



Policy document control box	
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Policy owner (including job title)	Hannah Curry, Headteacher
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Signed by Headteacher	<i>H. Curry</i>
Date signed	12 June 2024
Signed by Chair of Trustees	
Date signed	

RBAir, Danbury

 First Aiders on Duty	AM	PM	Drivers
Monday	Sam Coles	Veronique Maingot	Veronique Maingot
Tuesday	Zoe Powell	Zoe Powell	Zoe Powell
Wednesday	Zoe Powell	Veronique Maingot	Zoe Powell Veronique Maingot
Thursday	Zoe Powell	Zoe Powell	Zoe Powell
Friday	Veronique Maingot	Veronique Maingot	Veronique Maingot

RBAir, Willow Lodge

 First Aiders on Duty	Staff	Students	Drivers
Monday	Sarah Wilson Pookie Russell	Steph Stannard Jaclyn Paules	Steph Stannard Jaclyn Paules David Golding

Tuesday	Ali Bigglestone Michelle Williams	Steph Stannard Jacyn Paules	Steph Stannard Jacyn Paules
Wednesday	Sarah Wilson Pookie Russell	Sally Mitchell Steph Stannard	Sally Mitchell Steph Stannard David Golding
Thursday	Sarah Wilson Pookie Russell	Sally Mitchell Jaclyn Paules	Sally Mitchell Jaclyn Paules
Friday	Sarah Wilson Pookie Russell	Steph Stannard Jacyn Paules	Steph Stannard Jacyn Paules

Mental Health First Aider	Elaine Beattie
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Policy contents:

1. Purpose	3
2. Scope.....	3
3. Policy statement, provision and safeguards	3
4. General first aid practice	3
5. First aid containers	4
6. First aid materials, equipment and facilities	4
7. Arrangements for learners with medical conditions	4
8. First aid personnel's main duties	7
First aid qualifications and training	7
First aid recording	7
Hygiene and infection control	8
Laboratories	6
Travelling first aid containers	9
9. Legislation and Guidance that inform this document	9
10. Other RBAir policies to be read in conjunction with this one	9

1. Purpose

This policy enshrines that RBAir, under the Health and Safety at Work etc Act 1974, must take reasonable steps to ensure that staff and learners are not exposed to risks to their health and safety. This applies to activities on or off Centre premises.

RBAir is committed to ensuring that all learners and staff work and study in a safe environment, and that, should an accident occur, then first aid will be available in a timely and competent manner. We seek to effectively implement all necessary guidance and ensure good practice in all areas of the provision of first aid.

2. Scope

The Headteacher holds responsibility for ensuring that there are sufficient trained staff to provide adequate cover. Those staff are responsible for providing support / treatment when needed and all staff hold responsibility for following health and safety guidelines.

3. Policy statement, provision and safeguards

The Headteacher must ensure that there is sufficient first aid provision for:

- lunch times and breaks;
- off-site activities;
- practical areas such as those for science, cookery and PE;
- any contractors working on-site.

They must also ensure that adequate arrangements exist to cover the absence of trained first aiders. The responsible Trustees will review RBAir's first aid provision with the Headteacher annually to ensure that standards are being met.

4. General first aid practice

Whenever learners are present on site, there will be at least one qualified first aider present on the site.

RBAir seeks to ensure that equipment is safe and fit for purpose, that staff are appropriately trained to carry out specific tasks and that there is always adequate first aid equipment available together with appropriately trained staff.

The Headteacher will ensure that sufficient trained personnel are available according to identified need as documented in the First Aid Needs Risk Assessment.

The Headteacher is responsible for informing all staff of the first aid arrangements, the location of equipment, facilities and first aid personnel, and the procedures for recording and reporting arrangements as well as monitoring each centre's first aid needs.

A list of first aiders must be displayed in the vicinity of the first aid box (a green box with a white cross on it). A list of trained first aid staff, together with details as to their training and

renewal of that training, is available and will be displayed at Reception. First aid information will be included in the induction programme for staff and learners.

5. First aid containers

There is no mandatory list of items for a first aid container box. However, the HSE recommends that, where there is no special risk, minimum contents are:

- a leaflet giving general advice on first-aid;
- twenty individually wrapped sterile adhesive dressings (assorted sizes);
- two sterile eye pads;
- four individually wrapped triangular bandages;
- six safety pins;
- six medium sized (12cm x 12cm) individually wrapped sterile unmedicated wound dressings;
- one pair of disposable gloves.

Equivalent or additional items are acceptable

(Source: Guidance on First Aid for Schools: A Good Practice Guide)

6. First aid materials, equipment and facilities

There will be at least one first aid box (marked with green cross on white background) on each floor; additional containers are used for visits to sports fields, playgrounds or off-site activities and Link Mentors carry a travel first aid kit in their car.

Inhalers must be carried on trips as required.

The first aiders are responsible for monitoring the contents of the first aid kit, replacing items as soon as possible after use. Items that have passed their expiry date should be safely discarded. Extra stock should be kept in the centre. The visibility of first aid boxes is crucial and should be given careful consideration. If possible, they should be kept near hand washing facilities.

In Danbury, the therapy room is available as a space to care for sick or injured learners. In Cambridge, there is a medical room which can be allocated immediately upon need.

7. Arrangements for learners with medical conditions

RBAir will collect all available medical information regarding each learner referred to them. That information will be stored and circulated to staff as necessary.

Where learners are required to take medication at a centre, then advice will be sought from parents / carers and appropriate medical practitioners regarding the safest way of ensuring that the medication is stored (if required) and taken.

If a learner becomes ill whilst at a centre, there will be a medical room available. The learner will be taken to that room, a trained first aider will ascertain any necessary course of action and that will be followed with immediate effect. Parents / carers will always be notified, and arrangements made to ensure that the learner is able to 'get home safely'. Where a learner has a known condition (e.g. asthma, epilepsy, diabetes), full information and advice will be sought from parents / carers and medical staff. A record will be kept on the learner's file. If an IHP (Individual Health Care Plan) exists, information will be circulated to staff as required.

RBAir Guide to Conditions

Asthma

If a learner suffers from an asthma attack, staff will:

- keep calm and reassure the learner;
- encourage the learner to sit up and slightly forward;
- encourage the learner to use her/his own inhaler – if not available, they will provide an emergency inhaler;
- remain with the learner while the inhaler and spacer are brought to them;
- immediately help the learner to take two separate puffs of salbutamol via the spacer;
- if there is no immediate improvement, continue to give two puffs at a time every two minutes, up to a maximum of 10 puffs;
- stay calm and reassure the learner;
- stay with the learner until they feel better when they can return to Centre activities.

If the learner does not feel better or staff are worried, then an ambulance will be called.

Epilepsy/seizure

If a learner undergoes an epileptic fit, staff will:

- protect the learner from injury (remove harmful objects from nearby);
- place something soft, such as a folded sweater, under their head;
- help the learner to breathe by gently placing them in the recovery position once the seizure has finished;
- stay with the learner until they come round and are fully recovered;
- be calmly reassuring.

They will not:

- restrain the learner's movements;
- put anything in the learner's mouth;
- try to move them unless they are in danger;
- give the learner anything to eat or drink until they are fully recovered;
- attempt to bring them round.

If any of the following occur, an ambulance will be called:

- the seizure continues for more than usual for that learner or longer than five minutes;
- one seizure follows another without the learner regaining consciousness in-between;
- the learner is injured during the seizure;
- the learner has difficulty in breathing.

Diabetes

If RBAir admits a learner with diabetes:

The learner should have an IHP detailing the type of their diabetes. This should also provide details of triggers and symptoms for hyperglycemia (high blood sugar level) and hypoglycemia (low blood sugar level). As a general rule, a learner suffering from hyperglycemia needs to drink and to go to the toilet as they need. They may require extra insulin. A learner suffering from hypoglycemia will usually require something sugary to eat or drink.

Allergies and Anaphalaxis

Learners with known allergies:

Medical information will always be sought at the point of referral. If a learner has a known allergy, then advice will be sought as to how occurrence of the allergy can be prevented or reduced to the minimum possible level.

Signs of Anaphalaxis – Call 999

If a learner suffers an anaphylactic reaction (symptoms may include swelling of tongue and/or throat, difficulty in swallowing or speaking, vocal changes e.g. hoarse voice, wheeze or persistent cough or severe asthma, difficult or noisy breathing, stomach cramps or vomiting after an insect sting, dizziness / collapse / loss of consciousness),

In **severe cases**, an allergic reaction can progress within minutes into a life-threatening reaction. Administration of adrenaline can be lifesaving, although severe reactions can require much more than a single dose of adrenaline. It is therefore vital to contact **Emergency Services – Call 999** as early as possible. Delays in giving adrenaline are a common finding in fatal reactions. Adrenaline should therefore be administered immediately, at the first signs of anaphylaxis.

[Using emergency adrenaline auto-injectors in schools - GOV.UK](#)

Learners will be encouraged to carry their own AAls and will be assisted by staff to administer their own response where practicable.

Managing Injuries due to Self-Harm

RBAir manages incidents of known/shared self-harm in a sensitive, transparent manner and will train staff to administer First Aid to learners who have asked for or agreed to support. All incidents of self-harm will be reported to the DSL and Safeguarding practices will be put in motion. Staff will be trained to recognise if wounds/burns are severe enough to require medical intervention. Any incidents where this is apparent will be immediately relayed to the DSL.

First Aid may include:

Cuts and wounds

- Apply pressure to bleeding cuts using a bandage or towel (a tea towel may be less likely to stick to the wound)
- Clean the wound under running tap water and apply a sterile adhesive dressing
- If the wound has become infected (swelling, pus forming or spreading redness), Safeguarding Procedures will be immediately actioned.

Burns

- Cool with cold water for 10 to 30 minutes, then cover with cling film
- Don't use ice or any creams or greasy substances such as butter

Linked policies include:

- Safeguarding Policy
- First Aid Policy

8. First aid personnel's main duties

The first aiders' main duties are to give immediate help to casualties with common injuries, and, when necessary, to ensure that an ambulance or other professional medical help is called.

First aid qualifications and training

The Headteacher is responsible for ensuring that all first aid training courses are approved by the HSE and updated as required. A First Aid at Work Certificate is valid for only three years. Refresher training must be arranged three months before a certificate expires.

First aid recording

A record will be kept of any first aid treatment given by first aiders; this will include:

- the date, time and place of the incident;
- the name of the injured or ill person;
- details of the injury or illness and first aid given;

- what happened to the person immediately afterwards (i.e. did they go home, resume normal duties, go back to class or go to access further treatment);
- the name and signature of the first aider or person dealing with the incident.

Parents / carers will always be informed of any accident. Centre staff will attempt to contact the parent / carer by telephone, text or email. Should it not be possible to make immediate contact, messages will be left (e.g. voicemail, work colleagues etc) asking the parent / carer to contact the centre. Parents / carers will have right of access to any records made regarding the accident, and, should they feel that practice has been insufficient (either to prevent the accident or in responding to it), then their rights as described within the centre's complaints procedures will be explained to them.

Some accidents are reportable to the HSE under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR) and the administrator should check if this is necessary after an incident. The accident record book will be kept in the office at each centre.

Hygiene and infection control

Staff should take precautions to avoid infection and must follow basic hygiene procedures. Staff should have access to single-use disposable gloves and hand-washing facilities and should take care when dealing with blood or other body fluids, and when disposing of dressing or equipment.

Blood and body fluids (BBF) may contain disease causing micro-organisms, thus any 'deposits' must be dealt with as soon as possible after a spillage has occurred. BBF may be blood, faeces, pus or vomit. It is the responsibility of all staff to deal promptly with such spills. BBF spills may be classified as high or low risk and this will determine the recommended cleaning process to be employed.

A **low risk** spillage may be a urine spill through careless toilet usage, or an area that has been observed as being accidentally coughed or sneezed upon.

A **high risk** spillage may be blood or vomit: both should be considered potentially hazardous. Any staff cleaning up such a spill must ensure that all precautions (gloves, appropriate cleaning materials and disposal) are pursued to reduce the likelihood of infection. Any materials produced from such clean up must be placed into a refuse bag (a store is kept on site) and the bag disposed of into the large bin kept externally at each Centre.

The Science Room/Science Area

The Headteacher and science staff will ensure that eyewash (in date) is available for use should that be necessary.

Travelling first aid containers

HSE recommend that where there is no special risk for off-site activities, a minimum stock of items for travelling first aid containers is:

- a leaflet giving general advice on first-aid;
- six individually wrapped sterile adhesive dressings;
- one large sterile unmedicated wound dressing (18cm x 18cm);
- two triangular bandages;
- two safety pins;
- individually wrapped moist cleansing wipes;
- one pair of disposable gloves.

Equivalent or additional items are acceptable. Additional items may be necessary for specialised off-site activities.

9. Legislation and Guidance that inform this document

- Health and Safety Advice for Schools (DfE – updated Feb 2014)
- Health and Safety at Work Act etc (1974)
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (1995)
- Guidance on First Aid for Schools - a Good Practice Guide

10. Other RBAir policies to be read in conjunction with this one

- Health and Safety at Work Policy: Procedures for reporting accidents are detailed in this policy
- Risk Assessment Policy
- Supporting Learners with Medical Needs Policy
- Safeguarding Policy