seek the assistance of a qualified first aider, who will provide the required first aid treatment.
- The first aider will assess the injury and decide if further assistance is needed from a colleague or the emergency services. The first aider will remain on scene until further help arrives.
- The first aider will assess whether the injured person should be moved or placed in a suitable position.
- If the first aider judges that an injured pupil is too unwell to remain in the academy, parents will be contacted and asked to collect their child. Upon their arrival, the first aider will recommend next steps to the parents.
- If emergency services are called, the Headteacher will contact parents immediately.
- The first aider or appointed person will arrange for the Medical Tracker to be completed on the same day or as soon as is reasonably practical after an incident resulting in an injury.

When dealing with an injured person, first aiders must take care to follow the training given. It is understood that staff may need to utilise their initiative on occasion to deal with an incident, but they should only utilise techniques they have been taught on official training courses.

Splinters are considered a foreign object and where possible will be removed following training provided on first aid courses. Wherever there is doubt, the splinter will not be removed, and parents contacted.

## **Off-site Procedures**

When taking pupils off the school premises (including via transport in vehicles), The trip leader (EVC) will ensure they always have the following:

- A school mobile phone / personal phone if multiple visits are taking place
- Information about the specific medical needs of pupils, including details of allergies
- Parents' contact details
- A portable first aid kit. The minimum requirements for a travel first aid kit are set out at [\[appendix 2\]](#):

Where students are walking off site, at least 1 member of staff will hold an Emergency First Aid at Work (EFAW) certification or greater and they will carry with them a suitably stocked first aid kit (see [\[appendix 2\]](#)). All allergy information for students and staff on the trip, and a copy of the completed risk assessment, will also be carried.

Where students are being taken off site in a taxi or minibus, the member of staff accompanying the student should hold a suitable first aid certification.

Where students are being transported by coach there must be at a minimum, one suitably trained first aider with a relevant qualification but you may require more first aiders dependent on the outcome of the trip risk assessment.

When transporting pupils by either taxi, minibus or coach, the academy will make sure that the vehicle is equipped with at least one clearly marked and well-stocked first aid box. It is possible you may have to carry more than 1 kit if identified in the trip risk assessment.

Risk assessments will be completed by the EVC or visit lead prior to any educational visit that necessitates taking pupils off academy premises.

There will always be at least 1 first aider on academy trips and visits and residential trips, but you may require more first aiders dependent on the outcome of the trip risk assessment.

## **First Aid Boxes and Kits**

First aid boxes should be made of a suitable material and designed to protect the contents. All boxes and locations should be clearly marked with a white cross on a green background.

First aid boxes and travelling first aid kits should contain sufficient quantities of suitable first aid materials and nothing else. Recommended minimum quantities for a low-risk site and more information may be considered as per [\[appendix 2\]](#).

In situations where mains tap water is not readily available for eye irrigation, sterile water or sterile normal saline solution (0.9%) in sealed disposable containers will be provided. Once opened these must not be re-used. The use of eye baths or cups is not permitted. The contents of the first aid boxes will be replenished as soon as possible after use to ensure a continued sufficient supply of materials. First aid staff will wherever possible restock a kit after use,

however this will be done at a minimum every half term. The contents of first aid boxes must be listed and checked as per the site policy as part of Health and Safety checks.

Supplementary equipment may include suitable means for the transportation of casualties, blankets, aprons and other suitable protective equipment, identified in the site's first aid needs assessment. Where such equipment is deemed necessary it will be stored in or with the first aid boxes and added to the contents list.

A method of disposal of soiled dressings will always be available at the academy and with first aid kits in the form of suitable biohazard containers or bags which can be disposed of by a suitable authority. A method of disposing of sharp items such as needles will be available at the academy in the form of a sharps box. Used / full containers will always be disposed of by the NHS or Local Authority by dropping used containers off at a local health centre or through contracts with sanitary suppliers such as PHS.

## Record Keeping and Reporting

All incidents and details of any treatment will be recorded on Medical Tracker.

More information and specific guidance is available in the accident reporting and incident Safety Policy and Arrangements document (SPA) on SharePoint.

### First Aid and Medical Tracker

- The first aider or appointed person will complete the medical tracker on the same day or as soon as possible after an incident resulting in an injury.
- As much detail as possible should be supplied when reporting an accident.
- For incidents involving pupils, a copy of the accident report form will also be added to the pupil's educational record by the Head Teacher.
- records held in the first aid and accident book will be retained by the school for a minimum of 4 years, and then securely disposed of

In the event of a major incident a copy of the Medical Tracker report and any supporting documents will be sent to L.E.A.D. Head Office, and a copies will be kept on site.

### Reporting to the HSE

The Headteacher will keep a record of any incident which results in a reportable injury, disease, or dangerous occurrence as defined in the RIDDOR 2013 legislation. Only *work related* incidents falling within the definitions below are required to be reported.

Please note, if a RIDDOR reportable incident occurs to a contractor whilst on academy premises, the contractor's employer should make the RIDDOR report, not the academy. For reportable injuries to academy staff, pupils and members of the public, the academy should make the RIDDOR report.

The Headteacher will report these to the HSE in accordance with the time limits prescribed under RIDDOR, set out below.

Type of injury	Time limit for reporting
Death (not suicides)	10 days of the incident

	It is likely the police and authorities will attend the site following notification of a death to the emergency services, but a RIDDOR report is still required within the 10 day timeframe and must be made
Specified injuries to workers: <ul style="list-style-type: none"> <li>• Fractures, other than to fingers, thumbs and toes</li> <li>• amputations</li> <li>• any injury likely to lead to permanent loss of sight or reduction in sight</li> <li>• any crush injury to the head or torso causing damage to the brain or internal organs</li> <li>• serious burns (including scalding) which: <ul style="list-style-type: none"> <li>• covers more than 10% of the body</li> <li>• causes significant damage to the eyes, respiratory system or other vital organs</li> </ul> </li> <li>• any scalping requiring hospital treatment</li> <li>• any loss of consciousness caused by head injury or asphyxia</li> <li>• any other injury arising from working in an enclosed space which: <ul style="list-style-type: none"> <li>• leads to hypothermia or heat-induced illness</li> <li>• requires resuscitation or admittance to hospital for more than 24 hours</li> </ul> </li> </ul>	10 days of the incident
Over 7 day incapacitation of a worker (where the individual is unable to complete their normal work duties for 7 consecutive days)	15 days of the incident
Over 3 day incapacitation of a worker	Recorded on Medical Tracker, but not reported
Non-fatal incidents involving non-workers (members of the public etc.) where the individual is taken directly from the scene of the incident to hospital for treatment of that injury Note there is no need to report incidents where people are taken to hospital purely as a precaution	10 days of the incident
Occupational diseases: <ul style="list-style-type: none"> <li>• carpal tunnel syndrome;</li> <li>• severe cramp of the hand or forearm;</li> <li>• occupational dermatitis;</li> <li>• hand-arm vibration syndrome;</li> <li>• occupational asthma;</li> <li>• tendonitis or tenosynovitis of the hand or forearm;</li> <li>• any occupational cancer;</li> <li>• any disease attributed to an occupational exposure to a biological agent.</li> </ul>	As soon as the responsible person receives a diagnosis
Dangerous occurrences (specified near miss events)	10 days of the incident

See further guidance at: <a href="#">Dangerous occurrences - RIDDOR - HSE</a>	
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RIDDOR reporting forms are available here: [How to make a RIDDOR report - RIDDOR - HSE](#)

### **First Aid Rooms (Site Specific)**

L.E.A.D Academy Trust considers that all academies require a dedicated First Aid room or allocated space. Our academy has a suitable room that can be used for medical treatment when required. The first aid room does not need to be used solely for first aid purposes but must be readily available when needed. Ideally, it should be situated near a WC.

The room and its contents are managed by a trained appointed person. The room itself should be positioned in such a way as to be the best point of access for transport to hospital and be convenient for access, toilets etc. within the establishment itself.

The First Aid provision should be large enough to accommodate stretchers, wheelchairs etc. All surfaces should be easy to clean and the room cleaned daily, and after use. It should be effectively ventilated, heated, lit and maintained. A notice giving details of first aiders and contact procedures should be displayed<sup>[RH3]</sup>.

The facilities and equipment which should be provided as a minimum in first aid rooms are as follows:

- Sink with running hot and cold water and a mixer tap.
- Drinking water (If not available on mains tap) and disposable cups.
- Paper towels.
- Smooth topped working surfaces.
- First aid boxes.
- Chair.
- Hand soap.
- Protective garments for first aiders.
- Suitable refuse container (foot pedal operated) lined with appropriate disposable yellow plastic bags i.e. for clinical waste.

The room should be clearly marked as a first aid room by means of a sign.

Where a dedicated first aid room is not deemed necessary another suitably equipped room should be on hand to be used in the event of an incident.

At Sir Edmund Hillary Academy a dedicated First Aid Room is not available. We use a combination of the Toilet with facilities for people with a disability and the Basecamp space if a person needs to be in a horizontal position.

### **Transport to Hospital**

If it is considered necessary by a suitably informed member of staff, that an injured pupil will be sent directly to hospital (normally by ambulance), then parents and/or guardians will be informed. No injured person should be allowed to travel to hospital unaccompanied and an appropriate accompanying adult will be designated when parents cannot be contacted. For incidents involving staff members their emergency contact, taken from the school MIS will be used.



Where parents have been contacted but arrival is delayed, transport via ambulance should not be delayed as a result.

Where it is necessary to transport a pupil to hospital, but an ambulance is considered excessive, parents will be advised to take them, and a written record of this recommendation kept by the academy.

Where it is necessary to transport a pupil to hospital, but an ambulance is considered excessive and the parents are either unable (due to no vehicle access) or unavailable, a member of staff will arrange to transport the pupil via other means. In such cases the following must be adhered to:

- The vehicle to be used must be deemed safe by the academy – MOT and service records checked and up to date, tax etc. These checks must be recorded on site for reference.<sup>[ES4]</sup>
- The injured person must travel in the rear of the vehicle, and a suitably qualified first aider must accompany the pupil in the rear of the vehicle to be on hand to treat any changes in the pupil's condition.

Suitably qualified means the first aider must have specific training covering the injury that the pupil has sustained.

At Sir Edmund Hillary we also have a system to support informing parents, alongside using Medical Tracker, including head bump wrist bands and First Aid stickers. A supply of these will be found in each Phase's Pastoral Files which also contain children's Health Care Plans and Allergy and Dietary information.

Near misses can also be recorded on Medical Tracker especially if it would support a referral of part of the site requiring assessment for Health & Safety.

### **Reporting to parents**

At Sir Edmund Hillary Academy there is a graduated response according to the age of the pupil and the severity of the injury/ treatment.

For the children in Nursery and the Foundation Unit, all accidents, whether at lunchtime or during session time, will be reported upon via Medical Tracker. Parents need to sign the entry to say they have seen it and receive, if necessary, the appropriate report or letter to take away with them or have emailed to them via Medical Tracker. Children in the After School Club –Ed provision– whatever their age, will have this same procedure.

For KS1 and KS2 children requiring first aid a record will be made on Medical Tracker and a sticker may be given to alert their parents that a minor incident has occurred and they will also be emailed, informing the parent of the injury and treatment. The notification by email will be sent to the child's teacher.

If the injury and treatment was a result of another child's behaviour, the parents of the children involved must be informed either face to face or by phone. There needs to be clear distinction between injuries arising accidentally and those arising from behaviour. A parent has a right to know if their child has injured another and likewise a parent has a right to know the dynamics around how their child got injured.

### **Pupil accidents involving head injuries**

Accidents involving the pupil's head can be problematic because the injury may not be evident and the effects only become noticeable after a period of time. These will all be recorded on Medical

Tracker and reported on to parents with the NHS Head Bump guidance. Children will be given a dated wrist band that is to be kept on for the three days after the incident and then removed by school, if the parent hasn't already done so.

Whenever a child reports to an adult that they have had a bump, even if it is clear that the major area affected was a leg (for instance), if the bump wasn't witnessed by the adult, they should always check by asking, "Have you hit anywhere else? Have you bumped your head at all?"

Where emergency treatment is not deemed to be required, a notification letter will still be sent home to the child's parents or guardians via Medical Tracker. This will detail the nature of the bump and give advice as to how to look out for the signs of concussions. Concussion may not become apparent until several days after the event.

### **Monitoring Arrangements**

This policy will be reviewed by the Head Teacher annually and approved by governing body

### **Links with other policies**

Please read / reference this policy alongside:

Health and safety policy

Policy on supporting pupils with medical conditions

Off Site Visits policy

Safeguarding policy

Intimate Care policy

Accident reporting and incident Safety Policy and Arrangements document (SPA)

Academy decontamination procedure

List any other related policies that your academy has here, if applicable.

[EYFS Specific guidance.](#)

## **Additional Legislation and Guidance relevant to EYFS**

This policy is based on the [Statutory Framework for the Early Years Foundation Stage](#), advice from the Department for Education on [first aid in schools](#) and [health and safety in schools](#), guidance from the Health and Safety Executive (HSE) on [incident reporting in schools](#).

### **First Aid Provision and Training:**

Where an academy has early years provision at least 1 member of staff will have current Paediatric First Aid (PFA) or Emergency Paediatric First Aid (EPFA) training, but you may require more PFAs and/or EPFAs dependent on the outcome of the first aid needs assessment and staffing numbers and student ratios.

### **Off-Site Procedures:**

There will always be at least 1 first aider with a current Paediatric First Aid (PFA) certificate on academy trips and visits, as required by the statutory framework for the Early Years Foundation Stage.

### **Reporting to HSE and Notifying Parents:**

#### **Notifying Parents (early years only)**

The child's Keyworker, if available, will inform parents of any accident or injury sustained by a pupil, and any first aid treatment given, on the same day, or as soon as reasonably practicable. Parents will also be informed if emergency services are called.

#### **Reporting to Ofsted and Child Protection Agencies (early years only)**

The Head Teacher will notify Ofsted of any serious accident, illness or injury to, or death of, a child whilst in the care of the academy. This will happen as soon as is reasonably practicable, and no later than 14 days after the incident.

The Head Teacher will also notify Nottinghamshire Social Care LADO of any serious accident or injury to, or the death of, a pupil while in the academy's care.

### **Paediatric First Aid Provision.**

Guidance within the [EYFS framework](#) states:

At least 1 person who has a current Paediatric First Aid (PFA) certificate must be on the premises and available at all times when children are present and must accompany children on outings. The certificate must be for a full course. PFA training must be renewed every 3 years and be relevant for people caring for young children and babies.

Providers should take into account the number of children, staff, and layout of premises to ensure that a first aider is able to respond to emergencies quickly.

All staff who obtained a level 2 and/or level 3 qualification since 30 June 2016 must obtain a PFA qualification within 3 months of starting work in order to be included in the required staff: child ratios at level 2 or level 3 in an early years setting. To continue to be included in the ratio requirement, the certificate must be renewed every 3 years.

## Appendix 1 – First Aid trained staff ratios and details

When there are less than 2 employees at the academy, the academy **MUST** have a suitable procedure in place, including a lone working policy and risk assessment. There must also be at minimum an Appointed Person on site who is responsible for calling the emergency services in the event of an incident. It is the view of the Trust that “an appointed person” does not meet the requirements for first aiders in an education environment. Therefore, the following guidance shall be followed at all times.

When there are more than 2 employees at the academy, one of them should hold an EFAW qualification or higher. This qualification will include basic life support for an adult casualty and **MUST** include an AED qualification.

Over and above this level, sites should refer to the below tables for required first aid personnel.

### Complete site Provision

#### First Aid At Work Trained Staff (FAW)

Number of Staff on site.	0-25	25-50	50-75	75-100	100+
Students		1	1	1	2
0-100	1	1	2	2	2
100-300	1	1	2	3	3
300-500	2	2	2	3	3
500-700	3	3	3	4	4
700-1000	3	3	4	4	4
1000-1200	3	3	4	5	6
1200+	Further guidance required.	Further guidance required.	Further guidance required.	Further guidance required.	Further guidance required.

#### Emergency First Aid At Work Trained Staff (EFAW)

Number of Staff on site.	0-25	25-50	50-75	75-100	100+
Students	1	1	1	1	2
0-100	2	2	2	2	3
100-300	3	3	3	4	4

300-500	4	4	4	5	5
500-700	5	5	6	6	6
700-1000	7	7	7	8	8
1000-1200	9	9	9	9	9
1200+	Further guidance required.	Further guidance required.	Further guidance required.	Further guidance required.	Further guidance required.

\*Adjustments for Sites with Multiple Buildings -1 FAW for each additional building and 2 EFAW for each additional building.

#### **Automatic External Defibrillator (AED) Training Provision**

It is expected that where a site has an AED, all first aid trained staff will be competent in its use and familiar with storage and handling procedures. The Site Manager is responsible for ensuring a basic set of checks are completed monthly to ensure it remains operational.

#### **EFAW Staff and Defibrillator Training**

Training in the usage of an AED is a core module of all Trust first aid courses. Academies must ensure this is still the case when utilising outside organisations for training.

## Appendix 2 – First Aid box / kit requirement

All first aid boxes will be clearly marked and in a green waterproof, dustproof container, marked with a white cross and the word 'FIRST AID' printed in white block capitals.

Travel first aid kits or kits to be taken whilst walking or taking students on a trip will have a reflective band around them aiding in low light visibility, and where possible should use a hard case.

### First Aid Kit Base Guidelines

All first aid kits must comply as a minimum to British Standard (BS) 8599-1, and travel or vehicle first aid kits must comply to BS 8599-2.

All first aid kits will be stored to provide easy access when needed, their locations will be well known and clearly signposted around the academy. The first aid needs assessment will identify the appropriate number and location of first aid kits, including the provision of any non-standard first aid equipment for specific risks.

The lists below are not comprehensive but are recommendations based on current industry best practise. Academies may choose to add items not listed following the outcome of the first aid needs assessment, provided the items are in keeping with first aid guidelines. This is at the discretion of the academy.

### Main Site First Aid Kit Supplies

#### First Aid Boxes

Please consult the below tables for the suggested numbers of each type of first aid kit and minimum contents for your site.

Total Numbers Staff and Students	Small Kits	Medium Kits	Large Kits
0-200	2	1	1
200-500	3	2	1
500-700	3	2	2
700-900	4	2	2
900-1000	5	2	2
1000-1200	5	3	3
1200+	6	4	4

<b>Contents</b>	<b>Small</b>	<b>Medium</b>	<b>Large</b>	<b>Personal</b>
Contents List	1	1	1	1
F/A guidance leaflet	1	1	1	1
Medium sterile dressing	2	4	6	1
Large sterile dressing	2	3	4	1
Triangular dressing	2	3	4	2
Eye dressing	2	3	4	1
Plasters (Various Sizes)	40	60	100	20
Blue Plasters (Various Sizes)	10	20	20	0
Self-Adhesive Wound Dressing	3	6	12	2
Small Non-Adherent Dressing	2	4	4	2
Large Non-Adherent Dressing	2	4	4	2
Sterile wet wipe	20	30	40	10
Adhesive tape	1	2	3	1
Nitrile gloves - pair	6	9	12	2
Face shield /Pocket Mask	1	1	2	1
Foil blanket	1	2	3	1
Burn dressing 10 x 10cm	1	2	2	1
Clothing shears	1	1	1	1
Conforming bandage	1	2	2	1
Finger dressing	2	3	4	1
Sterile eyewash 15ml	3	5	10	2
Penlight	1	1	1	1
Splinter Forceps	1	1	1	1
Single-Use Instant Ice Pack	2	4	8	1

Add to the list to reflect your school's first aid needs assessment and arrangements.

When transporting pupils using a minibus or other large vehicle, the academy will make sure the vehicle is equipped with a clearly marked first aid box containing the minimum required items. Add to the list to reflect your school's first aid needs assessment and arrangements for the off-site procedure. It is possible you may have to carry more than 1 kit if identified in the trip risk assessment.

### **Medicines in First Aid Kits**

Medication for pupils or staff will not be stored in first aid kits. Medication will be contained in a separate, lockable case where possible.

Medications for individual pupils will be in a sealed zip lock bag with the pupil's name written clearly on it. The bag will also contain a copy of the pupil's treatment plan / dosage details.

### **Storing Additional Equipment in First Aid Kits**

The lists above comprise the LEAD standards for first aid supplies. Where staff are qualified to use additional equipment, this can be considered for inclusion in first aid kits on site.

LEAD recommends first aid kits are stored in: [ES5]

- The medical room
- Main Office/ Reception
- The Foundation Unit Office
- The Nursery Office
- The school kitchens

At Sir Edmund Hillary we keep a small First Aid Kit accessible in every classroom alongside, but separate to, a basket of accessible medications such as inhalers. These will be found in the classroom cupboards directly behind where the Green Cross is placed.



