



Redcastle Family School First Aid and Supporting Pupils and Staff with Medical Conditions Policy

Formally adopted by the Governing Body of:	Redcastle Family School
On:	
Adopted by Governors	
Last updated:	September 2026
Review date:	September 2027 or sooner if statutory guidance changes

Introduction

Redcastle Family School provides prompt and appropriate first aid for pupils, staff and visitors and makes effective arrangements to support pupils with medical conditions. This policy explains the school's first-aid provision, the safe management of medicines and the individual support that enables pupils with medical conditions to access education, including school trips and physical education, as fully and safely as possible.

What does First Aid include?

The term First Aid means treating someone who is injured or unwell to keep them alive or stop their condition worsening until medical help arrives; and treating minor injuries which do not require medical help. First aid does not normally include giving medicines.

Responsibilities

The Headteacher, Mr Julian, must see that appropriate first aid provision is made for all staff. This will be via a delegated set of staff who are responsible for specific duties and actions outlined in this policy. Please see the section of a full list of those responsible for First Aid at Redcastle Family School.

First Aid Needs Assessment

First aid provision is no longer based upon fixed numbers of first aiders per member of staff and a list of required contents of first aid boxes. Instead the approach we are now required to use involves making an assessment at our own workplaces and determining for ourselves: the numbers and types of first aiders we need; what we need in our first aid boxes, and whether we need any other facilities or equipment.

How do we perform the first aid needs assessment?

The aim of the first aid needs assessment is to produce first aid provision that is tailored to our own individual workplaces, the people who work there and the risks they face from the work that they do.

Types of first aid personnel

According to the findings of your first aid needs assessment, you will need to provide appropriate first aid personnel. Redcastle Family School expects only designated, trained members of staff to administer first aid. Where appropriate they may call on others to support in the process in an emergency. We recommend that during serious incidents emergency first aid is administered in pairs and overseen by a member of the administration team or SLT. The role of other staff is to ensure appropriate cover and communication is provided to ensure all children are kept safe during the time of an incident.

First Aid at Work

- Emma Denty
- Laura Heffernan
- Maria Jobbins
- James Julian
- Catherine Paynter
- Thomas Stansfield
- Lee Wicks

Paediatric first aid

- Jennifer Aust
- Amy Beavis
- Maria Jobbins
- Alice Stannard
- Caitlin Thelwell
- Sam Wakeling
- Kate Wright

EYFS paediatric first-aid arrangements are set out in the school's separate Early Years Foundation Stage (EYFS) Policy. That policy reflects the current EYFS statutory framework, including the requirement for appropriate paediatric first-aid cover to be available whenever EYFS children are present and on outings.

School First Aid

- Karlie Barrett
- Theresa Bell
- Bonnie Porter
- Cheri Boone
- Lorraine Brand
- Jasmine Bugeja
- Ana Caldeira
- Carol Catchpole
- Michael Dennis

- Sam Dorrell
- Natasha Downes
- Kemp Emma
- Destiny Fathers
- Elaine Gilmore
- Jayne Hedger
- Ciara Hibbert
- James Higgs
- Kerry Holloway
- Ashley Jenkins
- Carmen Jobbins
- Kelly Kemp
- Martina Korenova
- Carol Lister
- Clare Lund
- Skaiste Meliauskaite
- Kristen Millington
- Dionne Robinson
- Donna Wells

Mental Health First Aid

- Michael Dennis
- Emma Denty
- Laura Heffernan
- Alice Stannard

Forest School

- Sian Lewis

First aid kits

There is **no** definitive list of what should be in a first aid kit. The contents of each kit will be determined by the first aid needs assessment. The list below has been identified for appropriate use at Redcastle Family School by completing the First Aid assessment (Appendix 1)

FIRST AID BOX – CONTENTS (Classroom & Travel)

- 2 Ice Packs
- 2 Vomit Bags
- 10 sterile cleansing wipes
- Assorted Plasters
- 5 Aprons
- Nappy Bags
- 5 Face Masks
- Disposable nitrile gloves (appropriate quantity and sizes)
- 2 x 10 x 10cm sterile individually wrapped dressings
- 4 x 5 x 5cm sterile individually wrapped dressings
- 1 large sterile individually wrapped dressing
- 1 medium sterile individually wrapped dressing
- 2 x 5 pack of swabs
- 1 pair of scissors
- Microporous Tape
- HSE Leaflet
- Safety Pins

FIRST AID BOX – CONTENTS (SUPPLEMENTARY OFFICE BOX)

- 4 x 10 x 10cm sterile individually wrapped dressings
- 4 x 5 x 5cm sterile individually wrapped dressings
- 2 large sterile individually wrapped dressings
- 2 medium sterile individually wrapped dressings
- 2 sterile eye pads
- 1 triangular bandage
- 4 x 5 pack of swabs
- Absorbent gauze
- Scissors
- Disposable nitrile gloves (appropriate quantity and sizes)
- Microporous Tape
- 10 x Wound Closures

Medication

First aid does not normally include administering medication. Medicines are not kept in first-aid kits. The arrangements for medicines and emergency medication are set out in the section below and in each pupil's Individual Healthcare Plan where one is required.

Supporting pupils with medical conditions

Redcastle Family School will make arrangements to support pupils with medical conditions in accordance with section 100 of the Children and Families Act 2014. In doing so, the school will have regard to the Department for Education's statutory guidance Supporting pupils at school with medical conditions. The school will also meet its duties under the Equality Act 2010, including making reasonable adjustments for disabled pupils, and will follow the separate statutory guidance Allergy safety in schools.

The school will ensure that pupils with medical conditions are properly supported so that they can play a full and active role in school life, remain healthy and achieve their academic potential. The school will not deny a pupil admission, exclude them from activities or routinely send them home simply because of a medical condition where reasonable support and adjustments can enable safe participation.

Leadership and responsibilities

The governing body will retain overall responsibility for ensuring that suitable arrangements are in place and that this policy is implemented. The Headteacher will be responsible for its day-to-day implementation and will identify a named member of staff to coordinate support for pupils with medical conditions. The Headteacher will:

- ensure sufficient trained staff are available, including for cover, school trips and emergencies;
- make sure relevant staff are aware of a pupil's condition and the agreed support, while respecting confidentiality;
- ensure risk assessments and emergency procedures take account of pupils' medical needs;
- work with parents, pupils, healthcare professionals and relevant local authority services;
- monitor arrangements, incidents and near misses and take action where improvements are needed; and
- ensure appropriate insurance and liability cover is in place for staff acting within their training and this policy.

The school will ensure that all staff know how to obtain help in an emergency. Any member of staff may be asked to support a pupil with a medical condition, but the school will not require a member of staff to administer medicine or undertake a healthcare procedure without appropriate information, training and confidence to do so. In an emergency, staff will act promptly within their competence and call 999 when required.

The school will ask parents and carers to provide accurate, up-to-date information, medicines and equipment, to tell the school promptly about any changes and to take part in developing and reviewing their child's plan. The school will involve pupils according to their age, understanding and capability and will encourage them to tell an adult if they feel unwell or need help.

Notification and transition

When the school is notified that a pupil has a medical condition, it will put appropriate arrangements in place as soon as practicable. For a new pupil, the school will normally complete these arrangements before admission or, where this is not possible, within two weeks. For a newly diagnosed pupil or a change in need, the school will agree interim measures without waiting for the full plan. The school will transfer information securely at transition points and before a pupil moves class or setting.

Individual Healthcare Plans

The school will use an Individual Healthcare Plan where a pupil's condition is long-term, complex, fluctuating or life-threatening, requires emergency intervention, affects attendance or access to learning, or where a plan would otherwise help staff provide safe and consistent support. Not every pupil who takes medicine will need a plan. The school will make this decision with the parent or carer and the relevant healthcare professional. If agreement cannot be reached, the Headteacher will make the final decision in the pupil's best interests, taking account of medical evidence.

The school will normally record the following in the plan:

- the condition, triggers, signs, symptoms and treatments;
- the pupil's resulting needs, including medicine, equipment, dietary requirements, environmental adjustments and access to toilets or rest;
- the effect on learning, attendance and participation and the reasonable adjustments required;
- what the pupil can manage independently and the support expected from staff;
- named staff, training needs, cover arrangements and who may access the information;
- arrangements for written parental consent and for receiving, storing, administering and disposing of medicines;
- arrangements for trips, PE, clubs, transport and other activities outside the usual timetable;
- what constitutes an emergency, the action to take, whom to contact and any follow-up required; and
- any separate arrangements needed for examinations, evacuation or periods of absence.

The school will develop each plan with the pupil, parent or carer, the school nurse or other appropriate healthcare professional, and relevant school staff. The school will make the plan readily available to staff who need it, store it securely and review it at least annually, whenever needs or treatment change, and after a relevant serious incident or near miss.

Managing medicines

The school will only administer medicines when it would be detrimental to a pupil's health or attendance not to do so. Wherever possible, the school will ask parents or carers to check with the prescriber whether doses can be taken outside the school day. The school will only accept medicines that are in date, labelled, supplied in the original container as dispensed by a pharmacist, and accompanied by clear written instructions. The school will accept insulin supplied in a pen or pump rather than its original container.

- The school will obtain written parental consent before administering medicine, except where emergency action is necessary to preserve life.
- Non-prescription medicine will only be given where the school has agreed this is appropriate, with written parental consent and clear instructions; aspirin will not be given to anyone under 16 unless prescribed by a doctor.
- The school will store medicines securely while ensuring they remain readily accessible when needed. The school will never place emergency medicines where access would be delayed.
- Controlled drugs will be stored securely with access limited to named staff, while allowing a pupil who is competent to carry their own prescribed controlled drug where this has been agreed.

- The school will make a written record whenever medicine is administered, including the date, time, dose and the name of the person administering or supervising it.
- If a pupil refuses medicine, staff will not force them. The agreed procedure will be followed and parents will be informed; emergency services will be contacted if the pupil's condition requires it.
- The school will ask parents or carers to collect expired or no-longer-required medicines and will dispose of sharps in an approved sharps container.

Self-management and access to emergency medication

The school will encourage pupils who are competent to manage their own health needs to do so, with an appropriate level of supervision. Where agreed in the Individual Healthcare Plan, the school will allow them to carry their own inhaler, adrenaline device, glucose treatment or other emergency medicine. If a pupil does not carry it, the school will keep it in an agreed location that is known to relevant staff and is immediately accessible. The school will keep a spare device or dose available where prescribed or required by current statutory guidance.

The school's separate Allergy Safety Policy sets out arrangements for allergy awareness, allergen risk reduction, emergency adrenaline, staff training, incident reporting and learning. In accordance with section 100A of the Children and Families Act 2014, as inserted by the Children's Wellbeing and Schools Act 2026 and in force from 1 September 2026, the school will maintain a written Allergy Safety Policy, review it at least annually, make it known within the school and to parents, bring it to the attention of pupils, parents and staff at least annually, and publish it on the school website. The school's emergency asthma inhaler, if held, will only be used in accordance with current government guidance, parental consent and the school's agreed protocol.

Staff training

The school will identify training needs whenever a plan is developed or reviewed. It will ensure that training is delivered or confirmed by an appropriate healthcare professional and is specific to the pupil and procedure. The school will not permit staff to give prescription medicine or undertake a healthcare procedure until they have been assessed as competent where this is required. The school will provide whole-school awareness training proportionate to need, including emergency response and allergy awareness. It will retain training records and arrange refresher training before competence expires or whenever needs change.

Emergency procedures

The school will ensure that each Individual Healthcare Plan states clearly what constitutes an emergency and the action staff will take. If emergency assistance is required, a member of staff will call 999, provide the pupil's known medical information and follow the call handler's instructions. The school will contact the pupil's parents or carers, but will not allow this to delay urgent treatment. A member of staff will remain with the pupil and, where necessary, accompany them to hospital until a parent or carer arrives. The school will not permit staff to take a pupil to hospital in their own vehicle unless this has been specifically risk assessed and is the safest available response.

Trips, physical education and wider school life

The school will support pupils with medical conditions to participate in trips, residential visits, PE, clubs and other activities. Its planning and risk assessments will consider staffing, training, emergency contacts, access to medicines and equipment, transport, food and accommodation. The school will only exclude a pupil where, after making reasonable adjustments and consulting parents or carers and healthcare professionals, participation would still present an unacceptable risk that cannot be safely managed.

Unacceptable practice

The school will not:

- prevent a pupil from easily accessing prescribed medicine, equipment or support;
- assume that every pupil with the same condition requires the same support;
- ignore the views of the pupil, parent or medical evidence, or send a pupil home frequently without good reason;
- penalise a pupil's attendance record for absences related to their medical condition, such as appointments or treatment;
- require parents to attend school to administer medicine or provide medical support as a condition of attendance;
- prevent pupils from drinking, eating, taking toilet or rest breaks, or otherwise managing their condition where this is medically necessary; or
- create avoidable barriers to trips, PE or other school activities.

Records, confidentiality and review

Healthcare plans, consent forms, administration records, training records and relevant incident or near-miss records will be kept securely and shared only with those who need the information to keep the pupil safe and supported. Information will be handled in accordance with data-protection law and the school's privacy and records-management arrangements.

Following a serious incident or near miss, the Headteacher or delegated lead will ensure that immediate needs are addressed, parents and relevant professionals are informed, required reports are made, and a proportionate review identifies learning and actions. Complaints about the support provided should be raised through the school's complaints procedure.

Supporting staff with medical conditions

Redcastle Family School will support employees with physical or mental health conditions so that, wherever reasonably possible, they can remain safe, well and effective at work. The school will treat staff fairly, will not discriminate because of disability and will make reasonable adjustments where required by the Equality Act 2010. The school will also meet its duties under health and safety, employment and data-protection law and will follow the relevant Norfolk County Council employment policies and procedures.

Leadership and responsibilities

The governing body will retain overall responsibility for ensuring that appropriate arrangements are in place. The Headteacher will manage these arrangements on a day-to-day basis, supported where appropriate by the employee's line manager, Human Resources, Occupational Health, the school's health and safety adviser and other relevant professionals. Where the Headteacher requires support for a medical condition, the Chair of Governors or another appropriate governor will oversee the arrangements.

The school will:

- respond promptly and sensitively when a member of staff discloses a medical condition or asks for support;
- discuss the effect of the condition on the employee's work and the support or adjustments that may be needed;
- assess and manage any health and safety risks without making assumptions about what the employee can or cannot do;
- seek appropriate professional advice, with the employee's knowledge and consent where required;

- ensure that managers and colleagues who need information to keep the employee or others safe receive clear, proportionate instructions; and
- review arrangements when the employee's health, treatment, role or workplace changes.

Employee responsibilities

Employees are encouraged to tell the Headteacher or their line manager, as soon as reasonably practicable, about a health condition that may affect their safety, attendance or ability to carry out their role, or that may require support in an emergency. Employees will be expected to provide relevant information, take part in risk assessments and reviews, follow agreed safety arrangements and inform the school when their needs change.

Confidentiality and medical information

The school will handle information about an employee's health confidentially and in accordance with data-protection law and the school's privacy and records-management arrangements. Information will only be shared with people who genuinely need it for employment, support or safety purposes. Wherever possible, the school will agree with the employee what information will be shared, with whom and why. The school may share essential information without consent where this is necessary to protect life, prevent serious harm or meet a legal duty. Where further medical advice is needed, the school may seek an Occupational Health assessment or, with the employee's consent, a report from an appropriate healthcare professional. The school will explain why the information is needed and how it will be used.

Workplace support and reasonable adjustments

The school will meet with the employee to identify barriers and consider practical support. Where the employee is disabled within the meaning of the Equality Act 2010, the school will make reasonable adjustments to remove or reduce any substantial disadvantage. The school may also agree suitable support where a condition does not meet the legal definition of disability. Adjustments will be considered individually and may include changes to duties, working arrangements, hours, breaks, workspace or equipment; time to attend treatment; additional supervision or support; a phased return to work; temporary redeployment; or an agreed emergency arrangement. Any adjustment will take account of the employee's needs, medical advice, the requirements of the role, the effect on pupils and colleagues, health and safety, practicability, cost and available resources. The school will record agreed adjustments and review them at appropriate intervals.

Individual staff health and emergency plans

Where a condition is complex, fluctuating, life-threatening or may require assistance at work, the school will agree an individual staff health or emergency plan with the employee. The plan may record relevant signs and symptoms, triggers, support and adjustments, emergency action, medication or equipment, named contacts, evacuation arrangements, who needs to know and when the plan will be reviewed. The employee will receive a copy and the school will keep the plan securely while ensuring it is readily available to those who may need to act on it.

Medication and equipment

Staff will normally remain responsible for carrying, storing and using their own prescribed medication and medical equipment. Where an employee needs the school to provide secure storage, refrigeration, disposal facilities or emergency access arrangements, the school will agree these with the employee and record them where appropriate. Medication must be clearly labelled,

in date and used only by the person for whom it was prescribed. Staff must not use a pupil's medication or supply their own medication to another person.

Sickness absence and return to work

The school will manage sickness absence and return-to-work arrangements under the relevant Norfolk County Council and school employment procedures. It will maintain appropriate contact during absence, hold return-to-work discussions and consider medical advice, reasonable adjustments, disability-related absence and a phased return where appropriate. The school will not treat capability or dismissal as an automatic consequence of a medical condition; any formal action will follow the applicable procedure, consider reasonable adjustments and current medical evidence, and be taken only after appropriate support and alternatives have been explored.

Emergencies involving staff

If a member of staff becomes seriously unwell or has an accident at work, the school will provide first aid, call 999 when required and follow any known individual emergency plan. The school will contact the employee's emergency contact where appropriate, but will not allow this to delay urgent treatment. A colleague will remain with the employee until appropriate help arrives where it is safe to do so. The school will record and report the incident in accordance with its accident-reporting arrangements and will review any relevant risk assessment or support plan afterwards.

First aid rooms

First aid rooms are normally only necessary where employees are engaged in higher risk activities. Some larger premises may have sick rooms in case staff are taken ill and schools may provide quiet rooms where children can be treated for minor injuries. Redcastle Family School has a first aid room located in the reception of the office. This room can be utilised for pupils and staff as required.

As part of their assessment of an incident, the first aider must decide whether to move the individual to an appropriate space for treatment (medical room or safe space if this move would add further harm to the individual). If the injuries / assessment do not allow the individual to be moved, then the first aider must call for assistance from medical administration team, who will bring the relevant equipment to the point where the incident occurred. In this instance, a member of the SLT must also be notified by the medical administration team to support the incident as required.

Infection prevention when providing first aid

Staff will follow current infection prevention and control guidance when administering first aid. Appropriate PPE will be used according to the assessed risk of exposure to blood, bodily fluids or respiratory infection. Hands should be cleaned before and after treatment where practicable, and contaminated equipment and waste must be disposed of safely.

Life-saving treatment must not be delayed because PPE is not immediately available. Staff will follow current Resuscitation Council UK guidance for CPR and use a resuscitation face shield or other appropriate barrier device where available and indicated.

Automated External Defibrillator (AED)

Where an AED is held on site, the school will ensure that its location is clearly communicated to staff, it is readily accessible in an emergency, and routine checks are completed in accordance with the manufacturer's instructions. Pads, batteries and other consumables will be monitored for expiry or replacement. In an emergency, staff should call 999, begin CPR where required and use the AED as soon as possible, following the device prompts and emergency-service instructions. The school will follow current Department for Education and Resuscitation Council UK guidance on AED provision and use.

Implementing site arrangements

Our provision ensures that first aid can be administered without delay and be available at all times and we have arrangements in place to ensure that:

- Staff are aware of the PPE that must be worn when administering first aid to people showing signs of respiratory infection (outlined in the Infection Control Compliance Code) and received instruction in how to put on, take off PPE and dispose of it.
 - Appropriate first aid procedures and requirements that are outlined in the Infection Control Compliance Code and understood and implemented
 - First aid equipment including PPE is regularly checked and re-ordered.
 - Parents/carers are contacted as soon as possible in the event of a serious injury.
- In the case of first aid treatment or response, inform parents or carers of any accident or injury sustained by the pupil on the same day, or as soon as reasonably practicable, of any first aid treatment given.
- Report incidents requiring first aid treatment using the online Incident Reporting System applying the criteria set out in Introduction to Incident Reporting G601e.

Notify healthandsafety@norfolk.gov.uk as soon as possible in the event of a serious incident in connection with the settings activities.

Where an incident meets the statutory reporting criteria, it will be reported under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR) through the school's/employer's agreed reporting arrangements.

Communication information

All employees, pupils (and other site users) are aware of our first aid arrangement's

- Equipment
- Facilities
- First aiders or appointed person

All staff should know how to contact a first aider or appointed person urgently should the need arise. The information should be clear and easy to understand and shared with employees, pupils, contractors and visitors to the school or college as appropriate.

Recording first aid treatment

Redcastle Family school recognises It is necessary to record on Eduspot (RFS's management system) any first aid treatment that is given. A record should be made of:

- the date, time and place of the incident
- the name and job of the injured or ill person
- details of the injury or illness and what first-aid was given
- what happened to the person immediately afterwards, eg went back to work, went home, went to hospital
- name and signature of the first aider or person dealing with the incident

The form [First aid record of treatment \(confidential when completed\) Form F608a available on Infospace](#) is used to record first aid treatment in staff. Copies of completed forms, on paper or electronic, are confidential and will always be stored securely.

Communication of first aid incidents must be shared with parents, this should occur through teaching staff or administration staff. If the incident is serious enough to warrant further or emergency medical attention, then it is the job of the first aid responders to communicate this to the parent/ guardian and make a record of this in their incident logs.

Protocol for reporting, recording and communicating First Aid to children:

1. First Aid incident occurs: Staff locate first aider (FA) by
 - a) those in close proximity, b) radio call for areas outside of classrooms c) phone call to office.
2. First aid incident is assessed by a qualified FA. FA then identifies whether incident is major or minor (See definition in policy above). Head injuries will also be dealt with in this manner however, there is a different approach to communicating first aid attention for this.
3. **Minor incidents** are treated by FA and recorded using the electronic Eduspot form. (All sections completed apart from communication to parents).
4. **Major incidents** will either require parents to arrive at school or communication with emergency services. The first aider will complete first aid with support of other first aiders. They will remain with casualty until treatment is completed or taken over. They will agree the appropriate actions using the training they have been given.
They will communicate directly with the parent/ emergency services and be ready to record this in detail on the accident report form on Eduspot.
5. **Communicating minor incidents** (not including head injuries) **All staff responsible for recording first aid must have done so by 3:00 p.m. at the latest each day.**
At 3:00 pm Office staff will check the day's list and send out generic message to parents of children informing them that minor first aid has been completed. Parents are then able to ring the school to check on details if they wish.
6. **Head injury incident.** Any incident that requires first aid to the head area must be recorded and communicated in the following way: The incident should be assessed as with steps 1-4. If the injury is to the head then the FA must inform the office who will then take responsibility for communicating this to the parents. **FA must still complete this on Eduspot.** The office will then check the communicated to parents box on the first aid form once the information has been shared.

Appendix 1 First Aid Assessment

This assessment will be reviewed at least annually and sooner where staffing, pupil needs, premises, activities, incident patterns or statutory guidance change. Historical staffing and first-aider figures should not be relied upon; the current assessment and training records determine the provision required.

Our approach to first aid provision and the terms used in the form below are explained in our document: *First Aid Compliance Code, P608*. You should complete the form below, considering the guidance provided, and commenting on the circumstances of your own workforce/workplace. At the end of the form there is space for you to record your decisions on the numbers and types of first aid personnel and first aid equipment that you will need.

You may find the case studies in the Health and Safety Executive document: [First aid at work The Health and Safety \(First-Aid\) Regulations 1981 Guidance on needs assessments](#) helpful in determining the level and nature of first aid provision that you will need.

Name and address of premises /site		
Factors	Guidance	Comments (box is expandable)
Does your workplace have low level hazards such as those that might be found in offices?	The minimum provision is: - an appointed person to take charge of first aid arrangements - a suitably stocked first aid box	Yes- See RFS FA Policy for specific arrangements.
Does your workplace have higher level hazards such as chemicals or dangerous machinery?	You should consider: -providing first aiders -providing suitably stocked first aid boxes -the precise location of first aid equipment -informing the emergency services of specific hazards in advance	Yes- See RFS FA Policy for specific arrangements.
Do your work activities involve special hazards such as working at height, working with acids or in confined spaces?	You should consider: -providing first aiders -additional training for first aiders to deal with injuries resulting from special hazards -additional first aid equipment -the precise location of first aid equipment -providing a first aid room -informing the emergency services of specific hazards in advance	Yes- See RFS FA Policy for specific arrangements.
The nature of the workforce The particular needs of young workers, trainees, pregnant workers and employees with disabilities or particular health problems, where known (eg asthma, diabetes, peanut allergy, epilepsy or a history of heart disease), should be addressed		

How many people are employed on site?	Generally, the larger the workforce, the greater the first-aid provision that is required. However, employee numbers should not be the sole basis for determining first-aid needs. A greater level of provision may be required when fewer people are at work but are undertaking more high-risk tasks such as maintenance work. This is a general guide to first aid personnel requirements. It should be balanced against the other factors applicable to your premises / operations. Where there are small numbers of employees, the minimum provision is: – an appointed person to take charge of first-aid arrangements; – a suitably stocked first-aid box. Where there are large numbers of employees, ie more than 25, even in low- hazard environments, you should consider providing: – first-aiders; – additional first-aid boxes	Current staffing and pupil numbers are reviewed as part of the school's annual first-aid needs assessment. The number and type of first-aid personnel required will be determined by the current workforce, pupil profile, site layout, activities and identified risks, rather than by historic fixed numbers.
Are there any inexperienced workers on site, or employees with disabilities or particular health problems?	You should consider: – additional training for first- aiders; – additional first-aid equipment; – local siting of first-aid equipment. Your first-aid provision should cover any work experience trainees	N/A- EFAW all allocated to specific areas of school for ease of access if required.
What is your injury / ill health record (i.e. what injuries / illness has occurred and where)	Ensure your first-aid provision will cater for the types of injuries and illnesses that have occurred in your workplace. Monitor accidents and ill health and review your first-aid provision as appropriate.	See Medical Accident Log.
Do you have employees who travel a lot, work remotely or work alone?	The assessment should determine whether those who travel long distances or are continuously mobile should carry a personal first-aid kit. Are your communications arrangements appropriate?	Yes- Please Remote working policy.

Do any of your employees work shifts or out of hours?	You should ensure there is adequate first-aid provision at all times people are at work.	No
Are the premises spread out, e.g. are there several buildings on the site or multi floor buildings?	You should consider how the size of the premises could affect quick access to first-aid facilities. For example, whether additional first-aid provision is needed on a site with more than one building, or whether the distance between buildings is such that additional provision would be unnecessary. If you have a multi-floor building you should consider how many first-aiders or appointed persons will be required to give adequate provision to employees on each floor. You should also consider employees who work in self-contained areas and how their needs are assessed and met.	Yes- First aid facilities are spread around site and allocated to classroom or all working areas.
Is your workplace remote from emergency medical services?	If you are remote from emergency medical services you may need to consider emergency transport arrangements should an incident occur. Consider too how employees can summon help – do they have easy access to a phone?	No
Do any of your employees work on shared / multi occupied sites, occupied by other employers or other sections of NCC?	You can either decide to make separate provision for your employees, or you may wish to have an agreement whereby one of the employers / partners takes responsibility for all the first aid facilities. If you have the situation where another employer / partner is taking care of the first aid provision you need to fully explain your identified hazards and risks to them so that you can be satisfied that the provision is adequate for your needs. A written agreement is always recommended to help avoid misunderstandings	No
Do you have sufficient provision to cover absences of first aiders or appointed persons?	It is essential to ensure first aid cover is available at all times people are at work. You need to ensure that there is cover for both planned and unplanned absences of first aid personnel. Remember to cover situations such as lunch breaks, planned annual leave, training	Yes

	courses and for unplanned absences such as sick leave.	
--	--	--

